

Text of Proposed Rulemaking

Item 1. Adopt the following **new** Title:

TITLE XVII

AGING AND DISABILITY SERVICES

Item 2. Reserve chapters 200 through 220.

Item 3. Adopt the following **new** chapter 221:

Chapter 221

Disability Services Definitions

441—221.1(225A) Definitions. For the purpose of these rules, the following definitions apply:

“Adult” means a person, or persons aged 18 years of age and over.

“Chairperson” means the chairperson of the disability services advisory council, who has been appointed by the DAP.

“Caregiver” means an adult family member or other individual who has a significant relationship with, and who provides a broad range of assistance to, an individual with a chronic or other health condition, disability, or functional limitation. Caregiver also means a family member, friend, or neighbor who provides unpaid assistance to a person with a chronic illness or disabling condition.

“Child” or “children” means a person or persons under 18 years of age.

“Disability” means the same as defined in section 3 of the Americans with Disabilities Act of 1990 (42. U.S.C 12012, as amended to July 1, 2025).

“Disability access point” or “DAP” means a local organization designated by the department to serve as the primary access points for people with disabilities and their caregivers. DAPs serve as ADRC member organizations as defined in rule 441—224.1.

“Disability services advisory council” or “DSA council” means a council established by each DAP to identify opportunities, address challenges, and advise the DAP.

“Long-term services and supports” or “LTSS” means activities that support maintaining people with disabilities at the lowest level of care possible, including facility diversion or transition to community as determined through the DAP processes for eligibility and service determination. LTSS will be outlined in the individual’s service plan between the individual, care team, and DAP.

“Service coordination” means an active, transitional and ongoing process that involves assisting an eligible individual in gaining access to and coordinating the provision of services; using person-centered practices in all contacts with individuals and their caregivers; and coordinating the services identified in the service plan.

“Short-term services and supports” or “STSS” means time-limited activities focused on supporting people with disabilities to live in the home and community of their choice in an integrated manner and offering support to their families and caregivers as needed toward this purpose. STSS will be outlined in the individual’s service plan between the individual, care team, and DAP.

These rules are intended to implement Iowa Code section 231.23.

Item 4. Adopt the following **new** chapter:

Chapter 222

Disability Services Advisory Councils

441—222.1(231) Appointment.

222.1(1) The members of the council will be recruited by the DAP.

222.1(2) The appointments will be for three-year staggered terms, which expire on June 30.

222.1(3) Vacancies will be filled in the same manner in which the original appointments were made for the balance of the unexpired term.

222.1(4) Absences.

a. Three unexcused absences in a 12-month period constitutes grounds for the DAP to request nomination of an alternate representative to fill the position.

b. Absences may be excused by notification provided to the chairperson prior to the meeting.

c. The chairperson of the council is charged with providing notification of absences to the DAP.

441—222.2 Officers.

222.2(1) Officers of the council will consist of a chairperson and a vice chairperson. The chairperson will be appointed by the DAP. The vice chairperson will be elected at the first meeting of each fiscal year.

a. Vice chairperson may serve no more than three consecutive terms.

b. Vacancies in the office of chairperson will be filled by elevation of the vice chairperson for 60 days until a new appointment can be made by the DAP.

c. Vacancies in the office of vice chairperson will be filled by election at the next meeting after the vacancy occurs.

d. A vacancy must be filled by an individual meeting the same qualifications as the departing council member in accordance with Iowa Code section 231.

222.2(2) Duties of officers.

a. The chairperson will:

- (1) Preside at all meetings of the council;
- (2) Appoint subcommittees as deemed necessary; and
- (3) Designate the chairperson of each subcommittee.

b. The vice chairperson shall:

- (1) Perform the duties of the chairperson if the chairperson is absent or unable to act.

When so acting, the vice chairperson will have all the powers of and be subject to all restrictions upon the chairperson.

- (2) Perform other duties as may be assigned by the chairperson.

441—222.3(231) Meetings.

