

AGENDA

**Thursday, March 10, 2022
Time: 10:00 a.m. – 12:00 p.m.**

**Join [Zoom](#) Meeting
Call in: 1-551-285-1373 Meeting ID: 1618827935
Passcode: 497162**

- 10:00 a.m.** Call to Order
- 10:05 a.m.** Approval of February 10, 2022, meeting minutes
- 10:05 a.m.** Rules - **Nancy Freudenberg**

The following amendments to the administrative rules are presented for adoption at the March 10, 2022, Council on Human Services meeting.

R-1. Amendments to Chapter 12, “Volunteer Services,” Iowa Administrative Code. (Rescind chapter)

The Department is rescinding this chapter as the legal framework for volunteers is covered under the Code of Iowa. This review is part of the department’s five-year rules review process for MHDS rules.

R-2. Amendments to Chapter 29, “Mental Health Institutes,” Iowa Administrative Code. (Aligns rules with current practices)

The Department is updating the administrative rules for the Mental Health Institutes. References to four catchment area are being removed. Rules listing specific visiting hours are being revised to state visiting hours shall be posted in each facility. References to the central point of coordination are being removed as that terminology is no longer in use. This review is part of the department’s five-year rules review process for MHDS rules.

R-3. Amendments to Chapter 30, “State Resources Centers,” Iowa Administrative Code. (Align rules with current practice)

The department is updating information on application processing and the admission process. The catchment area for the two resources centers is identified in the current rules. The rules are being amended to state individuals may be admitted to a state resource center in another catchment area if that facility has a more suitable opening. References to the central point of coordination are being removed as that terminology is no longer in use. This review is part of the department’s five-year rules review process for MHDS rules.

R-4. Amendments to Chapter 31, “Civil Commitment Unit,” Iowa Administrative Code. (Align rules with current practice and the Iowa Code)

The department is updating proposed rules for the Civil Commitment Unit (CCUSO) to include adding the facility administrator or designee is authorized to approve visits outside the facility. The rule on gifts or bequests of value is updated to align with the Iowa Code. This review is part of the department’s five-year rules review process for MHDS rules.

R-5. Amendments to Chapter 103, “State Training School,” Iowa Administrative Code. (Aligns rules with current practice and the Iowa Code)

The department is updating proposed rules for the State Training School to remove Toledo as a listed facility and update the visiting hours. The rule on gifts or bequests of value is updated to align with the Iowa Code. This review is part of the department’s five-year rules review process for MHDS rules.

R-6. Amendments to Chapter 118, “Child care Quality Rating System” Iowa Administrative Code. (Updates the child care quality rating system for new applications).

The Quality Rating System which is a voluntary program for child care providers to achieve bonuses as providers meet rating standards has been redesigned. The new program is Iowa Quality for Kids (IQ4K). These rules provide the framework for the program and will be used for new applications. The department’s goal is to improve the quality of care at child care providers.

The following amendments to the administrative rules are presented as Noticed rules.

N-1. Amendments to Chapter 3, “Procedures for Rulemaking” Iowa Administrative Code. (Aligns rules with current practice)

This rulemaking updates information on the current rulemaking process, including contact information and electronic availability of documents. This review is part of the department’s five-year rules review process.

N-2. Amendments to Chapter 4, “Petitions for Rulemaking,” Iowa Administrative Code. (Aligns rules with current practice)

This rulemaking makes changes to contact information and non-substantive changes to verbiage for consistency throughout the agency’s rules regarding the process for filing a petition for rulemaking. This review is part of the department’s five-year rules review process.

N-3. Amendments to Chapter 8, “Payment of Small Claims,” Iowa Administrative Code. (Align rules with current practice and the Iowa code)

When an employee’s personal items are damaged or destroyed during an employee’s tour of duty, the Department may reimburse the employee for repair or replacement of the items. Claims that are approved are to be paid from the Department’s support allocation and cannot exceed \$300 per item. This is an increase in the maximum allocation of \$150 per item and is being done to bring the rules into compliance with the Iowa Code. This review is part of the department’s five-year rules review process.

N-4. Amendments to Chapter 14, “Offset of County Debts,” Iowa Administrative Code. (Rescind chapter)

The department is eliminating Chapter 14 in its entirety. The process for offsets of debts owed to state agencies in this chapter is duplicative of the requirement in 11 IAC chapter 40 and the set off procedures in Iowa Code 8A.604. As the Department of Administrative Services has established a process by which state agencies can participate in the offset program by identifying debts who owe liabilities to that agency and offset those liabilities against claims owed to debts by agencies, this rule chapter is no longer necessary. This review is part of the department’s five-year rules review process.

N-5. Amendments to Chapter 28, “Policies for Mental Health Institutes and Resource Centers,” Iowa Administrative Code. (Aligns rules with current practice and the Iowa Code)

The department is updating rules for Mental Health Institutes and Resources Centers. Definitions are being updated to eliminate outdated terminology. The application process was aligned with current practices. This review is part of the department’s five-year rules review process for MHDS rules.

N-6. Amendments to Chapter 81, “Nursing Facilities,” Iowa Administrative Code. (Aligns rules with federal regulations regarding hours of training required for nurse aid programs)

The department is updating rules to reflect federal regulations regarding the increased number of hours of training required for nurse aid programs. There is also a proposed increase of the instructor-to-student ratio which will allow more students to attend nursing programs. Additional language is being added for laboratory and clinical training options.

N-7. Amendments to Chapter 109, “Child Care Centers” Iowa Administrative Code. (Updates the child care quality ratios for licensed child care centers).

The department is revising the administrative rules for child care centers to allow an increased number of children to be served per staff person in a licensed child care center in the two-year old and three-year old categories. In addition, the proposed rule modifies requirements for combining age groups and also allows a staff person to be 15 years of age to provide child care while still requiring the staff person to be supervised. The proposed rule will provide additional flexibility for child care centers dealing with workforce shortages.

N-8. Amendments to Chapter 153, “Funding for Local Services” Iowa Administrative Code. (Updates the child care quality ratios for licensed child care centers).

This review is part of the department’s five-year rules review process. Division I sets the requirements for developing a social services block grant pre-expenditure report. This rulemaking adds references to the intended use plan, which is done in tandem with the social services block grant pre-expenditure report. The proposed report and intended use plan need to be available for public review and comment for a minimum of ten days, instead of two weeks. Division II updates the number of the Department’s service areas from eight to six and updates the name of community empowerment board to Early Childhood Iowa. Division IV is rescinded as the program no longer exists and the Iowa Code Section that authorized the program has been repealed.

N-9. Amendments to Chapter 184, “Individual and Family Direct Support,” Iowa Administrative Code. (Aligns rules with current practice and the Iowa Code)

This review is part of the department’s five-year rules review process. Division I regarding the Family Support Subsidy Program updates the definition of a family member based on the federal Development Disabilities Assistance and Bill of Rights as codified in 42 U.S.C. The Department is no longer accepting new applications for the program after January 1, 2010. Members who are currently enrolled in the program remain eligible until one of the reasons for termination is met. This rulemaking brings the rules into compliance with the Iowa Code. Division II regarding the Comprehensive Family Support Program updates an outdated reference to the U.S.C. and removes the form name and number of the application used to apply for the program from the rules as the application form became obsolete effective July 1, 2016.

- 10:40 a.m.** Adult Protective Services Update – **ACFS Social Worker, Gloriana Fisher**
- 10:55 a.m.** Equity Strategy Update – **Health Equity Coordinator, Olivia Walker**
- 11:10 a.m.** Refugee Services Update – **Director of Strategic Operations, Matt Highland and Bureau Chief of Refugee Services, Mak Sucasca**
- 11:20 a.m.** MCO Quarterly Report, 1st Quarter– **Kurt Behrens, Medicaid Management Analyst**
- 11:30 a.m.** Director’s Report – **Director Kelly Garcia**
- 11:50 a.m.** Council Update
- 12:00 p.m.** Adjourn

This meeting is accessible to persons with disabilities. (If you have special needs, please contact the Department of Human Services (515) 281-5452 two days prior to the meeting.)

Note: Times listed on agenda for specific items are approximate and may vary depending on the length of discussion for preceding items. Please plan accordingly.



**DHS Council Meeting Minutes
February 10, 2022**

EXECUTIVE COMMITTEE MEMBERS	DEPARTMENT OF HUMAN SERVICES
Rebecca Peterson - present	Director Kelly Garcia – present
Skylar Mayberry-Mayes – present	Jean Slaybaugh - present
Kimberly Kudej – present	Matt Highland – present
Sam Wallace – present	Alex Carfrae - present
Jack Willey – present	Faith Sandberg-Rodriguez-present
Monika Jindal - present	Nancy Freudenberg – present
Kay Fisk - present	Carrie Malone - present
	Vern Armstrong - present
	Janee Harvey - present
	Liz Matney – present

EX-OFFICIO LEGISLATIVE MEMBERS
Representative Joel Fry – present
Senator Mariannette Miller-Meeks – absent
Senator Amanda Ragan – absent
Representative Timi Brown-Powers – absent

Call to Order

Chair Rebecca Peterson called the Council meeting to order at 10:02 a.m. via zoom teleconference.

Roll Call

All council members were present, Representative Joel Fry was present, all other ex-officio members were absent.

Approval of Minutes

A motion was made by Wallace and seconded by Willey to approve the minutes of the January 13, 2022 meeting.

MOTION UNANIMOUSLY CARRIED

Rules

R-1. Amendments to Chapter 2, “Contracting out Department of Human Services Employees and Property,” Iowa Administrative Code. (Aligns rules with current practices)

The Department is updating the administrative rules for entering into contracts with department employees in a service program or for the use of buildings and grounds of state institutions. This will allow the proposed rules to come into alignment with current practices and will also eliminate outdated definitions. Part of the department’s five-year rules review process for MHDS rules.

A motion was made by Kudej to approve and seconded by Mayberry-Mayes
MOTION UNANIMOUSLY CARRIED

R-2. Amendments to Chapter 34, “Alternative Diagnostic Facilities,” Iowa Administrative Code. (Aligns rules with current practices)

The Department is revising outdated language used when a person is being assessed for admission to a state mental health institution on a voluntary basis. Language is being replaced with more current, person-centered language to be consistent with best practices for persons with mental illnesses. Part of the department’s five-year rules review process for MHDS rules.

A motion was made by Wallace to approve and seconded by Willey
MOTION UNANIMOUSLY CARRIED

R-3. Amendments to Chapter 78, “Amount, Duration and Scope of Medical and Remedial Services,” Iowa Administrative Code. (Aligns rules with current policy for diabetic education)

The rule removes the one-time limit for diabetic education for Medicaid members. In most cases once in a lifetime in not adequate treatment for diabetic education, especially with the prevalence of diabetes. The Department has already been paying for more than one education series for some members and this will allow the rule to match the current practice. A member can receive as much education as needed to help them manage their diabetes with a provider referral for the education. The managed care organizations will also follow this rule change.

A motion was made by Willey to approve and seconded by Wallace
MOTION UNANIMOUSLY CARRIED

R-4. Amendments to Chapter 81, “Nursing Facilities,” Iowa Administrative Code. (Decreasing minimum occupancy limitation to 70%)

2021 Iowa Acts, Senate File 891, Division 7, amends the nursing facility reimbursement methodology for the fiscal period of July 1, 2023, through June 30, 2025. The department shall rebase case-mix nursing facility rates using the Medicaid cost reports on file for the period ending December 31, 2022, and apply a minimum occupancy factor of 70 percent. The decreased minimum occupancy limitation is being used because of the concerns providers will continue to experience a decrease in nursing facility occupancy due to the public health emergency.

A motion was made by Fisk to approve and seconded by Kudej.
MOTION UNANIMOUSLY CARRIED

R-5. Amendments to Chapter 101, “Iowa Juvenile Home,” Iowa Administrative Code. (Rescind the chapter)

Rescinds Chapter 101 as the Iowa Juvenile Home is closed. Part of the department’s five-year rules review process for MHDS rules.

A motion was made by Willey to approve and seconded by Mayberry-Mayes
MOTION UNANIMOUSLY CARRIED

The following amendments to the administrative rules are presented as Noticed rules.

N-1. Amendments to Chapter 77, “Conditions of Participation for Providers of Medical and Remedial Care,” Chapter 78, “Amount, Duration and Scope of Medical and Remedial Services,” and Chapter 79, “Other Policies Relating to Providers of Medical and Remedial Care,” Iowa Administrative Code. (Adds greater clarification of the home health agency rules)

The proposed rules update rules for the Integrated Homes and Chronic Health Homes based on the deficiencies identified in the audit completed in 2019 by the Office of the Inspector General for the Health

Homes (HH) program. Adds greater clarification of the HH programs and overall quality improvement. Defines documentation requirements that HH providers must follow to bill and receive home health payments for intensive services and outreach services.

N-2. Amendments to Chapter 170, “Child Care Services,” Iowa Administrative Code. (Implements Child Care Assistance Exit Child Care Program)

The Department is implementing the new Child Care Assistance Exit program for families who are on child care assistance with income about 225% of the federal poverty level (current CCA Plus program) and goes up the 250% of the federal poverty Level (FPL). For families with special needs children the income level will be up to 275% of the FPL. Without these increases in income limits families currently on child care assistance who have an increase in income while on the program would no longer be eligible for CCA. These proposed rules are implementing 2021 Iowa Acts, Chapter 178, HF 302.

A motion was made by Willey to approve and seconded by Mayberry-Mayes

MOTION UNANIMOUSLY CARRIED

Annual Report and Strategic Plan

Shelley Horak, DHS Project Manager, shared the DHS Annual Report highlighting the Director’s observations and recommendations, Covid 19 DHS Resources, IDPH-DHS Alignment, and our Dashboard initiatives. She then reviewed the 2022 strategic plan, reviewing our mission, vision, and guiding principles. She covered the development of the health and human services agency adding that the intended outcomes of our division’s initiatives and strategies are supporting lowans, collaborative efforts, increasing efficiency and quality, and supporting the workforce.

Behavioral Health Crisis and 988

Marissa Eyanson, Division Administrator of Mental Health and Disability Services-Community provided an overview of the 988 program that will go into effect nationwide in July 2022. 988 is modeled after the 911 program and provides the caller someone to talk to, someone to respond, and a place to go. 988 is an important component of an integrated and coordinated continuum of care for individuals with a mental health crisis.

Juvenile Justice Taskforce

Janee Harvey, Division Administrator of Adult, Child, Family Services Division, gave an update on the Juvenile Justice Task Force that Chief Justice Christensen formed in November of 2021. She provided a description of each of the six work groups and the task they are assigned to. Work groups will be meeting from January through November of 2022. A written report will come out with recommendations from each group at that time.

NYTD Survey Outcomes

Doug Wolfe, ACFS Program Planner, shared with the Council The State of Older Youth in Foster Care 2021 Annual Report. Iowa uses a blend of state and federal funds to support older youth. There were 3,116 youth, ages 14 and older that received independent living services in FFI 2021. Doug highlighted that we have had 100% federal compliance since the inception of this program.

Director’s Report

Director Garcia informed the Council that the Governor has announced the end of the public health emergency. We are making sure our providers understand the changes. The data that was being reported on the Covid-19 website is now reported on the IDPH website and we will be relying on some federal data points. This will not affect our Medicaid members; we will be waiting to hear from our federal partners to see if there will be another extension in benefits. We will inform the Council of what disenrollment will look like when that time comes. There has been a change to our SNAP benefits. We will be ending max allotments but have a month to transition into that. Postcards will be mailed out to members with talking points, so everyone is aware of what is happening.

She reported that our vaccine numbers are up at our facilities, we have two facilities that are at 80%. We are proud of our teams that have worked hard to increase these numbers.

Director Garcia shared that we continue to work with our partners at the Department of Justice. She met with them a few weeks ago. She stated we have asked for two consent degrees and will keep the Council updated when we have more to share.

Adjournment

A motion was made by Wallace to adjourn the meeting and was seconded by Kudej.

Meeting adjourned at 12:14 p.m.

Respectfully Submitted by:
Julie McCauley
Council Secretary

HUMAN SERVICES DEPARTMENT[441]

Adopted and Filed

Rule making related to volunteer services.

The Human Services Department hereby rescinds Chapter 12, "Volunteer Services," Iowa Administrative Code.

Legal Authority for Rule Making

This rule making is adopted under the authority provided in Iowa Code section 234.6.

State or Federal Law Implemented

This rule making implements, in whole or in part, Iowa Code sections 234.6 and 669.24.

Purpose and Summary

Volunteer Services is a program designed for individuals who volunteer at state institutions and in local county offices. This rule chapter has not been updated since 1991. After discussions with the Attorney General's office, it was determined that Iowa Code section 234.6 provides the legal framework for requirements for volunteers used by the Department. Liability protection is granted to volunteers on the same basis as state employees under Iowa Code section 669.24. A separate rule chapter is not necessary, and Chapter 12 is being rescinded.

Public Comment and Changes to Rule Making

Notice of Intended Action for this rule making was published in the Iowa Administrative Bulletin on January 26, 2022, as ARC 6151C.

No public comments were received.

No changes from the Notice have been made.

Adoption of Rule Making

This rule making was adopted by the Council on Human Services on March 10, 2022.

Fiscal Impact

This rule making has no fiscal impact to the State of Iowa.

Jobs Impact

After analysis and review of this rule making, no impact on jobs has been found.

Waivers

Any person who believes that the application of the discretionary provisions of this rule making would result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any, pursuant to rule 441_1.8(17A,217)

Review by Administrative Rules Review Committee

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rule making by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rule making at its [regular monthly meeting](#) or at a special meeting. The Committee's meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

Effective Date

This rule making will become effective on June 1, 2022.

The following rule-making action is adopted:

ITEM 1. Rescind and Reserve Chapter 12-Volunteer Services.



Iowa Department of Human Services
Information on Proposed Rules

Table with 3 columns: Name of Program Specialist (Nancy Freudenberg), Phone Number (515-281-8438), and Email Address (nfreude@dhs.state.ia.us)

- 1. Give a brief purpose and summary of the rulemaking: Chapter 12-Volunteer Services is a program designed for individuals who volunteer at state institutions and in local county offices. This rule chapter has not been updated since 1991. After discussions with the Attorney General's office, it was determined the Code of Iowa section 234.6 provided the legal framework for requirements for volunteers used by the department. Liability protection is granted to volunteers on the same basis as state employees under Iowa Code chapter 669. A separate rule chapter is not necessary and is being rescinded.
2. What is the legal basis for the change? (Cite the authorizing state and federal statutes and federal regulations): Code of Iowa section 234.6. and chapter 669.
3. Describe who this rulemaking will positively or adversely impact. This rule change will be a benefit to volunteers with the department as legal requirements are listed in the Code of Iowa.
4. Does this rule contain a waiver provision? If not, why? No. The department has a separate waiver provision under 441 IAC. 1 .8 (17A, 217).
5. What are the likely areas of public comment? We do not expect to have any areas of concern.
6. Do these rules have an impact on private-sector jobs and employment opportunities in Iowa? (If yes, describe nature of impact, categories and number of jobs affected, state regions affected, costs to employer per employee.) There will be no impact on jobs as these are volunteer positions.



Administrative Rule Fiscal Impact Statement

Date: December 1, 2021

Agency: Human Services IAC citation: 441 IAC Chapter 12 Agency contact: Nancy Freudenberg
Summary of the rule: Chapter 12- Volunteer Services is being rescinded as polices for volunteers are otherwise covered in the Code of Iowa under Chapters 234 and 669.
<i>Fill in this box if the impact meets these criteria:</i> <input checked="" type="checkbox"/> No fiscal impact to the state. <input type="checkbox"/> Fiscal impact of less than \$100,000 annually or \$500,000 over 5 years. <input type="checkbox"/> Fiscal impact cannot be determined.
Brief explanation: There is no fiscal impact to the state. No additional costs to the regulated community or State of Iowa as a whole are anticipated.
<i>Fill in the form below if the impact does not fit the criteria above:</i> <input type="checkbox"/> Fiscal impact of \$100,000 annually or \$500,000 over 5 years.
Assumptions: There is no fiscal impact to the state.
Describe how estimates were derived: There are no potential costs estimated for this rule.

Estimated Impact to the State by Fiscal Year

	<u>Year 1 (FY 2022)</u>	<u>Year 2 (FY 2023)</u>
Revenue by each source:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL REVENUE	_____	_____
Expenditures:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL EXPENDITURES	_____	_____
NET IMPACT	0.00	0.00

This rule is required by state law or federal mandate.
Please identify the state or federal law:
 Identify provided change fiscal persons:

Funding has been provided for the rule change.
Please identify the amount provided and the funding source:

Funding has not been provided for the rule.
Please explain how the agency will pay for the rule change:
 There is no fiscal impact to the state.

Fiscal impact to persons affected by the rule:

No additional costs to the regulated community or State of Iowa as a whole are anticipated.

Fiscal impact to counties or other local governments (required by Iowa Code 25B.6):

No additional costs to the regulated community or State of Iowa as a whole are anticipated

Agency representative preparing estimate: Rob Beran

JH 12/22/21

Telephone number: 281-6188

HUMAN SERVICES DEPARTMENT[441]

Adopted and Filed

Rule making related to mental health institutes.

The Human Services Department hereby amends Chapter 29, "Mental Health Institutes," Iowa Administrative Code.

Legal Authority for Rule Making

This rule making is adopted under the authority provided in Iowa Code section 218.4.

State or Federal Law Implemented

This rule making implements, in whole or in part, Iowa Code chapter 226.

Purpose and Summary

The Department has updated the administrative rules for mental health institutes in Chapter 29 and brought the rules into alignment with current practices. References to four catchment areas are removed. Administrative rules listing specific visiting hours are revised to say that visiting hours shall be posted in each facility. References to the central point of coordination are removed because that terminology is no longer in use. References to a separate application for voluntary admission for substance abuse treatment are removed because that application is no longer used.

Public Comment and Changes to Rule Making

Notice of Intended Action for this rule making was published in the Iowa Administrative Bulletin on January 26, 2022, as ARC 6157C.

No public comments were received.

No changes from the Notice have been made.

Adoption of Rule Making

This rule making was adopted by the Council on Human Services on March 10, 2022.

Fiscal Impact

This rule making has no fiscal impact to the State of Iowa.

Jobs Impact

After analysis and review of this rule making, no impact on jobs has been found.

Waivers

Any person who believes that the application of the discretionary provisions of this rule making would result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any pursuant to rule 441_1.8(17A,217).

Review by Administrative Rules Review Committee

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rule making by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rule making at its [regular monthly meeting](#) or at a special meeting. The Committee's meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

Effective Date

This rule making will become effective on June 1, 2022.

The following rule-making action is adopted:

Please see attached.

Adopt the following rules:

ITEM 1. Rescind rule ~~441—29.1(218)~~.

ITEM 2. Renumber rules ~~441—29.2(218,229)~~ to ~~441—29.7(218)~~ as ~~441—29.1(218,229)~~ to ~~441—29.6(218)~~.

ITEM 3. Amend renumbered subrule 29.1(1) as follows:

29.1(1) Application form. Any individual who has symptoms of mental illness may apply for voluntary inpatient treatment or voluntary outpatient or day treatment using Form 470-0420, Application for Voluntary Admission to a Mental Health Institute.

~~a. Any individual who has symptoms of mental illness may apply for voluntary inpatient treatment or voluntary outpatient or day treatment using Form 470-0420, Application for Voluntary Admission to a Mental Health Institute.~~

~~b. Any individual requesting substance abuse treatment shall complete Form 470-0425, Application for Voluntary Admission—Substance Abuse.~~

ITEM 4. Amend renumbered subrule 29.2(1) as follows:

29.2(1) Certification data. By the end of the next working day following a non-Medicaid payment-eligible adult individual's admission, the facility shall send a copy of Form 470-4161, DHS MHI Admission Core Data, by facsimile to ~~the central point of coordination or~~ the regional administrator for the county of admission.

ITEM 5. Amend renumbered rule ~~441—29.3(218,230)~~, introductory paragraph, as follows:

~~441—29.3(218,230) Charges for care.~~ The rates for cost of hospitalization are established by the division administrator and shall be available by contacting the business manager of the mental health institute ~~that serves the catchment area in which the individual's county of residence is located.~~

ITEM 6. Amend renumbered subrule 29.3(1) as follows:

29.3(1) Individuals requesting voluntary admission without going through the ~~central point of coordination or~~ regional administrator process shall be required to pay the cost of hospitalization in advance. This cost shall be computed at 30 times the last per diem rate and shall be collected weekly in advance upon admission. The weekly amount due shall be determined by dividing the monthly rate by 4.3.

ITEM 7. Amend renumbered subrule 29.5(2) as follows:

29.5(2) Care and treatment. An individual receiving care from a state mental health institute shall have the right to:

a. to e. No change.

~~f. Work, when available and desired and as appropriate to the individual's plan of treatment, and be compensated for that work in accordance with federal and state laws.~~

~~g. Have an individualized posthospitalization plan.~~

ITEM 8. Amend renumbered subrule 29.5(3) as follows:

29.5(3) Living conditions. An individual receiving care from a state mental health institute shall have the right to:

a. to d. No change.

~~e. Share a room with a spouse when both live on a long-term basis in the same facility.~~

~~f. e. Be free from unnecessary drugs, restraints, and seclusion except when necessary to protect the immediate health or safety of the individual or others.~~

~~g. f. Be free from physical, psychological, sexual, or verbal abuse, neglect and exploitation.~~

ITEM 9. Amend renumbered subrule 29.6(1) as follows:

29.6(1) Visiting hours on Monday through Friday are from 12 noon to 8 p.m. and are from 10 a.m. to 8 p.m. on Saturday, Sunday, and holidays. Visiting hours shall be posted in each facility.

The physician may designate exceptions for special hours on an individual or ward basis. Therapy for the individual shall take precedence over visiting. Visiting shall not interfere with the individual's treatment program or meals.



Iowa Department of Human Services
Information on Proposed Rules

Name of Program Specialist Mark Swore	Telephone Number 515-281-8575	Email Address mswore@dhs.state.ia.us
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1. Give a brief purpose and summary of the rulemaking:
To bring Chapter 29 into alignment with current practices and eliminate outdated terms
2. What is the legal basis for the change? (Cite the authorizing state and federal statutes and federal regulations):
Per Iowa Code 17A.7(2), all state agencies are required to do a periodic and comprehensive review of all of the agency's rules every five years.
3. Describe who this rulemaking will positively or adversely impact.
This will have no impact on operations or those served.
4. Does this rule contain a waiver provision? If not, why?
No.
5. What are the likely areas of public comment?
There is no anticipated public comment.
6. Do these rules have an impact on private-sector jobs and employment opportunities in Iowa? (If yes, describe nature of impact, categories and number of jobs affected, state regions affected, costs to employer per employee.)
No impact.



Administrative Rule Fiscal Impact Statement

Date: November 23, 2021

Agency: Human Services

IAC citation: 441 IAC 29

Agency contact: Mark Swore

Summary of the rule:

To bring Chapter 29 Mental Health Institutes into alignment with current practices and eliminate outdated terms

Fill in this box if the impact meets these criteria:

- No fiscal impact to the state.
- Fiscal impact of less than \$100,000 annually or \$500,000 over 5 years.
- Fiscal impact cannot be determined.

Brief explanation:

[Budget Analysts must complete this section for ALL fiscal impact statements.](#)

This change is to align the rule with current practices. There is no fiscal impact.

Fill in the form below if the impact does not fit the criteria above:

- Fiscal impact of \$100,000 annually or \$500,000 over 5 years.

Assumptions:

Describe how estimates were derived:

Estimated Impact to the State by Fiscal Year

	<u>Year 1 (FY 2022)</u>	<u>Year 2 (FY 2023)</u>
Revenue by each source:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL REVENUE	_____	_____
Expenditures:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL EXPENDITURES	_____	_____
NET IMPACT	0.00	0.00

This rule is required by state law or federal mandate.

Please identify the state or federal law:

Identify provided change fiscal persons:

Funding has been provided for the rule change.

Please identify the amount provided and the funding source:

Funding has not been provided for the rule.

Please explain how the agency will pay for the rule change:

Fiscal impact to persons affected by the rule:

No fiscal impact.

Fiscal impact to counties or other local governments (required by Iowa Code 25B.6):

No fiscal impact.

Agency representative preparing estimate: Lanny Nihart

JH 11/23/2021

Telephone number: 515-281-7822

HUMAN SERVICES DEPARTMENT[441]

Adopted and Filed

Rule making related to state resource centers.

The Human Services Department hereby amends Chapter 30, "State Resource Centers," Iowa Administrative Code.

Legal Authority for Rule Making

This rule making is adopted under the authority provided in Iowa Code section 218.4.

State or Federal Law Implemented

This rule making implements, in whole or in part, Iowa Code sections 222.6 and 222.13.

Purpose and Summary

The Department has amended the rules in Chapter 30 to update information on application processing and the admissions process. The catchment areas for the two state resource centers are identified in the current rules. The rules are amended to state that individuals may be admitted to a state resource center in another catchment area if the state resource center in another catchment area has a more suitable opening. References to the central point of coordination are removed because that terminology is no longer in use.

Public Comment and Changes to Rule Making

Notice of Intended Action for this rule making was published in the Iowa Administrative Bulletin on January 26, 2022, as ARC 6152C.

No public comments were received.

No changes from the Notice have been made.

Adoption of Rule Making

This rule making was adopted by the Council on Human Services on March 10, 2022.

Fiscal Impact

This rule making has no fiscal impact to the State of Iowa.

Jobs Impact

After analysis and review of this rule making, no impact on jobs has been found.

Waivers

Any person who believes that the application of the discretionary provisions of this rule making would result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any, pursuant to rule 441_1.8(17A,217).

Review by Administrative Rules Review Committee

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rule making by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rule making at its [regular monthly meeting](#) or at a special meeting. The Committee's meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

Effective Date

This rule making will become effective on June 1, 2022.

The following rule-making action is adopted:

ITEM 1. Amend rule 441—30.1(218,222) as follows:

441—30.1(218,222) Catchment areas. The catchment areas for the two state resource centers shall be as follows.

30.1(1) *Glenwood*. Adair, Adams, Appanoose, Audubon, Benton, Carroll, Cass, Cedar, Cherokee, Clarke, Clinton, Crawford, Davis, Decatur, Des Moines, Fremont, Greene, Guthrie, Harrison, Henry, Ida, Iowa, Jefferson, Johnson, Jones, Keokuk, Lee, Linn, Louisa, Lucas, Lyon, Mahaska, Mills, Monona, Monroe, Montgomery, Muscatine, Page, Plymouth, Pottawattamie, Ringgold, Sac, Scott, Shelby, Sioux, Taylor, Union, Van Buren, Wapello, Washington, Wayne, and Woodbury Counties form the catchment area for the Glenwood resource center. An individual may be admitted to a state resource center in another catchment area if the state resource center in another catchment area has a more suitable opening.

30.1(2) *Woodward*. Allamakee, Black Hawk, Boone, Bremer, Buchanan, Buena Vista, Butler, Calhoun, Cerro Gordo, Chickasaw, Clay, Clayton, Dallas, Delaware, Dickinson, Dubuque, Emmet, Fayette, Floyd, Franklin, Grundy, Hamilton, Hancock, Hardin, Howard, Humboldt, Jackson, Jasper, Kossuth, Madison, Marion, Marshall, Mitchell, O'Brien, Osceola, Palo Alto, Pocahontas, Polk, Poweshiek, Story, Tama, Warren, Webster, Winnebago, Winneshiek, Worth, and Wright Counties form the catchment area for the Woodward resource center. An individual may be admitted to a state resource center in another catchment area if the state resource center in another catchment area has a more suitable opening.

This rule is intended to implement Iowa Code section 222.6.

ITEM 2. Amend subrule 30.2(1), introductory paragraph, as follows:

30.2(1) *Application for an adult*. Applications for the care, treatment, or evaluation of an adult individual by a resource center shall be made through the ~~central point of coordination or the~~ regional administrator for the board of supervisors of the individual's county of residence. Authorization for the submission of the application shall be provided by the signature of one or more officially designated agents for the county board of supervisors.

ITEM 3. Adopt the following new implementation sentence in 441—Chapter 30:

These rules are intended to implement Iowa Code chapter 222.



Iowa Department of Human Services
Information on Proposed Rules

Name of Program Specialist Chris Olson	Telephone Number 515-242-6217	Email Address colson2@dhs.state.ia.us
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1. Give a brief purpose and summary of the rulemaking:
To bring Chapter 30 into alignment with current practices and eliminate outdated terms.
2. What is the legal basis for the change? (Cite the authorizing state and federal statutes and federal regulations):
Per Iowa Code 17A.7(2), all state agencies are required to do a periodic and comprehensive review of all of the agency's rules every five years.
3. Describe who this rulemaking will positively or adversely impact.
This will have no impact on operations or those served.
4. Does this rule contain a waiver provision? If not, why?
No
5. What are the likely areas of public comment?
There is no anticipated public comment.
6. Do these rules have an impact on private-sector jobs and employment opportunities in Iowa? (If yes, describe nature of impact, categories and number of jobs affected, state regions affected, costs to employer per employee.)
No impact.



Administrative Rule Fiscal Impact Statement

Date: November 23, 2021

Agency: Human Services

IAC citation: 441 IAC 30

Agency contact: Chris Olson

Summary of the rule:

The rule package revises outdated language and updates practices in IAC 441-30.

Fill in this box if the impact meets these criteria:

- No fiscal impact to the state.
- Fiscal impact of less than \$100,000 annually or \$500,000 over 5 years.
- Fiscal impact cannot be determined.

Brief explanation:

[Budget Analysts must complete this section for ALL fiscal impact statements.](#)

This change is to align the rule with current practices. There is no fiscal impact.

Fill in the form below if the impact does not fit the criteria above:

- Fiscal impact of \$100,000 annually or \$500,000 over 5 years.

Assumptions:

Describe how estimates were derived:

Estimated Impact to the State by Fiscal Year

	<u>Year 1 (FY 2022)</u>	<u>Year 2 (FY 2023)</u>
Revenue by each source:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL REVENUE	_____	_____
Expenditures:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL EXPENDITURES	_____	_____
NET IMPACT	0.00	0.00

- This rule is required by state law or federal mandate.
Please identify the state or federal law:
Identify provided change fiscal persons:

- Funding has been provided for the rule change.
Please identify the amount provided and the funding source:

- Funding has not been provided for the rule.
Please explain how the agency will pay for the rule change:

Fiscal impact to persons affected by the rule:

No fiscal impact.

Fiscal impact to counties or other local governments (required by Iowa Code 25B.6):

No fiscal impact.

Agency representative preparing estimate: Lanny Nihart

JH 11/23/2021

Telephone number: 515-281-7822

HUMAN SERVICES DEPARTMENT[441]

Adopted and Filed

Rule making related to the Civil Commitment Unit

The Human Services Department hereby amends Chapter 31, "Civil Commitment Unit," Iowa Administrative Code.

Legal Authority for Rule Making

This rule making is adopted under the authority provided in Iowa Code section 218.4.

State or Federal Law Implemented

This rule making implements, in whole or in part, Iowa Code chapter 229A.

Purpose and Summary

The Department has updated the rules in Chapter 31 for the Civil Commitment Unit for Sexual Offenders (CCUSO) to align with the Iowa Code and CCUSO policies. Changes include adding the facility administrator's designee to those who are authorized to approve visits outside the facility. The rule on gifts or bequests of value is updated to state that if the value of such an item is \$50 or more, the gift or bequest shall be reported to the Iowa Ethics and Campaign Board within 20 days of receipt of the gift or bequest to align with Iowa Code section 8.7. Paragraph 31.2(5)"c" stating food items may not be brought into the visiting area is rescinded as it conflicts with paragraph 31.2(6)"1."

Public Comment and Changes to Rule Making

Notice of Intended Action for this rule making was published in the Iowa Administrative Bulletin on January 26, 2022, as ARC 6153C.

No public comments were received.

No changes from the Notice have been made.

Adoption of Rule Making

This rule making was adopted by the Council on Human Services on March 10, 2022.

Fiscal Impact

This rule making has no fiscal impact to the State of Iowa.

Jobs Impact

After analysis and review of this rule making, no impact on jobs has been found.

Waivers

Any person who believes that the application of the discretionary provisions of this rule making would

result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any pursuant to rule 441_1.8(17A,217).

Review by Administrative Rules Review Committee

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rule making by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rule making at its [regular monthly meeting](#) or at a special meeting. The Committee's meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

Effective Date

This rule making will become effective on June 1, 2022.

The following rule-making action is adopted:

ITEM 1. Amend 441—Chapter 31, title, as follows:

CIVIL COMMITMENT UNIT FOR SEXUAL OFFENDERS

ITEM 2. Rescind paragraph 31.2(5)“c.”

ITEM 3. Amend paragraph 31.2(9)“b,” introductory paragraph, as follows:

b. The visit receives the approval of the facility administrator or the facility administrator's designee. Such approval shall be granted only when:

ITEM 4. Amend paragraph 31.9(2)“b” as follows:

b. All gifts or bequests ~~, regardless of value,~~ with a value of \$50 or more shall be reported to the Iowa ethics and campaign disclosure board within 20 days of receipt of the gift or bequest using the board's Form-GB.



Iowa Department of Human Services
Information on Proposed Rules

Name of Program Specialist Mark Swore	Telephone Number 515-281-5318	Email Address mswore@dhs.state.ia.us
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1. Give a brief purpose and summary of the rulemaking:

Proposed changes are to bring Chapter 31 in align with Iowa Code and CCUSO policies.