222.3(1) The council will establish a meeting schedule on an annual basis to conduct its business. There will be a minimum of four meetings per year. Meetings shall be conducted pursuant to Iowa Code chapter 21.

222.3(2) A majority of appointed members constitutes a quorum.

222.3(3) When a quorum is present, a position is carried by affirmative vote of the majority of those present. No official business that requires a vote of the membership will be conducted without a quorum present.

441—222.4(231) Subcommittees. The council may designate one or more subcommittees to perform such duties as may be deemed necessary.

441—222.5(231) Expenses of preparedness advisory committee voting members. The following may be considered necessary expenses for reimbursement of council members who are individuals with disabilities or caregivers when incurred on behalf of council business and are subject to established state reimbursement rates:

1. Reimbursement for travel in a private car.
2. Actual lodging and meal expenses, including sales tax on lodging and meals.
3. Actual expense of public transportation.

441—222.6(231) Council composition. The council's composition must include nine members with at least fifty percent of members being individuals with disabilities or caregivers.

These rules are intended to implement Iowa Code chapter 231.

Item 5. Adopt the following **new** chapter, 223:

Chapter 223

Disability Services

441—223.1(231) Eligibility for LTSS disability services. To be eligible for disability services system funding, an individual will meet the following financial and needs-based eligibility criteria.

223.1(1) *Financial eligibility.*

a. An adult with disabilities will have an income equal to or less than 200 percent of the federal poverty level.

b. A family of a child with disabilities will have an income equal to or less than 200 percent of the federal poverty level.

c. A person who is eligible for federally funded services and other support will apply for such services and support.

d. Income will be verified using the best information available.

e. Financial eligibility will be reviewed on an annual basis and may be reviewed more often in response to increases or decreases in income.

f. An individual who is eligible for medical assistance must apply for and exhaust such funding for services and support prior to utilization of disability service system funding.

223.1(2) *Resource requirements.* There are no resource limits for the family of a child seeking children's disability services. An adult seeking disability services must have resources that are equal to or less than \$2,000 in countable value for a single-person household or \$3,000 in countable value for a multi-person household or follow the most recent federal supplemental security income guidelines.

a. The countable value of all countable resources, both liquid and non-liquid, shall be included in the eligibility determination except as exempted in this subrule.

b. A transfer of property or other assets within five years of the time of application with the result of, or intent to, qualify for assistance may result in denial or discontinuation of funding.

c. The following resources are exempt:

(1) The homestead, including equity in a family home or farm that is used as the individual household's principal place of residence. The homestead shall include all land that is contiguous to the home and the buildings located on the land.

(2) One automobile used for transportation.

(3) Tools of an actively pursued trade.

(4) General household furnishings and personal items.

(5) Burial account or trust limited in value as to that allowed in the medical assistance program.

(6) Cash surrender value of life insurance with a face value of less than \$1,500 on any one person.

(7) Any resource determined excludable by the Social Security Administration as a result of an approved Social Security Administration work incentive.

d. If an individual does not qualify for federally funded or state-funded services or other support but meets all income, resource, and functional eligibility requirements of this chapter, the following types of resources are also exempt from consideration in eligibility determination:

(1) A retirement account that is in the accumulation stage.

(2) A medical savings account.

(3) An assistive technology account.

(4) A burial account or trust limited in value as to that allowed in the medical assistance program.

223.1(3) Needs-based eligibility.

a. An individual must be a resident of Iowa, or if a minor, the custodial parent is a resident of Iowa.

b. An individual must have a diagnosis of intellectual disability, a developmental disability, brain injury, or serious mental illness as defined in Iowa Code section 135.22, or individuals who reside in or are at risk of residing in institutional settings due to their disability.

c. The results of a standardized functional assessment support the type and frequency of disability services identified in the individual's case plan. A functional assessment must be completed within 60 days of application for services. The standardized functional assessment methodology will be developed by the department.

441—223.2(231) Option for Waiting Lists for Disability Services. The department will maintain a waiting list of individuals denied access to the program due to lack of available funds. Waiting list information will include the date in which the individual was placed on the waiting list. If additional funds become available, the department will contact individuals on the list.