Item 1 441-31.2(5) c. Remove “Food items may not be brought into the visiting area.” The language conflicts with 31.2(6)l.

Item 2 441- 31.2(9)b Add “or designee” This would allow the facility administrator or designee to approve visits outside the facility. CCUSO current policy states the “Deputy Superintendent or designee” can approve such visits.

Item 3 441-31.9(2)b Change “regardless of value” to “with value of \$50 or more” to align with Iowa Code Section 8.7

2. What is the legal basis for the change? (Cite the authorizing state and federal statutes and federal regulations):

Iowa Code 229A.15B gives the Department rulemaking authority pursuant to Chapter 17A to adopt rules for the CCUSO program.

3. Describe who this rulemaking will positively or adversely impact.

Aligning the rules with Iowa Code or current practice.

4. Does this rule contain a waiver provision? If not, why?

No. Language is to be changed to be current with existing Iowa Code and policy.

5. What are the likely areas of public comment?

There is no anticipated public comment.

6. Do these rules have an impact on private-sector jobs and employment opportunities in Iowa? (If yes, describe nature of impact, categories and number of jobs affected, state regions affected, costs to employer per employee.)

None

Proposed Rule Changes

ITEM 1. Adopt **new** rule **441—86.10(514I)** as follows:

Item 1. Delete 441-31.2(5) c. ~~Food items may not be brought into the visiting area.~~

Item 2. Add text as follows: 441- 31.2(9)b The visit receives the approval of the facility administrator or designee. Such approval shall be granted only when:

Item 3. 441-31.9(2)b replace text as indicated: All gifts or bequests, ~~regardless of value~~ with a value of \$50 or more, shall be reported to the Iowa ethics and campaign disclosure board within 20 days of receipt of the gift or bequest using the board's Form-GB.



Administrative Rule Fiscal Impact Statement

Date: October 22, 2021

Agency: Human Services

IAC citation: 441 IAC 31

Agency contact: Mark Swore

Summary of the rule:

Proposed changes are to bring Chapter 31 in align with Iowa Code and CCUSO policies.

Fill in this box if the impact meets these criteria:

- No fiscal impact to the state.
- Fiscal impact of less than \$100,000 annually or \$500,000 over 5 years.
- Fiscal impact cannot be determined.

Brief explanation:

[Budget Analysts must complete this section for ALL fiscal impact statements.](#)

This change is to align the rule with current practices. There is no fiscal impact.

Fill in the form below if the impact does not fit the criteria above:

- Fiscal impact of \$100,000 annually or \$500,000 over 5 years.

Assumptions:

Describe how estimates were derived:

Estimated Impact to the State by Fiscal Year

	<u>Year 1 (FY 2022)</u>	<u>Year 2 (FY 2023)</u>
Revenue by each source:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL REVENUE	_____	_____
Expenditures:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL EXPENDITURES	_____	_____
NET IMPACT	0.00	0.00

This rule is required by state law or federal mandate.

Please identify the state or federal law:

Identify provided change fiscal persons:

Funding has been provided for the rule change.

Please identify the amount provided and the funding source:

Funding has not been provided for the rule.

Please explain how the agency will pay for the rule change:

Fiscal impact to persons affected by the rule:

No fiscal impact.

Fiscal impact to counties or other local governments (required by Iowa Code 25B.6):

No fiscal impact.

Agency representative preparing estimate: Lanny Nihart

JH 11/23/2021

Telephone number: 515-281-7822

HUMAN SERVICES DEPARTMENT[441]

Adopted and Filed

Rule making related to the State Training School.

The Human Services Department hereby amends Chapter 103, "State Training School," Iowa Administrative Code.

Legal Authority for Rule Making

This rule making is adopted under the authority provided in Iowa Code section 218.4.

State or Federal Law Implemented

This rule making implements, in whole or in part, Iowa Code chapter 233A.

Purpose and Summary

The Department has updated the rules in Chapter 103 for the State Training School to align with the Iowa Code and current policies. Changes include removing Toledo as a listed facility. The rule on gifts and bequests of value is updated to state that if the value of such item is \$50 or more, the gift or bequest shall be reported to the Iowa Ethics and Campaign Board within 20 days of receipt of the gift or bequest to align with Iowa Code section 8.7.

Public Comment and Changes to Rule Making

Notice of Intended Action for this rule making was published in the Iowa Administrative Bulletin on January 26, 2022, as ARC 6155C.

No public comments were received.

No changes from the Notice have been made.

Adoption of Rule Making

This rule making was adopted by the Human Services Department on March 10, 2022.

Fiscal Impact

This rule making has no fiscal impact to the State of Iowa.

Jobs Impact

After analysis and review of this rule making, no impact on jobs has been found.

Waivers

Any person who believes that the application of the discretionary provisions of this rule making would result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any pursuant to rule 441_1.8(17A,217).

Review by Administrative Rules Review Committee

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rule making by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rule making at its [regular monthly meeting](#) or at a special meeting. The Committee's meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

Effective Date

This rule making will become effective on June 1, 2022.

The following rule-making action is adopted:

ITEM 1. Amend rule 441—103.1(218), definitions of “Individual,” “Iowa sex offender registry” and “State training school,” as follows:

“*Individual*,” as used in this chapter, means any child who is committed to the director of the department of human services and is admitted to and receives services from the state training school. The terms “student,” “resident,” “juvenile,” and “youth” are synonymous with the term “individual.” For purposes of the state training school, the term shall also include a person whose stay is extended beyond the age of 18 under the provisions of ~~2009 Iowa Code Supplement~~ Iowa Code sections 232.53(2) and 232.53(4).

“*Iowa sex offender registry*” means a central registry of sex offenders established under ~~2009 Iowa Code Supplement~~ Iowa Code chapter 692A that is maintained by the department of public safety.

“*State training school*” means the ~~units~~ unit for juvenile delinquents at the Eldora ~~and Toledo facilities~~ facility as defined in Iowa Code section 233A.1(2).

ITEM 2. Amend paragraph 103.13(2)“b” as follows:

b. All gifts or bequests ~~—regardless of value,~~ with a value of \$50 or more shall be reported to the Iowa ethics and campaign disclosure board within 20 days of receipt of the gift or bequest using the board’s Form-GB. One copy of the completed form shall be sent to the division administrator.

ITEM 3. Strike “2009 Iowa Code Supplement” wherever it appears in rule 441—103.9(692A) and insert “Iowa Code” in lieu thereof:



Iowa Department of Human Services
Information on Proposed Rules

Name of Program Specialist Mark Swore	Telephone Number 515-281-8575	Email Address mswore@dhs.state.ia.us
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1. Give a brief purpose and summary of the rulemaking:

To bring Chapter 103 into alignment with current practices and eliminate outdated terms.

Item 1. Needs to be updated to reflect Toledo facility closing 441—103.1(218) Definitions.

“State training school” means the ~~units~~ unit for juvenile delinquents at the Eldora ~~and Toledo facilities~~ facility as defined in Iowa Code section 233A.1(2).

Item 2. Needs to be corrected to reflect current practice 441—103.4(218) Communication with individuals.

103.4(3) Visits. a. Schedule. Visiting hours shall be from ~~10 a.m. 9:00 am~~ to 4:30 p.m. on Saturday and Sunday.

Visits by the individual’s family or legal representative shall be encouraged. Necessary flexibility in these hours and days will be allowed.

2. What is the legal basis for the change? (Cite the authorizing state and federal statutes and federal regulations):

Per Iowa Code 17A.7(2), all state agencies are required to do a periodic and comprehensive review of all of the agency’s rules every five years.

3. Describe who this rulemaking will positively or adversely impact.

This will have no impact on operations or those served.

4. Does this rule contain a waiver provision? If not, why?

No.

5. What are the likely areas of public comment?

There is no anticipated public comment.

6. Do these rules have an impact on private-sector jobs and employment opportunities in Iowa? (If yes, describe nature of impact, categories and number of jobs affected, state regions affected, costs to employer per employee.)

No impact.



Administrative Rule Fiscal Impact Statement

Date: November 23, 2021

Agency: Human Services
IAC citation: 441 IAC 103 State Training School
Agency contact: Mark Swore

Summary of the rule:

To bring Chapter 103 into alignment with current practices and eliminate outdated terms.

Fill in this box if the impact meets these criteria:

- No fiscal impact to the state.
- Fiscal impact of less than \$100,000 annually or \$500,000 over 5 years.
- Fiscal impact cannot be determined.

Brief explanation:

[Budget Analysts must complete this section for ALL fiscal impact statements.](#)

This change is to align the rule with current practices. There is no fiscal impact.

Fill in the form below if the impact does not fit the criteria above:

- Fiscal impact of \$100,000 annually or \$500,000 over 5 years.

Assumptions:

Describe how estimates were derived:

Estimated Impact to the State by Fiscal Year

	<u>Year 1 (FY 2022)</u>	<u>Year 2 (FY 2023)</u>
Revenue by each source:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL REVENUE	_____	_____
Expenditures:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL EXPENDITURES	_____	_____
NET IMPACT	0.00	0.00

This rule is required by state law or federal mandate.
Please identify the state or federal law:
Identify provided change fiscal persons:

Funding has been provided for the rule change.
Please identify the amount provided and the funding source:

Funding has not been provided for the rule.
Please explain how the agency will pay for the rule change:

Fiscal impact to persons affected by the rule:

No fiscal impact.

Fiscal impact to counties or other local governments (required by Iowa Code 25B.6):

No fiscal impact.

Agency representative preparing estimate: Lanny Nihart JH 11/23/2021
Telephone number: 515-281-7822

HUMAN SERVICES DEPARTMENT[441]

Adopted and Filed

Rule making related to Child Care Quality Rating System

The Human Services Department hereby amends Chapter 118, “Child Care Quality Rating System,” Iowa Administrative Code.

Legal Authority for Rule Making

This rule making is adopted under the authority provided in Iowa Code section 237A.12.

State or Federal Law Implemented

This rule making implements, in whole or in part, Iowa Code section 237A.30.

Purpose and Summary

Iowa established a voluntary Quality Rating System (QRS) for child care programs in 2006 to provide an opportunity for child care providers to meet ongoing standards for quality ratings based on the type of child care program and meet the applicable criteria for each rating level. Achievement bonuses could be awarded as providers met the ratings standards.

Iowa began to redesign the QRS in 2015. A QRS oversight team, which included partners from a variety of state agencies, provider organizations and child care providers, gathered feedback and provided advice to the Department on ways to strengthen the QRS program. Statewide focus groups were conducted to gather specific input, and an extensive literature review of other states’ efforts was conducted. Surveys were used to gather input.

An increased effort toward evidence-based practices was developed with a comprehensive approach to supporting all providers. A continuous quality improvement approach was developed. The QRS was redesigned into a Quality Rating and Improvement System (QRIS) and rebranded as Iowa Quality for Kids (IQ4K). A new electronic data system was also developed to support the new program. Achievement bonuses may be awarded as funds are available. New administrative rules are required to guide the work.

The rules currently in effect (Division I) will continue to support the current QRS program until the program sunsets after the ratings for all providers for the current QRS program will have expired and when those providers will no longer be eligible for that QRS program but may apply for the IQ4K quality rating.

The new proposed rules for IQ4K (Division II) will apply for all child care programs applying to IQ4K, the new QRIS program. Child care programs will no longer be able to apply to the current QRS program (Division I) once the rules for IQ4K in Division II are in effect as of June 1, 2022.

Public Comment and Changes to Rule Making

Notice of Intended Action for this rule making was published in the Iowa Administrative Bulletin on January 26, 2022, as ARC 6161C.

No public comments were received.

The Department has made the following changes from the noticed rules to provide additional clarity.

441-118.9(237A) Definitions.

“*Eligible applicants*” means programs meeting the definition of “facility”. ~~or program operating under the authority of an accredited school district or nonpublic school.~~

“*Social-emotional-behavioral mental health*” or “*SEBMH*” means the way in which an individual thinks, feels, communicates, acts and learns. These skills contribute to resilience and to how individuals relate to others, respond to stress and emotions, and make choices. Foundational knowledge and skills that promote positive SEBMH include self-awareness, self-management, responsible decision-making, social awareness, and relationship skills that support positive well-being and academic success.

441—118.32(237A) Rating standards for registered child development homes. To participate in IQ4K QRIS, a registered child development home shall certify that it meets the applicable criteria as defined in rules 441—118.33(237A) through 441—118.37(237A). The following program requirements apply:

441—118.35(237A) Criteria for IQ4K—Level 3 rating standards for registered child development homes. To be rated at a Level 3, an eligible registered child development home ~~facility~~ must satisfy all of the criteria in each of the six designated categories listed in Levels 1, 2 and 3 or complete all of the criteria designated in its respective specialized tracks for Levels 1, 2 and 3.

441—118.36(237A) Criteria for IQ4K—Level 4 rating standards for registered child development homes. To be rated at Level 4, an eligible registered child development home ~~facility~~ must satisfy all of the criteria in each of the six designated categories listed in Levels 1, 2, 3 and 4 or complete all of the criteria designated in its respective specialized tracks for Levels 1, 2, 3 and 4.

441—118.37(237A) Criteria for IQ4K—Level 5 rating standards for registered child development homes.

118.37(1) *Criteria for each category.* To be rated at a Level 5, an eligible registered child development home ~~facility~~ must satisfy all of the criteria in each of the six designated categories listed in Levels 1, 2, 3, 4 and 5 or complete all of the criteria designated in its respective specialized tracks for Levels 1, 2, 3, 4 and 5. To be rated at a Level 5 the following criteria must also be met:

- a. Minimum score. The program ~~facility~~ must earn a minimum score of 5.0 on the FCCERS ERS assessment.

Adoption of Rule Making

This rule making was adopted by the Council on Human Services on March 10, 2022.

Fiscal Impact

Iowa's child care Quality Rating System (QRS) has been re-designed and rebranded. The new program will be called Iowa Quality for Kids (IQ4K). The new program involves more stringent criteria at each level of the program that providers must meet to be eligible. The increases in the achievement bonuses help cover the additional costs to the providers and offers financial incentives for providers to invest the time, effort and money to meet the criteria being asked of them. The program continues to be voluntary, and the department's goal is to improve the quality of care at child care providers. The increase in the achievement bonuses to be awarded are to be funded with American Rescue Plan ACT (ARPA) funds from June 1, 2022, through September 20, 2023, at which time it is the end of the obligation period for the ARPA funds. Then, the anticipated ongoing balance of federal Child Care Development Funds (CCDF) is expected to cover the cost through at least SFY26 based on status quo funding.

Jobs Impact

After analysis and review of this rule making, no impact on jobs has been found.

Waivers

Any person who believes that the application of the discretionary provisions of this rule making would result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any pursuant to rule 441_1.8(17A,217).

Review by Administrative Rules Review Committee

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rule making by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rule making at its [regular monthly meeting](#) or at a special meeting. The Committee's meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

Effective Date

This rule making will become effective on June 1, 2022.

The following rule-making action is adopted:

Please see attached.

Adopted and Final IQ4K Rules

DIVISION I QUALITY RATING SYSTEM (QRS)

ITEM 2. Amend **441—Chapter 118**, Division I preamble, as follows:

PREAMBLE

~~This Division I of this chapter establishes rules for the child care quality rating system, which is designed for child care programs that primarily serve children between birth and the age of 12. Participation in the quality rating system is voluntary. The chapter Division I includes application procedures and standards for the quality rating. Rules 441—118.1(237A) through 441—118.8(237A) are in effect until Division I sunsets, when all providers approved for this program are no longer eligible under Division I. As of June 1, 2022, child care programs applying for a new rating will apply to the Iowa quality for kids (IQ4K) quality rating improvement system outlined in Division II.~~

ITEM 3. Amend subrule 118.2(2) as follows:

118.2(2) Ongoing standards. ~~Until August 1, 2011, eligible applicants have the choice of applying under this subrule or under subrule 118.2(1). Effective August 1, 2011, all eligible applicants must apply for a quality rating under this subrule. Effective June 1, 2022, for new applications, child care programs applying for a new rating will apply to the Iowa quality for kids (IQ4K) quality rating system outlined in Division II.~~

a. and b. No change.

ITEM 4. Adopt the following **new 441—Chapter 118**, Division II heading:

DIVISION II IOWA QUALITY FOR KIDS (IQ4K)

ITEM 5. Adopt the following **new 441—Chapter 118**, Division II preamble:

PREAMBLE

Division II of this chapter establishes rules for the IQ4K rating system and Iowa's quality rating and improvement system (QRIS) for child care providers. Participation in IQ4K is voluntary. Division II includes application procedures and standards to guide the quality rating process. The rules in Division II are in effect for new applications for child care providers applying for the IQ4K program.

ITEM 6. Adopt the following **new** rules 441—118.9(237A) to 441—118.39(237A):

441—118.9(237A) Definitions.

“*Action plan*” means a written, detailed sequence of steps taken or activities performed to reach one or more goals.

“*All staff*” means program administrator or director, assistant program administrator or assistant director, on-site supervisor, lead teacher and staff counted as part of the staff-to-child ratio.

“*Area education agency*” or “*AEA*” means an agency working as an educational partner with public and accredited nonpublic schools to help learners, school staff, parents and communities. AEAs provide early intervention services, special education support services, media and technology services, a variety of instructional services, professional development and leadership to promote school improvement as established in Iowa Code chapter 273.

“*Assessment tool*” means a tool used to gather and provide educators, parents, guardians, and caretakers with critical information about a child's educational growth and development. Assessment tools are used to determine what children in care know, understand and are able to do. Assessment results drive the ways teachers support and assess children's learning, plan their curriculum to support each child, monitor progress and identify next steps.

“*Assistant program administrator*” or “*assistant director*” means the staff member working directly under the administrator or director and assisting with program planning, managing, marketing and directing.

“*Assistant teacher*” means any staff member working under the supervision of a lead teacher or other

licensed personnel who has the ultimate responsibility for the design and implementation of education and related service programs. Other terms used may include paraprofessional, educational aide, associate, or instructional aide.

“*Caring for our children*” or “*CFOC*” means the national health and safety performance standard guidelines for early care and education programs representing the best practices based on evidence, expertise, and experience for quality health and safety policies for early care and education settings.

“*Child and adult care food program*” or “*CACFP*” means a federal United States Department of Agriculture (USDA) CNP that provides a subsidy for serving nutritious meals and snacks to eligible children and adults who are enrolled at participating child care centers, homes, and adult day care centers. CACFP also provides reimbursements for meals served to children and youth participating in afterschool care programs, children residing in emergency shelters, and adults over the age of 60 or living with a disability and enrolled in adult day care facilities. In order to qualify for reimbursement, the meals served must meet federal guidelines.

“*Child care experience*” means knowledge and skills learned through employment or volunteer work in a licensed child care center, a school-aged only program, a preschool, a registered child development home or as a child care home provider.

“*Child care nurse consultant*” or “*CCNC*” means a registered nurse licensed in the state of Iowa who has completed training incorporating the nationally approved child care health competencies for health and safety in child care and early education. The CCNC provides on-site consultation, technical assistance, care planning for children with special health needs and training to child care and early education providers regarding health and safety. The CCNC is employed by or has a written agreement with the local Title V maternal and child health agency or the Iowa department of public health (IDPH) for service delivery directly through the state-level Title V maternal and child health program administered by the IDPH bureau of family health.

“*Child care resource and referral*” or “*CCR&R*” means the statewide (regionally based) agency focused on supporting quality child care throughout the state of Iowa. CCR&R serves as the starting point for all IQ4K applications and provides free technical assistance and consultation to providers throughout the IQ4K application process.

“*Child development associate credential*” or “*CDA*” means a nationally recognized credential earned by individuals working in the early child care and education field. The CDA credential is based on a core set of competency standards and includes an assessment process by the Council for Professional Recognition.

“*Child development home*” means a person or program registered under Iowa Code section 237A.3A that may provide child care to seven or more children at any one time.

“*ChildNet certification*” means a verified completion of the 25-hour ChildNet training series and completion of the certification process.

“*ChildNet training*” means the 25-hour training series offered through CCR&R focused on areas specifically designed for child development home providers.

“*Child nutrition programs*” or “*CNP*” means federally funded programs administered by the Food and Nutrition Service (FNS). The programs are designed to help ensure that children receive nutritious meals and snacks to assist in promoting health and educational readiness. Programs serving nutritious meals and snacks are reimbursed for participating.

“*Classroom assessment scoring system*” or “*CLASS*” means an observation instrument that assesses the quality of teacher-child interactions in center-based classrooms.

“*Community resources*” means the various people, places or services that offer support to child care programs and the children and families they serve.

“*Coproducer*” means a second approved provider in a Category C registered child development home.

“*Culturally sensitive*” means the knowledge, skills, attributes and beliefs that enable people to work well with, respond effectively to and be supportive of people in a cross-cultural setting.

“*Curriculum*” means a written plan that outlines how students shall be taught. The curriculum consists of the plans for the learning experiences through which children acquire knowledge, skills, abilities, and understanding. The curriculum may include lessons, instructional materials, teaching techniques, or activities.

“*Department*” means the Iowa department of human services.

“*Developmental screening tool*” means a research-based questionnaire or checklist that asks questions about

a child's development, including but not limited to language, movement, thinking, behavior and emotions. Developmental screening shall not be used to establish a diagnosis for a child but rather to help educators, parents, guardians or caretakers determine whether more in-depth assessment may be the next appropriate step.

"Early childhood-positive behavioral interventions and supports" or *"EC-PBIS"* means Iowa's pyramid model initiative which offers early childhood programs a comprehensive, evidence-based approach to promoting social-emotional development and addressing challenging behaviors among young children. EC-PBIS creates nurturing environments for children equipped with supported staff trained to respond to challenging behaviors to support the goal of fostering positive mental health at a young age.

"EC-PBIS module training" means a series of training intended for staff working with young children. The training teaches the pyramid model, which is a framework of evidence-based practices for promoting young children's healthy social and emotional development. There are different versions of the training depending on what setting and what age group the staff member is working with. Versions include:

1. EC-PBIS for Preschool (modules 1-3) intended for staff working in classroom-based programs with ages three to five.
2. EC-PBIS for Infants and Toddlers (modules 1-3) intended for staff working in classroom-based programs with ages zero to three.
3. EC-PBIS for Family Child Care (modules 1-2) intended for staff working with multiple ages of children in family child care settings.

"Eligible applicants" means programs meeting the definition of "facility". ~~or programs operating under the authority of an accredited school district or nonpublic school.~~

"Environment rating scale" or *"ERS"* means a set of early childhood tools or scales developed through the Frank Porter Graham Child Development Institute of the University of North Carolina at Chapel Hill. The scales are used to measure classroom and program quality through assessments by a trained, independent observer. The scales may also be used for self-assessment and program improvement. Four scales are available based on the type of program and ages of children in the classroom assessed:

1. Family child care environment rating scale (FCCERS) is for programs in a family child care or child development home setting for children from infancy through school age.
2. Infant and toddler environment rating scale (ITERS) for groups of children in center-based care from birth up to three years of age.
3. Early childhood environment rating scale (ECERS) for center-based care with groups of children aged three through five years.
4. School-age care environment rating scale (SACERS) for center-based programs with groups of school-age children aged 5 through 12 years.

"ERS assessment" means an evaluation conducted through an on-site observation of an early childhood care and education classroom or program using one of the environment rating scales: FCCERS, ITERS, ECERS, or SACERS. The assessment is completed by a trained assessor and administered by entities approved by the department or the department's designee.

"ERS improvement plan" means the action plan created by a program or classroom to lay out ideas for improving program quality. It uses a framework based on ERS criteria and definitions. The ERS improvement plan follows and builds upon a completed ERS classroom or program self-assessment using the appropriate ERS.

"ERS score sheet" means the form used to evaluate and score a program or classroom based on the ERS items and indicators.

"Facility" means a licensed child care center, a preschool, a program operating under the authority of an accredited school district or nonpublic school, or a registered child development home.

"Full-time child care experience" means knowledge and skills learned through employment or volunteer work, at least 30 hours per week or 130 hours per month, in a licensed child care center, a school-aged only program, a preschool, or a registered child development home or as a child care home provider.

"Head Start program performance standards" means the mandatory regulations that grantees and delegate agencies must implement in order to operate a Head Start program. The performance standards are designed to ensure that Head Start goals and objectives are implemented successfully.

"Health and safety checklist for early care and education (ECE) programs" means the nationally recognized

quality assessment tool, conducted by a CCNC or another designee as approved by the department, that uses key observable health and safety standards from CFOC. If followed, these standards are most likely to prevent adverse outcomes for children and staff in ECE settings. For the health and safety checklist, “observable” is defined as the following:

1. Requires interaction with the staff or director only to ask where to find an item or identify products.
2. Able to observe when walking through a program over a two-hour period of time.
3. The standard or item can be seen and evaluated in an objective way.
4. Observation may include opening windows, taking measurements (for example, measuring the depth of an impact surface or height of equipment), smelling for odors and reading labels (for example, checking dates on medication labels).
5. Does not require checking records or documents, such as child immunizations, professional development records or written program policies.

“*Internal coach*” means the staff member, identified by the program administrator, responsible for going into classrooms and supporting staff on the implementation of the EC-PBIS policies and practices. The internal coach shall be a member of the program’s positive behavioral interventions and supports (PBIS) leadership team.

“*Iowa early care and education program administrator roles career pathway*” means the statewide professional development path (www.ecieducationpathway.org) designed to assist early childhood center administrators or other early childhood leaders to develop a personal professional development plan as an early childhood educator II or early childhood educator III.

“*Iowa early care and education teaching roles career pathway*” means the statewide professional development path (www.ecieducationpathway.org) designed to assist early childhood teachers in a licensed center or a child development home to develop a personal professional development plan as an early childhood educator I, an early childhood educator II or an early childhood educator III.

“*Iowa early learning standards*” or “*IELS*” means a comprehensive resource tool developed to support and enhance children’s learning and development. The IELS provides descriptions of the knowledge, behaviors and skills that children from birth through age five may demonstrate and can be used to share information with anyone who cares for or works with children during the first 2,000 days of life.

“*Iowa quality preschool program standards*” means standards developed by the Iowa department of education based on the ten standards of the National Association for the Education of Young Children accreditation.

“*IQ4K teaching staff qualifications worksheet*” means the tool used to calculate an average score in the area of teaching staff qualification using a combination of the educational background and related work experience of identified teaching staff members.

“*Leadership team*” means the team of people that is working to implement a programwide EC-PBIS. The team is composed of program administrators, teachers and a coach. The leadership team is responsible for guiding the programwide process and making decisions on how to support implementation of the EC-PBIS practices throughout the whole program.

“*Lead teacher*” means the staff member responsible for providing a safe and developmentally appropriate classroom that complies with legislation, policies, and procedures. The lead teacher nurtures children, plans and provides instruction and other activities, ensures student safety, directs the work of other teachers in the classroom, communicates with parents and guardians, is familiar with emergency procedures, and ensures children with diverse needs are included and have their needs met at all times.

“*Meals*” means any breakfasts, lunches, snacks and suppers the child care program serves to children while in care.

“*National Administrator Credential*” or “*NAC*” means the 40-hour comprehensive training for child care and education administrators and successful completion of the certification process offered through the National Early Childhood Program Accreditation (NECPA) Commission.

“*National School Lunch Program*” or “*NSLP*” means a federal CNP operating in public and nonprofit private schools and residential child care institutions. The NSLP provides nutritionally balanced, low-cost or no-cost lunches to children each school day.

“*On-site supervisor*” means the individual responsible for the daily supervision of the program who must be

on site daily, either during the hours of operation that children are present or at a minimum of eight hours of the program's hours of operation.

"Prevent-Teach-Reinforce for Young Children" or *"PTR-YC"* means the training based on the PTR-YC process for use in early childhood care and education settings including pre-K classrooms and consists of teams and goal setting, practical data collection, functional behavioral assessment, intervention planning and implementation. All steps are designed for use by early childhood providers.

"Professional development plan" means the individualized plan used to improve knowledge and skills. Professional development plans shall address the following:

1. Assessment of an individual's current interests, knowledge and skills.
2. Identification of specific areas for improvement.
3. Development of strategies and resources.
4. Creation of opportunities to reflect and demonstrate an individual's professional growth.

"Professional development training" means continuing education and career training offered by a department-approved training organization to child care and education providers to help them develop new skills, stay up to date on current trends and advance their careers.

"Program" refers to the complete operation of an eligible facility applying for an IQ4K rating.

"Program administrator or director" means a department-approved staff member responsible for overseeing the day-to-day operations of a child care program. The person is in charge of all aspects of running the program, including scheduling trainings, planning educational activities, hiring and managing properly trained staff, handling the budget, and establishing well-defined policies and procedures. The person is responsible for everything that takes place within the program and acts as the main communication hub between parents, teachers and children.

"Programwide PBIS training" or *"PW PBIS training"* means the training intended for leadership teams of classroom-based early childhood programs. The purpose of the training is to help guide and support the leadership team through the programwide EC-PBIS process.

"Provider" means the person or program that applies for registration to provide child care and is approved as a child development home.

"Quality rating oversight team" means the workgroup convened to provide oversight and guidance to the department regarding Iowa's QRIS.

"School-aged only program" means an eligible facility providing care primarily to children aged 5 through 12 when school is not in session, including but not limited to before school, after school, out-of-school days during the school year and summer break.

"Seamless summer option" or *"SSO"* means a federal CNP which allows school food authorities participating in the National School Lunch or School Breakfast Program to serve meals free of charge to children 18 years and under from low-income areas.

"Self-assessment" means an evaluation of current program policies, practices and procedures in comparison to best-practice standards based on the most up-to-date research.

"Social-emotional-behavioral mental health" or *"SEBMH"* means the way in which an individual thinks, feels, communicates, acts and learns. These skills contribute to resilience and to how individuals relate to others, respond to stress and emotions, and make choices. Foundational knowledge and skills that promote positive SEBMH include self-awareness, self-management, responsible decision-making, social awareness, and relationship skills that support positive well-being and academic success.

"Specialized track" means a modified IQ4K application for eligible applicants who have successfully provided adequate documentation of current verification and certification in one of the department's preapproved specialized track areas.

"Staff" means any individual employed by and working at the facility under the supervision of the program administrator or director or assistant program administrator or assistant director.

"Summer food service program" or *"SFSP"* means a federal CNP that reimburses program operators who serve free healthy meals and snacks to children 18 years and under from low-income areas.

"Teaching staff" means all lead teachers and assistant teachers.

441—118.10(237A) Application for Iowa quality for kids (IQ4K) rating. Eligible applicants shall apply for an IQ4K rating by completing the appropriate application and submitting all required supporting documentation.

118.10(1) Standards to be used. The quality rating will be based on the standards in rules 441—118.21(237A) through 441—118.25(237A) for a child care center, preschool, or program operating under the authority of an accredited school district or nonpublic school; rules 441—118.27(237A) through 441—118.31(237A) for school-aged only programs; and rules 441—118.33(237A) through 441—118.37(237A) for child development homes.

118.10(2) Application for IQ4K. All applications must be accessed, completed and submitted to the applicant's designated CCR&R representative through the IQ4K database located at iq4k.stateofiodahs.org/login.

441—118.11(237A) Application effective date. The effective date of an approved IQ4K application shall be determined as listed in these subrules.

118.11(1) New or nonrated applicant, Levels 1-4. The application effective date will be the day the department certifies the application is complete and makes the appropriate award determination.

118.11(2) New or nonrated applicant, Level 5. The application effective date will be the day the department confirms the program's scores on the ERS and subsequently makes the appropriate award determination. The effective date of a program whose assessment opportunity has been forfeited, as outlined in rule 441—118.25(237A), shall be the date the department determined the assessment opportunity was forfeited.

118.11(3) Currently rated applicant, Levels 1-4. If the program's new application is submitted prior to the IQ4K expiration date, the new application's effective date shall be the first day of the month following the program's current expiration date.

118.11(4) Currently rated applicant, Level 5. If the program's new application is submitted 30 calendar days prior to the IQ4K expiration date, the new application's effective date shall be the first day of the month following the program's current expiration date.

a. If the program's new application is not submitted 30 calendar days prior to the IQ4K expiration date, the new application effective date will be the day the department confirms the program's scores on the ERS and subsequently makes the appropriate award determination.

b. If the ERS process is not complete by the time of the program's IQ4K expiration date, the program's IQ4K rating will expire, and the program will not have an IQ4K rating until the ERS process is complete and a new IQ4K rating is determined.

c. The effective date of a program whose assessment opportunity has been forfeited, as outlined in rule 441—118.25(237A), shall be the date the department determined the assessment opportunity was forfeited.

118.11(5) Currently rated applicant, mid-rating increase to Levels 2-4. The application effective date will be the day the department certifies the application is complete and makes the appropriate award determination.

118.11(6) Currently rated applicant, mid-rating increase to Level 5. The application effective date will be the day the department confirms the program's scores on the ERS and subsequently makes the appropriate award determination. The effective date of a program whose assessment opportunity has been forfeited, as outlined in rule 441—118.25(237A), shall be the date the department determined the assessment opportunity was forfeited.

441—118.12(237A) Approved program's expiration date. An approved program's IQ4K expiration date shall be the last day of the month, two years from the application's effective date.

441—118.13(237A) Renewal application submission, Levels 1-4. Eligible applicants may submit an application for IQ4K renewal up to 45 calendar days in advance of the current IQ4K expiration date.

441—118.14(237A) Renewal application submission, Level 5. Eligible applicants may submit an application for IQ4K renewal up to 60 calendar days in advance of the current IQ4K expiration date.

441—118.15(237A) Increased rating. Currently rated IQ4K programs may submit an application for a higher quality rating no sooner than 12 months after the effective date of the current IQ4K certificate.

441—118.16(237A) Change in location of facility. If the location of a rated program changes, the program must notify the department. The program's current IQ4K rating will be invalid, and the program must submit a new application. The department shall make a new determination of the appropriate rating.

441—118.17(237A) Ongoing eligibility. All applicants awarded an IQ4K certification level must continue to meet all eligibility requirements of the awarded level throughout the entire certification period.

118.17(1) Programs unable to maintain full compliance with all eligibility requirements at their awarded level may apply for a waiver of eligibility within 30 calendar days of their inability to do so.

118.17(2) Waivers shall be awarded at the discretion of the department, in consultation with the quality rating oversight team.

118.17(3) Programs that are not able to meet all eligibility requirements of the awarded level throughout the entire certification period or that do not receive a waiver will have their IQ4K rating removed immediately.

118.17(4) Provisionally licensed programs are not eligible to apply for IQ4K participation.

441—118.18(237A) Monitoring. Programs awarded an IQ4K rating shall agree to scheduled on-site and virtual program monitoring by the department or the department's designee to confirm and review compliance with criteria of awarded IQ4K rating.

441—118.19(237A) Professional development training. Only training taken from a department-approved training organization shall be accepted toward professional training requirements. Secondary education credits shall count as one secondary education credit equaling 15 training hours based on ages of the children served in the program.

441—118.20(237A) Rating standards for a child care center, a preschool, or a program operating under the authority of an accredited school district or nonpublic school. To participate in IQ4K QRIS, a child care center, preschool, or program operating under the authority of an accredited school district or nonpublic school shall certify that its facility meets the applicable criteria as defined in rules 441—118.21(237A) through 441—118.25(237A).

118.20(1) Eligible applicants providing adequate documentation of current verification or certification in one of the preapproved specialized track areas shall only be required to satisfy the criteria outlined in the application consistent with their specialized track.

118.20(2) Programs with more than one classroom shall not be eligible to apply using a specialized track application unless over 50 percent of their eligible classrooms meet the specialized track requirements.

118.20(3) Eligible applicants shall be able to earn credit for participation in more than one of the specialized track areas.

441—118.21(237A) Criteria for IQ4K—Level 1 child care center, preschool, or program operating under the authority of an accredited school district or nonpublic school. To be rated at a Level 1, an eligible facility must satisfy all of the criteria in each of the seven designated categories listed in Level 1 or complete all of the criteria designated in its respective specialized tracks.

118.21(1) Nutrition and physical activity.

a. All staff members who prepare meals shall complete one of the department-approved food safety trainings.

b. A self-assessment and action plan in the area of nutrition shall be completed for an eligible facility.

c. A self-assessment and action plan in the area of physical activity shall be completed for an eligible facility.

118.21(2) Professional development.

a. All staff shall complete a professional development plan within six months of each person's hiring date and update the plan annually.

b. All staff shall complete one of the department-identified new staff orientation courses and must provide a valid certificate of completion. Newly hired staff shall have nine months from date of hire to complete this

requirement.

118.21(3) *Family and community partnerships.*

- a. The program shall provide an orientation for new families.
- b. The program shall complete one annual activity that promotes partnerships.

118.21(4) *Teaching staff qualifications.* All lead teachers shall show participation in Tier 1 training or meet a higher tier qualification on the Iowa early care and education teaching roles career pathway within six months of starting employment.

118.21(5) *Teaching and learning.*

- a. The program administrator and at least one lead teacher shall complete two hours of training on the Iowa early learning standards.
- b. The program shall develop and implement a comprehensive discipline and behavior policy that promotes positive relationships.