441—223.3(231) Access standards. DAPs shall meet the following access standards:

223.3(1) Support for community living for adults. The first appointment shall occur within 30 days of the individual's request for a home health aide, home and vehicle modification, respite, or supportive community living.

223.3(2) *Support for employment for adults.* The initial referral shall take place within seven days of the individual's request for day habilitation, job development, supported employment, or prevocational services.

223.3(3) *Service coordination.* An individual shall receive service coordination within ten days of the initial request for such service.

223.3(4) The following limitations apply for an individual receiving disability services:

a. A service limit equal to that established for the home- and community-based services waiver for individuals with disabilities in the medical assistance program created in Iowa Code chapter 249A.

b. A provider reimbursement payment will not be less than that provided through the home- and community-based services waiver for individuals with disabilities in the medical assistance program created in Iowa Code chapter 249A.

223.3(5) Additional minimum access standards for STSS and LTSS will be defined in the DAP's district plan and approved by the department.

441—223.4(231) Appeal Rights. The department will issue a notice of adverse action in accordance with 441—Chapter 16. The right to appeal will be given by the department in accordance with 441—Chapter 7(17A).

These rules are intended to implement Iowa Code section 231.23.

Item 6. Adopt the following **new** chapter 224:

CHAPTER 224

Aging and Disability Resource Centers

441—224.1(231) Definitions.

“Aging and disability resource center” or *“ADRC”* means a person-centered system navigation and coordination system that blends and braids service delivery methods and funding to ensure supports and services contribute to a consumer’s ability to remain at home and in their community. Supports and services are provided according to the individual’s wants and needs.

“Aging and disability resource center member organizations” or *“ADRC member organization”* means a local ADRC organization that provides ADRC information and assistance and person-centered functions at the local level.

“Information and Assistance” means a service that provides an individual with current information on opportunities and services available within their communities; identifies the problems and capacities of the individual; links the individual to the opportunities and services that are available; and, to the maximum extent practicable, ensures that the individual receives the services needed and is aware of the opportunities available by establishing adequate follow-up procedures.

“Medicaid Administrative Claiming (MAC)” means federal matching funds under Medicaid are available for costs incurred by the state for administrative activities that directly support efforts to identify and enroll potential eligibles into Medicaid, and/or support the provision of medical services covered under the state Medicaid plan when those activities are performed either directly by Iowa Medicaid or through contract or interagency agreement with another entity, such as a designated ADRC.

“Navigator” means a person who provides ADRC Information & Assistance and/or Options Counseling services.

“Options Counseling” means an interactive process whereby individuals receive guidance to

make an informed choice about long-term supports. The process is directed by the individual and may include others whom the individual chooses or those who are legally authorized to represent the individual.

“*System navigation*” means in person, online and telephonic support for problem solving and navigation of the services and supports available. System navigators ensure individuals and families who encounter barriers in accessing services and support are able to navigate healthcare, social services, and legal systems.

441—224.2(231) Department Responsibilities. Pursuant to Iowa Code section 231.64, the department will administer ADRCs. The department’s responsibilities are:

1. Perform all duties mandated by federal and state law.
2. Designate ADRC member organizations and withdraw designation. If the department terminates its contract with an ADRC member organization for any reason, the entity is no longer designated by the department as an ADRC member organization.
3. Provide oversight of the ADRC to ensure compliance with federal and state law, applicable rules and regulations.
4. Monitor the operations and performance of the ADRC.
5. Develop and use data and indicators to measure and assess the performance of the ADRC to ensure quality services, fair treatment, cost effectiveness and consumer satisfaction.

441—224.3(231) ADRC Member Organizations. The department designates entities as ADRC member organizations.

441—224.4(231) ADRC Member Organization Responsibilities.

224.4(1) An ADRC member organization will provide services to eligible populations in its service area via telephone, in-person or electronic communications.