118.21(6) *Environment.*

a. The program shall develop and implement, as applicable to ages served, the following policies aligned to CFOC:

- (1) Supervision.
- (2) Safe sleep.
- (3) Playground equipment stability and fall surfacing and inspection.
- (4) Missing child.
- (5) Strangulation prevention.
- (6) Sign in and out tracking system for children and visitors.

b. The program shall submit one of the following annually:

- (1) Form 470-5676: IQ4K Interaction and Relationship Self-Assessment, which shall be completed by teaching staff.
- (2) CLASS assessment for the age-level being served completed for each classroom by a trained observer.
- (3) Teaching pyramid observation tool (TPOT) or teacher pyramid infant toddler observation scale (TPITOS) assessment tools for infants and toddlers completed for each classroom by a trained observer.

118.21(7) *Leadership and administration.*

- a. All staff shall complete Form 470-5680: IQ4K Staff Self-Assessment annually.
- b. The program administrator shall complete Form 470-5677: IQ4K Program Assessment annually.

441—118.22(237A) Criteria for IQ4K—Level 2 child care center, preschool, or program operating under the authority of an accredited school district or nonpublic school. To be rated at a Level 2, an eligible facility must satisfy all of the criteria in each of the seven designated categories listed in Levels 1 and 2 or complete all of the criteria designated in its respective specialized tracks for Levels 1 and 2.

118.22(1) *Nutrition and physical activity.*

a. The program shall choose one of the following:

- (1) The program shall actively participate in CACFP, NSLP, or another department-approved CNP.
- (2) The program shall complete all of the following as applicable to ages served:
 1. Program staff and their supervisor planning the menu shall complete the CACFP Steps to Success module 2 lessons as identified by the department that cover the CACFP meal pattern.
 2. Infant lead teachers and their supervisor shall complete the video “CACFP Child Care Center Infant Staff Training” or Iowa CACFP Infant Training—Steps to Success module 15, parts as identified by the department.
 3. All lead teachers and their supervisors responsible for mealtime supervision shall complete the video “CACFP Child Care Center Staff Training” or the Iowa CACFP Wellness module—Meaningful Mealtimes.

b. The program shall identify and implement one physical activity goal from the completed action plan in Level 1.

118.22(2) *Professional development.*

- a. All staff who administer medication shall complete the Medication Administration Skills Competency

Course or other training as approved by the department and hold a valid certification of completion.

b. All staff who administer medication shall also successfully complete a competency skills evaluation assessment checklist or department-approved equivalent and hold a valid certification of completion. There shall be one person who meets these criteria present on site in the program at all times.

c. All teaching staff shall complete ten annual training hours of professional development.

118.22(3) Family and community partnerships.

a. The program shall offer one conference with each family per year to discuss each child's progress, strengths, and needs in all developmental areas.

b. Programs shall share child assessment information with the child's family.

c. The program shall complete two activities annually that promote partnerships.

118.22(4) Teaching staff qualifications. All lead teachers shall meet Tier 1, step 1 of 40 hours of training toward a CDA or shall meet a higher tier qualification on the Iowa early care and education teaching roles career pathway.

118.22(5) Teaching and learning.

a. The program shall use a curriculum that is aligned with the Iowa early learning standards, addresses the multiple domain areas, and is specific to the ages of the children the program serves.

b. The program shall develop and implement a policy that eliminates or severely limits expulsion, suspension, and punitive or other exclusionary discipline.

c. The program shall develop and implement policies regarding the use of an approved developmental screening tool for all children within 60 days of enrollment and at least annually to identify children who may need additional evaluation and intervention strategies.

118.22(6) Environment.

a. The program administrator or assistant administrator shall complete an ERS training choosing between ITERS, ECERS or SACERS and provide a certificate of completion.

b. The program shall provide an environment supportive to, and encouraging of, culture, age, race, ability, special needs, and gender diversity.

c. The program shall develop and implement a tobacco-free and nicotine-free policy aligned to the Iowa department of public health's policy guidelines.

118.22(7) Leadership and administration.

a. The program administrator shall complete and annually update Form 470-5679: IQ4K Quality Improvement Action Plan.

b. All staff shall receive a written evaluation at least once a year.

c. The program administrator shall have at least two years of full-time experience working in the field.

441—118.23(237A) Criteria for IQ4K—Level 3 child care center, preschool, or program operating under the authority of an accredited school district or nonpublic school. To be rated at a Level 3, an eligible facility must satisfy all of the criteria in each of the seven designated categories listed in Levels 1, 2 and 3 or complete all of the criteria designated in its respective specialized tracks for Levels 1, 2 and 3.

118.23(1) Nutrition and physical activity.

a. The program shall choose one of the following:

(1) The program shall actively participate in CACFP, NSLP, or another department-approved CNP.

(2) If exempt from CACFP or NSLP, the program shall identify and implement two nutrition goals from the completed action plan in Level 1.

1. Programs providing adequate documentation they provide care for four hours a day or less are exempt from the CACFP or NSLP participation requirement.

2. Nonprofit programs shall qualify for an exemption from the CACFP or NSLP requirement if they provide adequate documentation that meets one of the following criteria:

- The percentage of children enrolled in the program qualifying for free or reduced meals is five percent or less.

- The program's licensed capacity is 30 or less.

- The program serves two or fewer meals or snacks per day.

- The program is open and operating three days a week or less.

3. For-profit programs shall qualify for an exemption from the CACFP or NSLP requirement if they are able to provide adequate documentation that the percentage of children enrolled in the program qualifying for free or reduced meals is 25 percent or less.

b. The program shall identify and implement two physical activity goals from the completed action plan in Level 1.

118.23(2) Professional development. All teaching staff shall complete ten annual training hours of professional development.

118.23(3) Family and community partnerships.

a. The program shall promote culturally sensitive practices and procedures.

b. The program shall complete three activities annually that promote partnerships.

118.23(4) Teaching staff qualifications. The average score for all lead teachers shall be three points or more on the IQ4K teaching staff qualifications worksheet.

118.23(5) Teaching and learning.

a. The program shall utilize an appropriate assessment tool throughout the year that aligns with the curriculum to gather information on each child's strengths, progress, and needs.

b. The program shall share community resources with families as needed based on the information gathered from the child's assessment.

c. The program shall develop and implement policies and procedures for inclusive practices for children with diverse needs, including those with identified disabilities, language barriers, identified behavioral needs, or specialized health needs.

118.23(6) Environment.

a. Thirty percent or more of lead teachers shall complete an appropriate ERS training choosing between ITERS, ECERS or SACERS as applicable to ages served, and provide a certificate of completion.

b. The program shall participate in the completion of the health and safety checklist for early care and education programs.

c. The program shall develop and implement a policy regarding oral health aligned with CFOC.

118.23(7) Leadership and administration.

a. The program administrator shall complete one of the following:

(1) NAC or another DHS-approved credential.

(2) Thirty training hours (or more) in early childhood and ten training hours or more in leadership, administration, or management.

b. The program administrator shall have one of the following:

(1) Three years or more of full-time experience working in the field.

(2) One year or more full-time experience as a program administrator.

441—118.24(237A) Criteria for IQ4K—Level 4 child care center, preschool, or program operating under the authority of an accredited school district or nonpublic school. To be rated at a Level 4, an eligible facility must satisfy all of the criteria in each of the seven designated categories listed in Levels 1, 2, 3 and 4 or complete all of the criteria designated in its respective specialized tracks for Levels 1, 2, 3 and 4.

118.24(1) Nutrition and physical activity.

a. The program shall choose one of the following:

(1) The program shall actively participate in CACFP, NSLP, or another department-approved CNP and shall identify and implement one nutrition goal from the completed action plan in Level 1.

(2) If exempt from CACFP or NSLP, the program shall identify and implement three nutrition goals from the completed action plan in Level 1.

b. The program shall identify and implement three physical activity goals from the completed action plan in Level 1.

118.24(2) Professional development.

a. All teaching staff shall complete 12 annual hours or more of professional development.

b. Sixty percent or more of all lead teachers shall complete the applicable EC-PBIS trainings based on age groups served.

(1) EC-PBIS Preschool modules 1 and 2.

(2) EC-PBIS Infant and Toddler modules 1 and 2.

118.24(3) Family and community partnerships. The program shall complete four activities annually that promote partnerships.

118.24(4) Teaching staff qualifications. The average score for all teaching staff shall be four points or more on the IQ4K teaching staff qualification worksheet.

118.24(5) Teaching and learning.

a. The teaching staff shall use assessment data and information gathered about children and families to make changes in their learning environment and activities.

b. The teaching staff shall participate in planning with families and outside experts, as needed, for children with diverse needs, including those with identified disabilities, language barriers, identified behavioral needs, and specialized health needs.

118.24(6) Environment.

a. Sixty percent or more of lead teachers shall complete an appropriate ERS training choosing between ITERS, ECERS or SACERS as applicable to ages served, and provide a certificate of completion.

b. One-third of all classrooms shall complete the ERS scoresheet with self-assessment and improvement plan using a minimum of one classroom per scale, if applicable.

c. The program shall score an average of 2.5 or higher on the health and safety checklist for early care and education.

118.24(7) Leadership and administration.

a. The program administrator shall meet Tier 1 or higher on the Iowa early care and education program administrator roles career pathway.

b. The program administrator shall have two or more years of full-time experience as a program administrator.

441—118.25(237A) Criteria for IQ4K—Level 5 child care center, preschool, or program operating under the authority of an accredited school district or nonpublic school.

118.25(1) Criteria for each category. To be rated at Level 5, an eligible facility must satisfy all of the criteria in each of the seven designated categories listed in Levels 1, 2, 3, 4 and 5 or complete all of the criteria designated in its respective specialized tracks for Levels 1, 2, 3, 4 and 5. To be rated at a Level 5, an eligible facility must also meet the following criteria:

a. *Minimum score.* The facility must earn a minimum score of 5.0 in each assessed classroom on the appropriate ERS.

b. *Approved assessor.* An assessor approved by the department or department's designee must perform an environment rating assessment.

c. *Number of classrooms assessed.* At least one-third of the facility's classrooms must be assessed, including at least one classroom in each age group serviced by the facility.

d. *Time frame for assessment.* Programs eligible for ERS assessment must undergo their assessment within 90 days of department approval unless an extension is requested and approved by the department.

e. *Assessments not done timely.* Programs that do not undergo their assessment within 90 days of approval by the department or do not receive an approved extension from the department shall forfeit their opportunity for an assessment and will be awarded an IQ4K Level 4 rating with an effective date as outlined in rule 441—118.11(237A).

118.25(2) Nutrition and physical activity.

a. The program shall choose one of the following:

(1) The program shall actively participate in CACFP, NSLP, or another department-approved CNP and shall identify and implement two nutrition goals from the completed action plan in Level 1.

(2) If exempt from CACFP or NSLP, the program shall identify and implement four nutrition goals from the completed action plan in Level 1.

b. The program shall identify and implement four physical activity goals from the completed action plan in Level 1.

118.25(3) Professional development.

a. All teaching staff shall complete 12 annual hours or more of professional development.

b. Sixty percent or more of all lead teachers and the internal coach shall complete the EC-PBIS trainings as follows:

- (1) EC-PBIS Preschool modules 3a and 3b.
- (2) EC-PBIS Infant and Toddler modules 3.
- (3) Prevent-Teach-Reinforce for Young Children (PTR-YC).

118.25(4) Family and community partnerships.

a. The program shall complete five activities annually that promote partnerships.

b. The program shall offer one additional conference with each family of preschool age children in care, per year, to discuss each child's progress, strengths, and needs in all developmental areas. Assessment information shall be shared with the family.

118.25(5) Teaching staff qualifications. The average score for all teaching staff shall be eight points or more on the IQ4K teaching staff qualification worksheet.

118.25(6) Teaching and learning.

a. The teaching staff shall work with families and other experts to implement instructional and environmental adaptations that support learning for each child, including those with diverse needs, identified disabilities, language barriers, identified behavioral health needs and specialized health needs.

b. The leadership team shall complete PW PBIS training. A leadership team must include an administrator, internal coach and teacher.

118.25(7) Environment.

a. Eighty percent or more of lead teachers shall complete an appropriate ERS training choosing between ITERS, ECERS or SACERS as applicable to ages served, and provide a certificate of completion.

b. One-third of all classrooms shall receive an overall score of five or higher on each classroom's ERS assessment when using a minimum of one classroom per scale, if applicable.

c. The program shall score an average of 2.75 or higher on the health and safety checklist for early care and education.

118.25(8) Leadership and administration.

a. The program administrator shall meet Tier 2 or higher on the Iowa early care and education program administrator roles career pathway.

b. The program administrator shall have three or more years of full-time experience as a program administrator.

441—118.26(237A) Rating standards for school-aged only programs.

118.26(1) To participate in IQ4K QRIS, a school-aged only program shall certify that its facility meets the applicable criteria as defined in rules 441—118.27(237A) through 441—118.31 (237A).

118.26(2) The following program requirements apply:

a. Eligible applicants providing adequate documentation of current verification or certification in one of the preapproved specialized track areas shall only be required to satisfy the criteria outlined in the application consistent with their specialized track.

b. Programs with more than one classroom shall not be eligible to apply using a specialized track application unless over 50 percent of their eligible classrooms meet the specialized track requirements.

c. Eligible applicants shall be able to earn credit for participation in more than one of the specialized track areas.

441—118.27(237A) Criteria for IQ4K—Level 1 school-aged only programs. To be rated at a Level 1, an eligible facility must satisfy all of the criteria in each of the six designated categories listed in Level 1 or complete all of the criteria designated in its respective specialized tracks.

118.27(1) Nutrition and physical activity.

a. The program administrator and any staff members who prepare meals shall complete one of the department-approved food safety trainings.

b. A self-assessment and action plan in the area of nutrition shall be completed for an eligible facility.

c. A self-assessment and action plan in the area of physical activity shall be completed for an eligible facility.

118.27(2) Professional development.

a. All staff shall complete a professional development plan within six months of each person's hiring date and update the plan annually.

b. All staff shall complete one of the department-identified new staff orientation courses and must provide a valid certificate of completion. Newly hired staff shall have nine months from date of hire to complete this requirement.

118.27(3) Family and community partnerships.

a. The program shall provide an orientation for new families.

b. The program shall complete one annual activity that promotes partnerships.

118.27(4) Teaching and learning.

a. The program shall provide assistance or access to tutors to support homework or students' learning needs.

b. The program shall develop and implement a comprehensive discipline and behavior policy that promotes positive relationships.

c. The program shall develop and implement a comprehensive and age-appropriate schedule of activities.

118.27(5) Environment.

a. The program shall develop and implement, as applicable to ages served, the following policies aligned to CFOC:

- (1) Supervision.
- (2) Bullying prevention.
- (3) Playground equipment stability and fall surfacing and inspection.
- (4) Missing child.
- (5) Strangulation prevention.
- (6) Sign in and out tracking system for children and visitors.
- (7) Technology.

b. The program shall submit one of the following annually:

(1) Form 470-5676: IQ4K Interaction and Relationship Self-Assessment, which shall be completed by teaching staff.

(2) CLASS assessment for the age level being served and completed for each classroom by a trained observer.

118.27(6) Leadership and administration.

a. All staff shall complete Form 470-5680: IQ4K Staff Self-Assessment annually.

b. The program administrator shall complete Form 470-5677: IQ4K Program Assessment annually.

c. Meetings for all staff shall be conducted two or more times per year.

441—118.28(237A) Criteria for IQ4K—Level 2 school-aged only programs. To be rated at a Level 2, an eligible facility must satisfy all of the criteria in each of the six designated categories listed in Levels 1 and 2 or complete all of the criteria designated in its respective specialized tracks for Levels 1 and 2.

118.28(1) Nutrition and physical activity.

a. The program shall choose one of the following:

(1) The program shall actively participate in CACFP, NSLP or another department-approved CNP.

(2) The program shall complete all of the following as applicable to ages served:

1. Program staff planning the meals and their supervisor shall complete the CACFP Steps to Success module 2 lessons as identified by the department that cover the CACFP meal pattern.

2. All lead staff and their supervisors responsible for mealtime supervision shall complete the video "CACFP School-Age Program Staff Training."

b. The program shall identify and implement one physical activity goal from the completed action plan in Level 1.

118.28(2) Professional development.

a. All staff who administer medication shall complete the Medication Administration Skills Competency Course or other training as approved by the department and hold a valid certification of completion.

b. All staff who administer medication shall also successfully complete a competency skills evaluation

assessment checklist or department-approved equivalent and hold a valid certification of completion. There shall be one person who meets these criteria present on site in the program at all times.

c. All staff shall complete ten annual training hours of professional development.

118.28(3) Family and community partnerships.

a. The program shall offer one conference with each family per year to discuss each child's progress, strengths, and needs in all developmental areas.

b. The program shall complete two activities annually that promote partnerships.

118.28(4) Teaching and learning.

a. The program shall develop and implement a curriculum that includes all of the following opportunities each day:

- (1) Active physical activity.
- (2) Creative expression.
- (3) Cooperative games.
- (4) Free choice with a variety of materials.
- (5) Academic support.

b. The program shall develop and implement a policy that eliminates or severely limits expulsion, suspension, and punitive or other exclusionary discipline.

118.28(5) Environment.

a. The program administrator or assistant administrator shall complete the SACERS training and provide a certificate of completion.

b. The program shall provide an environment supportive to and encouraging of culture, age, race, ability, special needs, and gender diversity.

c. The program shall develop and implement a tobacco-free and nicotine-free policy aligned to the Iowa department of public health's policy guidelines.

118.28(6) Leadership and administration.

a. The program administrator shall complete and annually update Form 470-5679: IQ4K Quality Improvement Action Plan.

b. All staff shall receive a written evaluation at least once a year.

c. The program administrator shall have at least two or more years of full-time experience working in the field.

441—118.29(237A) Criteria for IQ4K—Level 3 school-aged only programs. To be rated at a Level 3, an eligible facility must satisfy all of the criteria in each of the six designated categories listed in Levels 1, 2 and 3 or complete all of the criteria designated in its respective specialized tracks for Levels 1, 2 and 3.

118.29(1) Nutrition and physical activity.

a. The program shall choose one of the following:

- (1) The program shall actively participate in CACFP, NSLP or another department-approved CNP.
- (2) If exempt from CACFP or NSLP, the program shall identify and implement two nutrition goals from the completed action plan in Level 1.

1. Programs providing adequate documentation that they provide care for four hours a day or less are exempt from the CACFP or NSLP participation requirement.

2. Nonprofit programs shall qualify for an exemption from the CACFP or NSLP requirement if they provide adequate documentation that meets one of the following criteria:

- The percentage of children enrolled in the program qualifying for free or reduced meals is five percent or less.
- The program's licensed capacity is 30 children or fewer.
- The program serves two or fewer meals or snacks per day.
- The program is open and operating three days a week or less.

3. For-profit programs shall qualify for an exemption from the CACFP or NSLP requirement if they are able to provide adequate documentation that the percentage of children enrolled in the program qualifying for free or reduced meals is 25 percent or less.

b. The program shall identify and implement two physical activity goals from the completed action plan in

Level 1.

118.29(2) Professional development. All staff shall complete ten or more annual training hours of professional development.

118.29(3) Family and community partnerships.

a. The program shall promote culturally sensitive practices and procedures.

b. The program shall complete three activities annually that promote partnerships.

118.29(4) Teaching and learning.

a. Program staff shall utilize an appropriate tool throughout the year to gather information about children's strengths, progress, and needs.

b. The program shall share community resources with families as needed based on the information gathered.

c. The program shall develop and implement policies and procedures for inclusive practices for children with diverse needs, including those with identified disabilities, language barriers, identified behavioral needs, or specialized health needs.

118.29(5) Environment.

a. The on-site supervisor shall complete the SACERS training series and provide a certificate of completion.

b. The program shall participate in the completion of the health and safety checklist for early care and education programs.

118.29(6) Leadership and administration.

a. The program administrator shall complete:

(1) NAC or another department-approved credential, or

(2) Thirty training hours or more in a related field and ten training hours or more in leadership.

b. The program administrator shall have three years or more of full-time experience working in the field or one year or more of full-time experience as a program administrator.

c. The on-site supervisor shall have 30 training hours or more in a related field and two years or more of full-time experience working in the field.

441—118.30(237A) Criteria for IQ4K—Level 4 school-aged only programs. To be rated at a Level 4, an eligible facility must satisfy all of the criteria in each of the six designated categories listed in Levels 1, 2, 3 and 4 or complete all of the criteria designated in its respective specialized tracks for Levels 1, 2, 3 and 4.

118.30(1) Nutrition and physical activity.

a. The program shall choose one of the following:

(1) The program shall actively participate in CACFP, NSLP or another department-approved CNP and shall identify and implement one nutrition goal from the completed action plan in Level 1.

(2) If exempt from CACFP or NSLP, the program shall identify and implement three nutrition goals from the completed action plan in Level 1.

b. The program shall identify and implement three physical activity goals from the completed action plan in Level 1.

118.30(2) Professional development.

a. All staff shall complete 12 or more annual training hours of professional development.

b. Thirty percent or more of all staff shall complete six or more hours of department or IQ4K-approved training in the area of SEBMH.

118.30(3) Family and community partnerships. The program shall complete four activities annually that promote partnerships.

118.30(4) Teaching and learning.

a. Staff shall use information gathered about children and families to make changes in their learning environment and activities.

b. Staff shall participate in planning with families and outside experts as needed for children with diverse needs, including those with identified disabilities, language barriers, identified behavioral needs, or specialized health needs.

118.30(5) Environment.

a. One staff member or more shall complete the SACERS training series and provide a certificate of completion.

b. One-third of classrooms shall complete the SACERS scoresheet with self-assessment and an improvement plan with a minimum of one classroom per scale if applicable.

c. The program shall score an average of 2.5 or higher on the health and safety checklist for early care and education.

118.30(6) Leadership and administration.

a. The program administrator shall have 120 training hours or more in a related field and 10 training hours or more in leadership, administration or management.

b. The program administrator shall have two years or more of full-time experience as a program administrator.

c. The on-site supervisor shall have 90 training hours or more in a related field and one year or more of full-time experience as an on-site supervisor.

441—118.31(237A) Criteria for IQ4K—Level 5 school-aged only programs.

118.31(1) Criteria for each category. To be rated at a Level 5, an eligible facility must satisfy all of the criteria in each of the six designated categories listed in Levels 1, 2, 3, 4 and 5 or complete all of the criteria designated in its respective specialized tracks for Levels 1, 2, 3, 4 and 5. To be rated at a Level 5, an eligible facility must also meet the following criteria:

a. *Minimum score.* The facility must earn a minimum score of 5.0 in each assessed classroom on the SACERS assessment.

b. *Approved assessor.* An assessor approved by the department or department's designee must perform the ERS assessment.

c. *Number of classrooms assessed.* At least one-third of the facility's classrooms must be assessed, including at least one classroom in each age group served by the facility.

d. *Time frame for assessment.* Programs eligible for an ERS assessment must undergo their assessment within 90 days of department approval unless an extension is requested and approved by the department.

e. *Assessments not done timely.* Programs that do not undergo their assessment within 90 days of approval by the department or do not receive an approved extension from the department shall forfeit their opportunity for an assessment and will be awarded an IQ4K Level 4 rating with an effective date as outlined in rule 441—118.11(237A).

118.31(2) Nutrition and physical activity.

a. The program shall choose one of the following:

(1) The program shall actively participate in CACFP, NSLP or another department-approved CNP and shall identify and implement two nutrition goals from the completed action plan in Level 1.

(2) If exempt from CACFP or NSLP, the program shall identify and implement four nutrition goals from the completed action plan in Level 1.

b. The program shall identify and implement four physical activity goals from the completed action plan in Level 1.

118.31(3) Professional development.

a. All staff shall complete 12 or more annual training hours of professional development.

b. Sixty percent or more of all staff shall complete six or more hours of department-approved or IQ4K-approved training in the area of SEBMH.

118.31(4) Family and community partnerships. The program shall complete five activities annually that promote partnerships.

118.31(5) Teaching and learning. The teaching staff shall work with families and other experts to implement instructional and environmental adaptations that support the learning for each child including those with diverse needs, language barriers, identified behavioral needs, or specialized health needs.

118.31(6) Environment.

a. Eighty percent or more of lead teachers shall complete the SACERS training series and provide a certificate of completion.

b. One-third of classrooms shall receive an overall score of 5.0 or higher on the SACERS assessment with a minimum of one classroom per scale if applicable.

c. The program shall score an average of 2.75 or higher on the health and safety checklist for early care and education.

118.31(7) Leadership and administration.

a. The program administrator shall have 9 or more credit hours in a related field and 12 or more training hours in leadership, administration or management.

b. The program administrator shall have three or more years of full-time experience as a program administrator.

c. The on-site supervisor shall have six or more credit hours in a related field and two or more years of full-time experience as an on-site supervisor.

441—118.32(237A) Rating standards for registered child development homes. To participate in IQ4K QRIS, a registered child development home shall certify that it meets the applicable criteria as defined in rules 441—118.33(237A) through 441—118.37(237A). The following program requirements apply:

1. For Category C homes operating with an approved coprovider, both providers must satisfy the applicable criteria where designated.

2. Eligible applicants providing documentation of current verification or certification in one of the preapproved specialized track areas shall only be required to satisfy the criteria outlined in the application consistent with their specialized track.

3. Eligible applicants shall be able to earn credit for participation in more than one of the specialized track areas.

441—118.33(237A) Criteria for IQ4K—Level 1 rating standards for registered child development homes. To be rated at Level 1, an eligible registered child development home must satisfy all of the criteria in each of the six designated categories listed in Level 1 or complete all of the criteria designated in its respective specialized tracks for Levels 1 and 2.

118.33(1) Nutrition and physical activity.

a. The provider and coprovider, where applicable, shall complete one of the department-approved food safety trainings.

b. The program shall complete a self-assessment and create an action plan in the area of nutrition.

c. The program shall complete a self-assessment and create an action plan in the area of physical activity.

118.33(2) Professional development. The provider and coprovider, where applicable, shall complete a professional plan annually.

118.33(3) Family and community partnerships.

a. The program shall provide an orientation for new families.

b. The program shall complete one annual activity that promotes partnerships.

118.33(4) Provider qualifications. The provider and coprovider, where applicable, shall have one year or more of full-time child care experience.

118.33(5) Teaching and learning.

a. The provider and coprovider, where applicable, shall complete two hours of training on the Iowa early learning standards.

b. The program shall develop and implement a comprehensive discipline and behavior policy that promotes positive relationships.

118.33(6) Environment.

a. The program shall develop and implement, as applicable to ages served, the following policies aligned to CFOC:

(1) Supervision.

(2) Safe sleep.

(3) Missing child.

(4) Strangulation prevention.

(5) Sign in and out tracking system for children and visitors.

b. The provider and coprovider, where applicable, shall complete Form 470-5676: IQ4K Interaction and Relationship Self-Assessment.

c. The program shall annually complete Form 470-5678: IQ4K Program Assessment.

441—118.34(237A) Criteria for Level 2 rating standards for registered child development homes. To be rated at a Level 2, an eligible registered child development home must satisfy all of the criteria in each of the six designated categories listed in Levels 1 and 2 or complete all of the criteria designated in its respective specialized tracks.

118.34(1) Nutrition and physical activity.

a. The program shall choose one of the following:

(1) The program shall actively participate in CACFP.

(2) The provider and coprovider, where applicable, shall complete all of the following as applicable to ages served:

1. Iowa CACFP Steps to Success module 2 lessons as identified by the department that cover the CACFP Meal Pattern.

2. Iowa CACFP Infant Training-Steps to Success module 15, parts one and two.

3. Iowa CACFP Wellness module-Meaningful Mealtimes.

b. The program shall identify and implement one physical activity goal from the completed action plan in Level 1.

118.34(2) Professional development. There shall be one person who meets the following criteria present on site in the program at all times.

a. The provider and coprovider, where applicable, shall complete ChildNet Training.

b. The provider and coprovider, where applicable, shall complete 15 hours or more of annual training hours of professional development.

c. The provider shall complete the medication administration skills competency course or other department-approved training and hold a valid certification of completion.

d. The provider shall also successfully complete a competency skills evaluation assessment checklist or department-approved equivalent and hold a valid certification of completion.

118.34(3) Family and community partnerships.

a. The program shall offer one conference with each family annually to discuss each child's progress, strengths and needs in all developmental areas. Programs shall share child assessment information with the child's family.

b. The program shall complete two activities annually that promote partnerships.

118.34(4) Provider qualifications. The provider and coprovider, where applicable, shall meet one of the following:

a. Two years or more of full-time experience in child care.

b. Six college credit hours or more in education specific to the age group for whom care is provided.

118.34(5) Teaching and learning.

a. The program shall develop and implement a daily schedule with predictable routines that are developmentally appropriate for all ages served.

b. The program shall develop and implement a policy that eliminates or severely limits expulsion, suspension, and punitive or other exclusionary discipline.

c. The program shall develop and implement policies regarding the use of an approved developmental screening tool for all children in care within 60 days of enrollment and at least annually to identify children who may need additional evaluation and intervention strategies.

118.34(6) Environment.

a. The program shall provide an environment supportive to, and encouraging of, culture, age, race, ability, special needs, and gender diversity.

b. The program shall develop and implement a policy regarding playground equipment stability and fall surfacing and inspection which are aligned with CFOC.

c. The program shall develop and implement a tobacco-free and nicotine-free policy.

d. The program shall annually complete and update Form 470-5679: IQ4K Quality Improvement Action

Plan.

441—118.35(237A) Criteria for IQ4K—Level 3 rating standards for registered child development homes. To be rated at a Level 3, an eligible registered child development home facility must satisfy all of the criteria in each of the six designated categories listed in Levels 1, 2 and 3 or complete all of the criteria designated in its respective specialized tracks for Levels 1, 2 and 3.

118.35(1) Nutrition and physical activity.

- a. The program shall actively participate in CACFP.
- b. The program shall identify and implement two physical activity goals from the completed action plan in Level 1.

118.35(2) Professional development.

- a. The provider and coprovider, where applicable, shall complete ChildNet Certification.
- b. The provider and coprovider, where applicable, shall choose one of the following trainings to complete their initial IQ4K rating:

(1) Complete one module of the Program for Infant and Toddler Care.

(2) Complete module 1 of the EC-PBIS for Family Child Care and complete the following implementation guide checklists and review with coach:

1. Relationships.
 2. Environments.
 3. Expectations, Activities and Feedback.
- (3) Complete School Age Matters training.

c. The provider and coprovider, where applicable, shall choose one of the other trainings listed above for their subsequent IQ4K ratings until all of the trainings applicable per ages served have been completed.

d. Once the provider and coprovider, as applicable, have completed all of the age applicable trainings, the provider and co-provider shall complete 18 annual hours of approved professional development training on all subsequent IQ4K applications.

118.35(3) Family and community partnerships.

- a. The program shall promote culturally sensitive practices and procedures.
- b. The program shall complete three activities annually that promote partnerships.

118.35(4) Provider qualifications. The provider and coprovider, where applicable, shall meet one of the following:

- a. Three years or more of child care experience.
- b. Nine or more college credit hours in education, specific to the age group for whom care is provided.

118.35(5) Teaching and learning.

a. The program shall utilize an appropriate assessment tool throughout the year that aligns with the curriculum to gather information on each child's strengths, progress, and needs.

b. The program shall share community resources with families as needed, based on the information gathered from the child's assessment.

c. The program shall develop and implement policies and procedures for inclusive practices for children with diverse needs, including those with identified disabilities, language barriers, identified behavioral needs, and specialized health needs.

118.35(6) Environment.

- a. The provider shall complete the FCCERS ERS training and provide a certificate of completion.
- b. A self-assessment and action plan in the area of nutrition shall be completed for an eligible facility.
- c. A self-assessment and action plan in the area of physical activity shall be completed for an eligible facility.

441—118.36(237A) Criteria for IQ4K—Level 4 rating standards for registered child development homes. To be rated at Level 4, an eligible registered child development home facility must satisfy all of the criteria in each of the six designated categories listed in Levels 1, 2, 3 and 4 or complete all of the criteria designated in its respective specialized tracks for Levels 1, 2, 3 and 4.

118.36(1) Nutrition and physical activity.

- a. The program shall actively participate in CACFP.
- b. The program shall implement one nutrition goal from the completed action plan in Level 1.
- c. The program shall identify and implement three physical activity goals from the completed action plan in Level 1.

118.36(2) Professional development.

a. The provider and coprovider, where applicable, shall choose one of the following trainings to complete for their initial IQ4K rating:

(1) Complete two additional modules of the Program for Infant and Toddler Care.

(2) Complete module 2 of the EC-PBIS for Family Child Care and complete the following implementation guide checklists and review with coach:

1. Emotions and Emotional Regulation.
2. Friendships and Problem Solving.

b. The provider and coprovider, where applicable, shall choose one of the other trainings listed above for their subsequent IQ4K ratings until all of the trainings applicable per ages served have been completed.

c. Once the provider and coprovider, as applicable, have completed all of the age applicable trainings, the provider and co-provider shall complete 20 annual hours of approved professional development training on all subsequent IQ4K applications.

118.36(3) Family and community partnerships. The program shall complete four activities annually that promote partnerships.

118.36(4) Provider qualifications. The provider and coprovider, where applicable, shall meet one of the following:

a. The provider shall meet Tier 2 or higher on the Iowa early care and education teaching roles career pathway.

b. The provider shall have three or more years of full-time child care experience.

118.36(5) Teaching and learning.

a. The program shall use information gathered about children and families to make changes in their learning environment and activities.

b. The program shall participate in planning with families and other experts, as needed, for children with diverse needs, including those with identified disabilities, language barriers, identified behavioral health needs and specialized health needs.

118.36(6) Environment.

a. The program shall complete the FCCERS ERS scoresheet with self-assessment and improvement plan.

b. The program shall score an average of 2.5 or higher on the health and safety checklist for early care and education programs.

441—118.37(237A) Criteria for IQ4K—Level 5 rating standards for registered child development homes.

118.37(1) Criteria for each category. To be rated at a Level 5, an eligible registered child development home facility must satisfy all of the criteria in each of the six designated categories listed in Levels 1, 2, 3, 4 and 5 or complete all of the criteria designated in its respective specialized tracks for Levels 1, 2, 3, 4 and 5. To be rated at a Level 5 the following criteria must also be met:

a. Minimum score. The program facility must earn a minimum score of 5.0 on the FCCERS ERS assessment.

b. Approved assessor. An assessor approved by the department or department's designee must perform the ERS assessment.

c. Time frame for assessment. Programs eligible for an ERS assessment must undergo their assessment within 90 days of department approval unless an extension is requested and approved by the department.

d. Assessments not done timely. Programs that do not undergo their assessment within 90 days of approval by the department or that do not receive an approved extension from the department shall forfeit their opportunity for an assessment and will be awarded an IQ4K Level 4 rating with an effective date as outlined in rule 441—118.11(237A).

118.37(2) Nutrition and physical activity.

- a. The program shall actively participate in CACFP.
- b. The program shall identify and implement two nutrition goals from the completed action plan in Level 1.
- c. The program shall identify and implement four physical activity goals from the completed action plan in Level 1.

118.37(3) Professional development.

- a. The provider shall choose one of the following trainings to complete their initial IQ4K rating:
 - (1) Complete two additional modules of the Program for Infant and Toddler Care.
 - (2) Complete EC-PBIS for Family Child Care Benchmarks of Quality and action plan for continued implementation and growth with coach. The EC-PBIS for Family Child Care must be completed.
- b. The provider shall then choose one of the other trainings listed above for their subsequent IQ4K ratings until all of the trainings applicable per ages served have been completed.
- c. Once the provider has completed all of the age-applicable trainings, the provider shall complete 22 annual hours of approved professional development training on all subsequent IQ4K applications.

118.37(4) Family and community partnerships. The program shall complete five activities annually that promote partnerships.

118.37(5) Provider qualifications.

- a. The provider shall meet Tier 2 or higher on the Iowa early care and education teaching roles career pathway.
- b. The provider shall have four or more years of full-time child care experience.

118.37(6) Teaching and learning. The program shall work with families and other experts to implement instructional and environmental adaptations that support the learning for each child, including those with diverse needs, identified disabilities, language barriers, identified behavioral health needs and specialized health needs.

118.37(7) Environment.

- a. The program shall achieve a score of 5.0 or higher on the FCCERS ERS assessment.
- b. The program shall score an average of 2.75 or higher on the health and safety checklist for early care and education programs.

441—118.38(237A) Award of quality rating

- 118.38(1)** The facility shall display Form 470-5681: IQ4K QRIS rating certificate in a conspicuous place.
- 118.38(2)** Achievement bonuses may be awarded as funds are available.

441—118.39(237A) Adverse actions.

- 118.39(1)** An eligible applicant shall be notified of the right to appeal the rating decision in accordance with 441—Chapter 7.
- 118.39(2)** A participant's quality rating shall be revoked if the facility no longer meets the definition of eligible applicant.



Administrative Rule Fiscal Impact Statement

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Agency: Human Services

IAC citation: 441 IAC 118

Agency contact: Mykala Beard

Summary of the rule:

Iowa's Quality Rating System (QRS) has been re-designed and re-branded (Iowa Quality for Kids (IQ4K)). A new electronic data system has been built to support the new system. New rules are required to guide the work. Achievement bonuses may be awarded as funds are available.

Fill in this box if the impact meets these criteria:

- No fiscal impact to the state.
- Fiscal impact of less than \$100,000 annually or \$500,000 over 5 years.
- Fiscal impact cannot be determined.

Brief explanation:

Budget Analysts must complete this section for ALL fiscal impact statements.

Fill in the form below if the impact does not fit the criteria above:

- Fiscal impact of \$100,000 annually or \$500,000 over 5 years.