224.4(2) An ADRC member organization will be physically accessible and provide services in a private and confidential manner.

224.4(3) An ADRC member organization will ensure a system is available for answering and responding to messages received outside of the regular business hours.

224.4(4) An ADRC member organization will provide services to a person by using clear language and providing for reasonable accommodations.

224.4(5) An ADRC member organization will provide person-centered supports and navigation services according to the individual's personal preferences, identified needs, and unique capabilities to remain living at home and in their community.

224.4(6) An ADRC member organization will identify itself as an ADRC. The ADRC's name may be the primary name or a subtitle to another name but the designation of ADRC will be included in all advertising and outreach materials.

224.4(7) An ADRC member organization will adhere to the department's Medicaid ADRC federal financial participation (FPP) process for Medicaid administrative claiming (MAC). Participation in MAC, for activities that facilitate access to, or are in support of, Iowa's Medicaid state plan, are allowable. The ADRC will comply with the department-approved ADRC MAC methodologies.

441—224.5(231) ADRC Member Organization Staff Requirements and Background Checks.

224.5(1) The ADRC member organization will ensure adequate staffing levels to meet the needs of the service delivery area. Staff performing ADRC services will demonstrate competency and knowledge pertinent to the staff's areas of responsibility. Additionally, the ADRC will establish and maintain background check policies and procedures.

224.5(2) *Training and Mandatory Reporter.* ADRC navigators are mandatory reporters pursuant to Iowa Code chapter 235B and will adhere to federal and state law and applicable rules for mandatory reporters.

441—224.6(231) Services. The ADRC will provide information and assistance and options counseling as defined within the contract issued by the department.

441—224.7(231) Appeals and Grievances.

224.7(1) The ADRC will implement a process for reviewing and resolving individual grievances.

224.7(2) The department will issue a notice of adverse action in accordance with 441—Chapter 16. The right to appeal will be given by the department in accordance with 441—Chapter 7.

441—224.8(231) Reporting and Records Authority. The director is the principal officer of the state to administer ADRC data reporting. On behalf of the department, the ADRC shall report individual-level client data, information and performance as required by the department. The ADRC shall also cooperate with any external review of its activities by the department or the federal government. The ADRC shall submit data according to the frequency, file layouts, format, and naming conventions prescribed by the department.

441—224.9(231) Confidentiality. The ADRC shall not disclose records that contain personally identifiable information concerning an individual receiving services to entities outside the department without the individual's informed consent or as authorized or required by law.

These rules are intended to implement Iowa Code section 231.64.

Item 7. Reserve chapters 441—225 through 441—228

Item 8. Adopt the following **new** chapter 229:

Data Collection

441—229.1(231) Authority. The director is the principal officer of the state to administer disability access point aging and disability services data reporting. The department will collect and maintain data on all clients served in accordance with Iowa Code section 231.56.

229.1(1) Submission of data. Each disability access point shall submit to the department the data regarding each individual that the disability access point serves.

a. Disability access points shall submit data according to the frequency, file layouts, format, and naming conventions prescribed by the department.

b. When a disability access point is notified by the department that the data is incomplete or is not compliant with the prescribed file layouts, format, or naming conventions, the disability access point must correct the issue within 30 days of the notification.

229.1(2) Data required. The data to be submitted are as follows:

- a. Individual client-level information including a unique identifier, name, address, demographic information, service delivery information, referral information, and any other information as prescribed by the department.
- b. The state I.D. number when applicable.
- c. Demographic information including, but not limited to, date of birth, sex, ethnicity, marital status, education, residential living arrangement, current employment status, monthly income, income sources, type of insurance, insurance carrier, veterans' status, guardianship status, legal status in the system, source of referral, and diagnosis code in the current version of the ICD.
- d. Service information including, but not limited to, the decision on services, date of decision, termination date and reason for termination, residence, approved service, service beginning dates, service ending dates, reason for terminating each service, approved units of services, unit rate for service, expenditure data, and provider data.

These rules are intended to implement Iowa Code chapter 231.56.