Assumptions:

The change from the QRS to the IQ4K program is not expected to increase costs to the state other than increases to the achievement bonuses. The program re-design involves more stringent criteria at each level that providers must meet to be eligible and the increases in the achievement bonuses help cover the additional costs to the providers and offers some incentive for them to invest the time, effort and money to meet the criteria being asked of them. The program continues to be voluntary and the department's goal is to improve the quality of care at child care providers.

The increase in the achievement bonuses to be awarded are to be funded with American Rescue Plan Act (ARPA) funds from 3/1/22 through 9/30/23, the end of the obligation period for ARPA funds. Then, the anticipated ongoing balance of federal CCDF funds is expected to cover the cost through at least SFY26 based on status quo funding. Potential future increases in federal CCDF funds may sustain the cost of the achievement bonuses even further into the future. Whether the achievement bonuses can be sustained at the planned levels after SFY26 will need to be determined at a later time. The achievement bonus amounts may be adjusted down at some point in the future based on the amount of funds available without increasing the state general fund appropriation for child care.

The cost estimates for the increase in the achievement bonuses compare the new bonus to the current bonus to determine the amount of the increase for each QRS level. The bonus amounts for child care centers vary by the facility size in addition to QRS levels.

The increase for each category is then multiplied by the current number of providers participating to arrive at the increased cost. This is considered the maximum cost due to the higher criteria asked of the providers that choose to participate. The program is not expected to increase the number of providers participating, but to improve the quality of the providers that are willing to participate.

The estimates are based on 377 child care homes and 401 child care centers currently participating, for a total of 778 providers.

The total cost increase is \$3,334,400 annually, equal to \$277,866.67 per month. The breakdown by state fiscal year and funding source is:

SFY22	4 months	3/1/22 - 6/30/22	\$1,111,466.67	ARPA funds
SFY23	full year	7/1/22 - 6/30/23	\$3,334,400.00	ARPA funds
SFY24	3 months	7/1/23 - 9/30/23	\$ 833,600.00	ARPA funds
SFY24	9 months	10/1/23 - 6/30/24	\$2,500,800.00	federal CCDF funds
SFY25	full year	7/1/24 - 6/30/25	\$3,334,400.00	federal CCDF funds
SFY26	full year	7/1/25 - 6/30/26	\$3,334,400.00	federal CCDF funds
SFY27	and ongoing:	to be determined		

Describe how estimates were derived:

See attached spreadsheet - QRS Bonus Cost Estimate

Estimated Impact to the State by Fiscal Year

	<u>Year 1 (FY 2022)</u>	<u>Year 2 (FY 2023)</u>
Revenue by each source:		
General fund		
Federal funds	1,111,466.67	3,334,400.00
Other (specify):		
TOTAL REVENUE	1,111,466.67	3,334,400.00
Expenditures:		
General fund		
Federal funds	1,111,466.67	3,334,400.00
Other (specify):		
TOTAL EXPENDITURES	1,111,466.67	3,334,400.00
NET IMPACT	0.00	0.00

This rule is required by state law or federal mandate.
Please identify the state or federal law:
 Identify provided change fiscal persons:

Funding has been provided for the rule change.
Please identify the amount provided and the funding source:
 Federal funds from the American Rescue Plan Act through 9/30/2023, then from federal CCDF funds from 10/1/2023 through the end of SFY26. For SFY27 going forward, the achievement bonus amounts to be determined based on funds available.

Funding has not been provided for the rule.
Please explain how the agency will pay for the rule change:

Fiscal impact to persons affected by the rule:

Child care providers will be compensated more for the increased time, effort, and cost to participate in the IQ4K quality rating program.

Fiscal impact to counties or other local governments (required by Iowa Code 25B.6):

None anticipated.

Agency representative preparing estimate: Kathy Blume JH 12/14/21
 Telephone number: (515) 480-9640 (cell)

HUMAN SERVICES DEPARTMENT[441]

Notice of Intended Action

**Proposing rule making related to rulemaking and
providing an opportunity for public comment.**

The Human Services Department hereby proposes to amend Chapter 3, “Department Procedure For Rule Making,” Iowa Administrative Code.

Legal Authority for Rule Making

This rule making is proposed under the authority provided in Iowa Code sections 17A.3 to 17A.7.

State or Federal Law Implemented

This rule making implements, in whole or in part, Iowa Code section 17A.3.

Purpose and Summary

This rulemaking was reviewed as part of the Department’s five-year rules review process. This rulemaking updates information on the current rulemaking process, including contact information and electronic availability of rulemaking documents. Means of distribution of rulemaking documents were changed to reflect the current process of electronic availability instead of distributing documents by mail. Information in the rules that duplicates information already dictated in the Iowa Code and other administrative rules was removed. No changes to the Department’s rulemaking process were made in this rulemaking.

Fiscal Impact

This rule making has no fiscal impact to the State of Iowa.

Jobs Impact

After analysis and review of this rule making, no impact on jobs has been found.

Waivers

Any person who believes that the application of the discretionary provisions of this rule making would result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any pursuant to rule 441_1.8(17A,217)

Public Comment

Any interested person may submit written comments concerning this proposed rule making. Written comments in response to this rule making must be received by the Department no later than 4:30 p.m. on April 12, 2022. Comments should be directed to:

Nancy Freudenberg
Iowa Department of Human Services
Hoover State Office Building, Fifth Floor
1305 East Walnut Street
Des Moines, Iowa 50319-0114
Email: appeals@dhs.state.ia.us

Public Hearing

No public hearing is scheduled at this time. As provided in Iowa Code section 17A.4(1)“b,” an oral presentation regarding this rule making may be demanded by 25 interested persons, a governmental subdivision, the Administrative Rules Review Committee, an agency, or an association having 25 or more members.

Review by Administrative Rules Review Committee

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rule making by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rule making at its [regular monthly meeting](#) or at a special meeting. The Committee’s meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

The following rule-making action is proposed:

Please see attached.

ITEM 1. Amend rules 441—3.3(17A) to 441—3.6(17A) as follows:

441—3.3 (17A) Public rule-making docket.

~~3.3(1) *Docket maintained.*~~ The department shall ~~maintain a current public rule making docket~~ utilize the electronic public rule-making docket provided by the Office of the Chief Information Officer.

~~3.3(2) *Anticipated rule making.*~~ Rescinded IAB 3/6/02, effective 5/1/02.

~~3.3(3) *Pending rule making proceedings.*~~ The rule-making docket shall list each pending rule-making proceeding. A rule-making proceeding is pending from the time it is commenced, by publication in the Iowa Administrative Bulletin of a Notice of Intended Action pursuant to Iowa Code section 17A.4(1)“a,” to the time it is terminated, by publication of a Notice of Termination in the Iowa Administrative Bulletin or the rule’s becoming effective. For each rule-making proceeding, the docket shall indicate:

~~a. — The subject matter of the proposed rule.~~

~~b. — A citation to all published notices relating to the proceeding.~~

~~c. — Where written submissions on the proposed rule may be inspected.~~

~~d. — The time during which written submissions may be made.~~

~~e. — The names of persons who have made written requests for an opportunity to make oral presentations on the proposed rule, where those requests may be inspected, and where and when oral presentations may be made.~~

~~f. — Whether a written request for the issuance of a regulatory analysis or a concise statement of reasons has been filed, whether such an analysis or statement or a fiscal impact~~

~~statement has been issued, and where any such written request, analysis, or statement may be inspected.~~

~~g. The current status of the proposed rule and any department determinations with respect thereto.~~

~~h. Any known timetable for department decisions or other action in the proceeding.~~

~~i. The date of the rule's adoption.~~

~~j. The date of the rule's filing, indexing, and publication.~~

~~k. The date on which the rule will become effective.~~

~~l. Where the rule making record may be inspected.~~

441—3.4 (17A) Notice of proposed rule making.

3.4(1) Contents. At least 35 days before the adoption of a rule the department shall cause Notice of Intended Action to be published in the Iowa Administrative Bulletin. The Notice of Intended Action shall include:

- a.* A brief explanation of the purpose of the proposed rule.
- b.* The specific legal authority for the proposed rule.
- c.* Except to the extent impracticable, the text of the proposed rule.
- d.* Where, when, and how persons may present their views on the proposed rule.
- e.* Where, when, and how persons may demand an oral proceeding on the proposed rule if the notice does not already provide for one.

Where inclusion of the complete text of a proposed rule in the Notice of Intended Action is impracticable, the department shall include in the notice a statement fully describing the specific subject matter of the omitted portion of the text of the proposed rule, the specific issues

to be addressed by that omitted text of the proposed rule, and the range of possible choices being considered by the department for the resolution of each of those issues.

~~3.4(2) Copies of notices by mail. Persons desiring to receive copies of future Notices of Intended Action by subscription shall complete Form 470-2250, Notice Subscription, which is available from the Office of Policy Analysis, Department of Human Services, Hoover State Office Building, 1305 East Walnut, Des Moines, Iowa 50319-0114, indicating the name and address to which the notices shall be sent. Persons may subscribe to all notices of the department, or only to notices pertaining to the service, income maintenance, or medical programs. Within seven days after submission of a Notice of Intended Action to the administrative rules coordinator for publication in the Iowa Administrative Bulletin, the department shall mail a copy of the notice to subscribers who have completed Form 470-2250 and paid the subscription price. The subscription price includes the cost of labor and supplies for copying and mailing of the notices. At the end of each calendar year, subscribers will be sent Form 470-2250 to complete if they wish to continue on the mailing list. All Notices of Intended Action are published on the Legislative Services Agency website and are available for download at <https://www.legis.iowa.gov/law/administrativeRules/bulletinSupplementListings>.~~

~~3.4(3) Subscription to Web site. Persons desiring to receive a weekly memo via E-mail listing new rules under proposal by the department shall go to the department's Web site at <http://www.dhs.state.ia.us/policyanalysis/> to subscribe or E-mail the department's rules administrator at policyanalysis@dhs.state.ia.us indicating the E-mail address to which the memo shall be sent. This service shall be available without charge.~~

441—3.5 (17A) Public participation.

3.5(1) Written comments. For at least 20 days after publication of the Notice of Intended Action, persons may submit argument, data, and views, in writing or via electronic transmission, on the proposed rule. These submissions should identify the proposed rule to which they relate

and should be submitted to the ~~Office~~ Bureau of Policy Analysis, Department of Human Services, Hoover State Office Building, Fifth Floor, 1305 East Walnut, Des Moines, Iowa 50319-0114, or to the department's rules administrator at policyanalysis@dhs.state.ia.us appeals@dhs.state.ia.us. Persons may also submit written comments on a Notice of Intended Action at the website <https://rules.iowa.gov>, which lists all Notices that are open for public comment.

3.5(2) *Oral proceedings.* The department may, at any time, schedule an oral proceeding on a proposed rule. The department shall schedule an oral proceeding on a proposed rule if, within 20 days after the published Notice of Intended Action, a written request for an opportunity to make oral presentations is submitted to the department by the administrative rules review committee, a governmental subdivision, a state agency, an association having not less than 25 members, or at least 25 persons. That request must also contain the following additional information:

1. A request by one or more individual persons must be signed by each of them and include the address and telephone number of each of them.
2. A request by an association must be signed by an officer or designee of the association and must contain a statement that the association has at least 25 members and the address and telephone number of the person signing that request.
3. A request by a state agency or governmental subdivision must be signed by an official having authority to act on behalf of the entity and must contain the address and telephone number of the person signing that request.

The department may waive technical compliance with these procedures.

~~Oral proceedings scheduled by the department regarding rules directly affecting indigent clients shall be held in each of the service areas defined in rule 441—1.4(17A).~~

~~In the case of rules not directly affecting indigent clients, the~~ The department shall determine for each rule for which oral proceedings are scheduled ~~whether it will be necessary to hold presentations in all eight locations~~ the number of locations at which hearings will be held throughout the state, if needed. Anyone may object to the department's decision prior to the date of the proceedings by writing the same addressee specified in the Notice of Intended Action for receiving written data, views, or arguments. The department shall review the adequacy of the number of locations in light of the comments received.

3.5(3) and **3.5(4)** No change.

3.5(5) Accessibility. The department shall schedule oral proceedings in rooms accessible to and functional for persons with physical disabilities. Persons who have special requirements should contact the ~~office of policy analysis at (515)281-8440~~ Bureau of Policy Analysis, Department of Human Services, at appeals@dhs.state.ia.us in advance to arrange access or other needed services.

441—3.6 (17A) Regulatory analysis.

3.6(1) Definition of small business. A “small business” is defined in Iowa Code section 17A.4A(7).

~~**3.6(2) Distribution list.** Small businesses or organizations of small businesses may be registered on the department's small business impact list by making a written application addressed to the Office of Policy Analysis, Department of Human Services, Hoover State Office Building, 1305 East Walnut, Des Moines, Iowa 50319-0114. The application for registration shall state:~~

- ~~a. The name of the small business or organization of small businesses;~~
- ~~b. Its address;~~
- ~~c. The name of a person authorized to transact business for the applicant;~~
- ~~d. A description of the applicant's business or organization. An organization representing 25 or more persons who qualify as a small business shall indicate that fact.~~
- ~~e. Whether the registrant desires copies of Notices of Intended Action at cost or desires advance notice of the subject of all or some specific category of proposed rule making affecting small business.~~

~~The department may at any time request additional information from the applicant to determine whether the applicant is qualified as a small business or as an organization of 25 or more small businesses. The department may periodically send a letter to each registered small business or organization of small businesses asking whether that business or organization wishes to remain on the registration list. The name of a small business or organization of small businesses shall be removed from the list if a negative response is received, or if no response is received within 30 days after the letter is sent.~~

~~**3.6(3) Time of distribution.** Within seven days after submission of a Notice of Intended Action to the administrative rules coordinator for publication in the Iowa Administrative Bulletin, the department shall mail to all registered small businesses or organizations of small businesses, in accordance with their request, either a copy of the Notice of Intended Action or notice of the subject of that proposed rule making. In the case of a rule that may have an impact on small business adopted in reliance upon Iowa Code section 17A.4(2), the department shall mail notice of the adopted rule to registered businesses or organizations prior to the time the adopted rule is published in the Iowa Administrative Bulletin.~~

3.6(4 2) *Qualified requestors for regulatory analysis—economic impact.* The department shall issue a regulatory analysis of a proposed rule that conforms to the requirements of Iowa Code section 17A.4A(2) “a” after a proper request from:

- a. The administrative rules coordinator.
- b. The administrative rules review committee.

3.6(5 3) *Qualified requestors for regulatory analysis—business impact.* The department shall issue a regulatory analysis of a proposed rule that conforms to the requirements of Iowa Code section 17A.4A(2) “b” after a proper request from:

- a. The administrative rules review committee.
- b. The administrative rules coordinator.
- c. At least 25 or more persons who sign the request provided that each represents a different small business.
- d. An organization representing at least 25 small businesses. That organization shall list the name, address and telephone number of not less than 25 small businesses it represents.

3.6(6 4) *Time period for analysis.* Upon receipt of a timely request for a regulatory analysis, the agency shall adhere to the time lines described in Iowa Code section 17A.4A(4).

3.6(7 5) *Contents of request.* A request for a regulatory analysis is made when it is mailed, e-mailed, or delivered to the department. The request shall be in writing and satisfy the requirements of Iowa Code section 17A.4A(1).

3.6(8 6) *Contents of concise summary.* The contents of the concise summary shall conform to the requirements of Iowa Code sections 17A.4A(4) and (5).

3.6(9 7) *Publication of a concise summary.* The department shall make available to the maximum extent feasible, copies of the published summary ~~in conformance with Iowa Code section 17A.4A(5)~~ on the department's website.

3.6(10 8) *Regulatory analysis contents—rules review committee or rules coordinator.* When a regulatory analysis is issued in response to a written request from the administrative rules review committee or the administrative rules coordinator, the regulatory analysis shall conform to the requirements of Iowa Code section 17A.4A(2) “a,” unless a written request expressly waives one or more of the items listed therein.

3.6(11 9) *Regulatory analysis contents—substantial impact on small business.* When a regulatory analysis is issued in response to a written request from the administrative rules review committee, the administrative rules coordinator, at least 25 persons signing that request who each qualify as a small business or by an organization representing at least 25 small businesses, the regulatory analysis shall conform to the requirements of Iowa Code section 17A.4A(2) “b.”

ITEM 2. Rescind rule **441—3.10(17A)**.

ITEM 3. Renumber rules **441—3.11(17A)** to **441—3.16(17A)** as **441—3.10(17A)** to **441—3.15(17A)**.

ITEM 4. Amend rules 441—3.10(17A) to 441—3.12(17A) as follows:

441—3.10(17A) Concise statement of reasons.

3.10(1) General. When requested by a person, either prior to the adoption of a rule or within 30 days after its publication in the Iowa Administrative Bulletin as an adopted rule, the department shall issue a concise statement of reasons for the rule. Requests for such a statement must be in writing and be delivered to the ~~Office~~ Bureau of Policy Analysis, Department of Human Services, Fifth Floor, Hoover State Office Building, 1305 East Walnut, Des Moines,

Iowa 50319-0114. Requests may also be sent via e-mail to appeals@dhs.state.ia.us. The request should indicate whether the statement is sought for all or only a specified part of the rule.

Requests shall be considered made on the date received.

3.10(2) to 3.10(3) No change.

441—3.11(17A) Contents, style, and form of rule.

~~**3.12(1) Contents.** Each rule adopted by the department shall contain the text of the rule and, in addition:~~

~~*a.*—The date the department adopted the rule;~~

~~*b.*—A brief explanation of the principal reasons for the rule-making action if the reasons are required by Iowa Code section 17A.4(1)“b,” or the department in its discretion decides to include the reasons;~~

~~*c.*—A reference to all rules repealed, amended, or suspended by the rule;~~

~~*d.*—A reference to the specific statutory or other authority authorizing adoption of the rule;~~

~~*e.*—Any findings required by any provision of law as a prerequisite to adoption or effectiveness of the rule;~~

~~*f.*—A brief explanation of the principal reasons for the failure to provide for waivers to the rule if no waiver provision is included and a brief explanation of any waiver or special exceptions provided in the rule if the reasons are required by Iowa Code section 17A.4(1)“b,” or the department in its discretion decides to include the reasons; and~~

~~*g.*—The effective date of the rule.~~

~~**3.12(2) References to materials not published in full.** When the administrative code editor decides to omit the full text of a proposed or adopted rule because publication of the full text~~

~~would be unduly cumbersome, expensive, or otherwise inexpedient, the department shall prepare and submit to the administrative code editor for inclusion in the Iowa Administrative Bulletin and Iowa Administrative Code a summary statement describing the specific subject matter of the omitted material. This summary statement shall include the title and a brief description sufficient to inform the public of the specific nature and subject matter of the proposed or adopted rules and of significant issues involved in these rules. The summary statement shall also describe how a copy of the full text of the proposed or adopted rule, including any unpublished matter and any matter incorporated by reference, may be obtained from the department. The department shall provide a copy of that full text at actual cost upon request and shall make copies of the full text available for review either electronically or at the State Law Library.~~

~~At the request of the administrative code editor, the department shall provide a proposed statement explaining why publication of the full text would be unduly cumbersome, expensive, or otherwise inexpedient.~~

~~**3.12(3) Style and form.** In preparing its rules, the department shall follow the uniform numbering system, form, and style prescribed by the administrative rules coordinator.~~

441—3.12(17A) Department rule-making record.

~~**3.13(1) Requirement.** The department shall maintain an official rule-making record for each rule it proposes by publication in the Iowa Administrative Bulletin of a Notice of Intended~~

~~Action, or adopts. The rule-making record and materials incorporated by reference shall be available for public inspection. The Legislative Services Agency maintains an official rule-making record of each rule the department proposes or adopts on the Legislative Services Agency website at~~

~~<https://www.legis.iowa.gov/law/administrativeRules/bulletinSupplementListings>.~~

~~3.13(2) Contents. The department rule-making record shall contain:~~

~~a. — Copies of or citations to all publications in the Iowa Administrative Bulletin with respect to the rule or the proceeding upon which the rule is based and any file-stamped copies of department submissions to the administrative rules coordinator concerning that rule or the proceeding upon which it is based;~~

~~b. — Copies of Form 470-0096, Rule Log, containing dates of actions and Iowa Administrative Bulletin references relating to the rule or the proceeding upon which the rule is based;~~

~~c. — All written petitions, requests, and submissions received by the department, and all other written materials of a factual nature as distinguished from opinion that are relevant to the merits of the rule and that were created or compiled by the department and considered by the council of human services, mental health and developmental disabilities commission, or HAWK-I board in connection with the formulation, proposal, or adoption of the rule or the proceeding upon which the rule is based, except to the extent the department is authorized by law to keep them confidential; provided, however, that when any materials are deleted because they are authorized by law to be kept confidential, the department shall identify in the record the particular materials deleted and state the reasons for that deletion;~~

~~d. — Any official transcript of oral presentations made in the proceeding upon which the rule is based or, if not transcribed, the stenographic record or electronic recording of those presentations, and any memorandum prepared by a presiding officer summarizing the contents of those presentations;~~

~~e. — A copy of any regulatory analysis or fiscal impact statement prepared for the proceeding upon which the rule is based;~~

~~f. — A copy of the rule and any concise statement of reasons prepared for that rule;~~

~~g. — All petitions for amendment or repeal or suspension of the rule;~~

~~h. — A copy of any objection to the issuance of that rule without public notice and participation that was filed pursuant to Iowa Code section 17A.4(2) by the administrative rules review committee, the governor, or the attorney general;~~

~~i. — A copy of any objection to the rule filed by the administrative rules review committee, the governor, or the attorney general pursuant to Iowa Code subsection 17A.4(4), and any department response to that objection;~~

~~j. — A copy of any significant written criticism of the rule, including a summary of any requests for an exception to policy for the rule; and~~

~~k. — A copy of any executive order concerning the rule.~~

~~**3.13(3) Effect of record.** Except as otherwise required by a provision of law, the department rule making record required by this rule need not constitute the exclusive basis for department action on that rule.~~

~~**3.13(4) Maintenance of record.** The department shall maintain the rule making record for a period of not less than five years from the later of the date the rule to which it pertains became effective or the date of the Notice of Intended Action.~~



Iowa Department of Human Services
Information on Proposed Rules

Table with 3 columns: Name of Program Specialist (Adrienne Erazo), Telephone Number (515-281-5425), Email Address (aerazo@dhs.state.ia.us)

1. Give a brief purpose and summary of the rulemaking:

This rulemaking was reviewed as part of the Department's five-year rules review process. This rulemaking updates information on the current rulemaking process, including contact information and electronic availability of rulemaking documents. Means of distribution of rule making documents were changed to reflect the current process of electronic availability instead of distributing documents by mail. Information in the rules that duplicates information already dictated in the Iowa Code and other administrative rules was removed. No changes to the Department's rulemaking process were made in this rulemaking.

2. What is the legal basis for the change? (Cite the authorizing state and federal statutes and federal regulations):

Iowa Code sections 17A.3 through 17A.7.

3. Describe who this rulemaking will positively or adversely impact.

This rulemaking will have a positive impact on the public as the updated information on electronic availability of rules documents and means of communication with the department will provide easier access to the departmental rulemaking process.

4. Does this rule contain a waiver provision? If not, why?

The proposed amendments do not include waiver provisions because they confer benefits on those affected and are pursuant to federal law that does not provide for waivers, given that the process is optional. Individuals may request a waiver under the Department's general rule on exceptions at Iowa Admin. Code 441—1.8.

5. What are the likely areas of public comment?

There is no likely area of public comment.

6. Do these rules have an impact on private-sector jobs and employment opportunities in Iowa? (If yes, describe nature of impact, categories and number of jobs affected, state regions affected, costs to employer per employee.)

The proposed amendments have no impact on private-sector jobs and employment opportunities in Iowa.



Administrative Rule Fiscal Impact Statement

Date: February 10, 2022

Agency: Human Services

IAC citation: 441 IAC 3

Agency contact: Adrienne Erazo

Summary of the rule:

This rulemaking was reviewed as part of the Department's five-year rules review process. This rulemaking updates information on the current rulemaking process, including contact information and electronic availability of rulemaking documents. Means of distribution of rule making documents were changed to reflect the current process of electronic availability instead of distributing documents by mail. Information in the rules that duplicates information already dictated in the Iowa Code and other administrative rules was removed. No changes to the Department's rulemaking process were made in this rulemaking.

Fill in this box if the impact meets these criteria:

- No fiscal impact to the state.
- Fiscal impact of less than \$100,000 annually or \$500,000 over 5 years.
- Fiscal impact cannot be determined.

Brief explanation:

[Budget Analysts must complete this section for ALL fiscal impact statements.](#)

There is no fiscal impact to the state. No additional costs to the regulated community or State of Iowa as a whole are anticipated. No changes to the Department's rulemaking process were made in this rulemaking, only updates on the rulemaking process.

Fill in the form below if the impact does not fit the criteria above:

- Fiscal impact of \$100,000 annually or \$500,000 over 5 years.

Assumptions:

There is no fiscal impact to the state.

Describe how estimates were derived:

There are no potential costs estimated for this rule.

Estimated Impact to the State by Fiscal Year

	<u>Year 1 (FY 2022)</u>	<u>Year 2 (FY 2023)</u>
Revenue by each source:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL REVENUE	_____	_____
Expenditures:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL EXPENDITURES	_____	_____
NET IMPACT	_____	_____

This rule is required by state law or federal mandate.

Please identify the state or federal law:

Identify provided change fiscal persons:

Funding has been provided for the rule change.

Please identify the amount provided and the funding source:

Funding has not been provided for the rule.

Please explain how the agency will pay for the rule change:

There is no fiscal impact to the state.

Fiscal impact to persons affected by the rule:

There is no fiscal impact. There is no fiscal impact to the state. No additional costs to the regulated community or State of Iowa as a whole are anticipated. No changes to the Department's rulemaking process were made in this rulemaking, only updates on the rulemaking process.

Fiscal impact to counties or other local governments (required by Iowa Code 25B.6):

No impact.

Agency representative preparing estimate: Rob Beran

JH 02/21/2022

Telephone number: 281-6188

HUMAN SERVICES DEPARTMENT[441]

Notice of Intended Action

**Proposing rule making related to five-year review of rules
and providing an opportunity for public comment**

The Human Services Department hereby proposes to amend Chapter 4, “Petitions for Rule Making,” Iowa Administrative Code.

Legal Authority for Rule Making

This rule making is proposed under the authority provided in Iowa Code sections 17A.3, 17A.4, 17A.5, 17A.6 and 17A.7.

State or Federal Law Implemented

This rule making implements, in whole or in part, Iowa Code section 17A.3.

Purpose and Summary

This proposed rule making was reviewed as part of the Department’s five-year rules review process. This rule making makes changes to contact information and nonsubstantive changes to verbiage for consistency throughout the agency’s rules.

Fiscal Impact

This rule making has no fiscal impact to the State of Iowa.

Jobs Impact

After analysis and review of this rule making, no impact on jobs has been found.

Waivers

Any person who believes that the application of the discretionary provisions of this rule making would result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any, pursuant to rule 441—1.8(17A,217).

Public Comment

Any interested person may submit written comments concerning this proposed rule making. Written comments in response to this rule making must be received by the Department no later than 4:30 p.m. on April 12, 2022. Comments should be directed to:

Nancy Freudenberg
Department of Human Services
Hoover State Office Building, Fifth Floor
1305 East Walnut Street
Des Moines, Iowa 50319-0114
Email: appeals@dhs.state.ia.us

Public Hearing

No public hearing is scheduled at this time. As provided in Iowa Code section 17A.4(1)“b,” an oral presentation regarding this rule making may be demanded by 25 interested persons, a governmental subdivision, the Administrative Rules Review Committee, an agency, or an association having 25 or more members.

Review by Administrative Rules Review Committee

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rule making by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rule making at its [regular monthly meeting](#) or at a special meeting. The Committee’s meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

The following rule-making actions are proposed:

ITEM 1. Amend rule 441—4.1(17A) as follows:

441—4.1(17A) Petition for rule making. Any person or state agency may file a petition for rule making with the department at the ~~Office~~ Bureau of Policy Analysis, Department of Human Services, Hoover State Office Building, Fifth Floor, 1305 East Walnut, Des Moines, Iowa 50319-0114, or at appeals@dhs.state.ia.us. ~~A petition is deemed filed when it is received by that office.~~ The date of receipt of a petition is the day it reaches the department's rules administrator. The department ~~must~~ shall provide the petitioner with a file-stamped copy of the petition if the petitioner provides the department an extra copy for this purpose. The petition ~~must~~ shall be typewritten or legibly handwritten in ink and ~~must~~ shall substantially conform to the following form:

BEFORE THE DEPARTMENT OF HUMAN SERVICES

Petition by (Name of Petitioner) for the (adoption, amendment, or repeal) of rules relating to (state subject matter).	}	PETITION FOR RULE MAKING
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The petition ~~must~~ shall provide the following information:

1. A statement of the specific rule-making action sought by the petitioner including the text or a summary of the contents of the proposed rule or amendment to a rule and, if it is a petition to amend or repeal a rule, a citation and the relevant language to the particular portion or portions of the rule proposed to be amended or repealed.
2. A citation to any law deemed relevant to the department's authority to take the action urged or to the desirability of that action.
3. A brief summary of petitioner's arguments in support of the action urged in the petition.
4. A brief summary of any data supporting the action urged in the petition.

5. The names and addresses of other persons, or a description of any class of persons, known by petitioner to be affected by, or interested in, the proposed action which is the subject of the petition.

6. Any request by petitioner for a meeting provided for by subrule 4.4(1).

4.1(1) The petition ~~must~~ shall be dated and signed by the petitioner or the petitioner's representative. It ~~must~~ shall also include the name, mailing address, and telephone number of the petitioner and petitioner's representative, and a statement indicating the person to whom communications concerning the petition should be directed.

4.1(2) The department may deny a petition because it does not substantially conform to the required form.

ITEM 2. Amend rule 441—4.3(17A) as follows:

441—4.3(17A) Inquiries. Inquiries concerning the status of a petition for rule making may be made to Rules Administrator, ~~Office~~ Bureau of Policy Analysis, Department of Human Services, Hoover State Office Building, Fifth Floor, 1305 East Walnut, Des Moines, Iowa 50319-0114 or at appeals@dhs.state.ia.us.



Iowa Department of Human Services
Information on Proposed Rules

Name of Program Specialist	Telephone Number	Email Address
Adrienne Erazo	515-281-5425	aerazo@dhs.state.ia.us

1. Give a brief purpose and summary of the rulemaking:
This rulemaking was reviewed as part of the Department's five-year rules review process. This rulemaking makes changes to contact information and nonsubstantive changes to verbiage for consistency throughout the agency's rules.
2. What is the legal basis for the change? (Cite the authorizing state and federal statutes and federal regulations):
Iowa Code sections 17A.3 through 17A.7.
3. Describe who this rulemaking will positively or adversely impact.
This rulemaking will have a positive impact on the public by providing updated contact information for the Department rules administrator including an email address, which facilitates easier communication.
4. Does this rule contain a waiver provision? If not, why?
The proposed amendments do not include waiver provisions because they confer benefits on those affected and are pursuant to federal law that does not provide for waivers, given that the process is optional. Individuals may request a waiver under the Department's general rule on exceptions at Iowa Admin. Code 441—1.8.
5. What are the likely areas of public comment?
There is no likely area of public comment.
6. Do these rules have an impact on private-sector jobs and employment opportunities in Iowa? (If yes, describe nature of impact, categories and number of jobs affected, state regions affected, costs to employer per employee.)
The proposed amendments have no impact on private-sector jobs and employment opportunities in Iowa.



Administrative Rule Fiscal Impact Statement

Date: 2/23/22

Agency: Human Services

IAC citation: 441 IAC 4

Agency contact: Adrienne Erazo

Summary of the rule:

This rulemaking was reviewed as part of the Department's five-year rules review process. This rulemaking makes changes to contact information and nonsubstantive changes to verbiage for consistency throughout the agency's rules.

Fill in this box if the impact meets these criteria:

- No fiscal impact to the state.
- Fiscal impact of less than \$100,000 annually or \$500,000 over 5 years.
- Fiscal impact cannot be determined.

Brief explanation:

[Budget Analysts must complete this section for ALL fiscal impact statements.](#)

There is no fiscal impact to the state. No additional costs to the regulated community or State of Iowa as a whole are anticipated.

Fill in the form below if the impact does not fit the criteria above:

- Fiscal impact of \$100,000 annually or \$500,000 over 5 years.

Assumptions:

There is no fiscal impact to the state.

Describe how estimates were derived:

There are no potential costs estimated for this rule.

Estimated Impact to the State by Fiscal Year

	<u>Year 1 (FY 2022)</u>	<u>Year 2 (FY 2023)</u>
Revenue by each source:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL REVENUE	_____	_____
Expenditures:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL EXPENDITURES	_____	_____
NET IMPACT	_____	_____

This rule is required by state law or federal mandate.

Please identify the state or federal law:

Identify provided change fiscal persons:

Funding has been provided for the rule change.

Please identify the amount provided and the funding source:

Funding has not been provided for the rule.

Please explain how the agency will pay for the rule change:

There is no fiscal impact to the state.

Fiscal impact to persons affected by the rule:

There is no fiscal impact. There is no fiscal impact to the state. No additional costs to the regulated community or State of Iowa as a whole are anticipated.

Fiscal impact to counties or other local governments (required by Iowa Code 25B.6):

No impact.

Agency representative preparing estimate: Rob Beran

JH 02/23/2022

Telephone number: 281-6188

HUMAN SERVICES DEPARTMENT[441]

Notice of Intended Action

Proposing rule making related to payment of employees' small claims
and providing an opportunity for public comment.

The Human Services Department hereby proposes to amend Chapter 8, "Payment Of Small Claims," Iowa Administrative Code.

Legal Authority for Rule Making

This rule making is proposed under the authority provided in Iowa Code sections 217.6 and 217.23.

State or Federal Law Implemented

This rule making implements, in whole or in part, Iowa Code sections 217.6 and 217.23.

Purpose and Summary

When a Department employee's personal items are damaged or destroyed during the employee's tour of duty, the Department may reimburse the employee for repair or replacement of the item. Claims that are approved are to be paid from the Department's support allocation and cannot exceed \$300 per item. This proposed amendment increases the maximum allocation from \$150 pr item to \$300 pr item.

The Department has been authorizing \$300 payments since the Iowa Code change went into effect. This proposed amendment brings the rules into compliance with Iowa Code section 217.23 and is part of the five-year rules review process.

Fiscal Impact

This rule making has no fiscal impact to the State of Iowa.

Jobs Impact

After analysis and review of this rule making, no impact on jobs has been found.

Waivers

Any person who believes that the application of the discretionary provisions of this rule making would result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any pursuant to rule 441 IAC-1.8 (17A, 217).

Public Comment

Any interested person may submit written comments concerning this proposed rule making. Written comments in response to this rule making must be received by the Department no later than 4:30 p.m. on April 12, 2022. Comments should be directed to:

Nancy Freudenberg
Iowa Department of Human Services
Hoover State Office Building, Fifth Floor
1305 East Walnut Street
Des Moines, Iowa 50319-0114
Email: appeals@dhs.state.ia.us

Public Hearing

No public hearing is scheduled at this time. As provided in Iowa Code section 17A.4(1)“b,” an oral presentation regarding this rule making may be demanded by 25 interested persons, a governmental subdivision, the Administrative Rules Review Committee, an agency, or an association having 25 or more members.

Review by Administrative Rules Review Committee

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rule making by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rule making at its [regular monthly meeting](#) or at a special meeting. The Committee’s meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

The following rule-making action is proposed:

Amend subrule 8.1(4) as follows:

8.1(4) Claims which are approved for payment shall be paid from the support allocation of the Department and shall not exceed ~~\$150~~ \$300 per item.



Iowa Department of Human Services
Information on Proposed Rules

Name of Program Specialist Denise Dutton	Telephone Number 515-242-6302	Email Address ddutton@dhs.state.ia.us
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1. Give a brief purpose and summary of the rulemaking:
When a department employee's personal items are damaged or destroyed during an employee's tour of duty, the department may reimburse the employee for replacement or repair of the item. Claims that are approved are to be paid from the department's support allocation and cannot exceed \$300 per item. This is an increase in the maximum allocation of \$150 per item and is being done to bring the rules into compliance with the Iowa Code.
2. What is the legal basis for the change? (Cite the authorizing state and federal statutes and federal regulations):
Iowa Code Section 217.6 and 217.23
3. Describe who this rulemaking will positively or adversely impact.
This rulemaking positively impacts employees whose personal property is damaged during a tour of duty.
4. Does this rule contain a waiver provision? If not, why?
The proposed amendments do not include waiver provisions because they confer benefits on those affected and are pursuant to federal law that does not provide for waivers, given that the process is optional. Individuals may request a waiver under the Department's general rule on exceptions at Iowa Admin. Code 441—1.8.
5. What are the likely areas of public comment?
As the proposed amendments are believed to be positive changes for employees whose personal property is damaged during a tour of duty, there is no likely area of public comment.
6. Do these rules have an impact on private-sector jobs and employment opportunities in Iowa? (If yes, describe nature of impact, categories and number of jobs affected, state regions affected, costs to employer per employee.)
The proposed amendments have no impact on private-sector jobs and employment opportunities in Iowa.



Administrative Rule Fiscal Impact Statement

Date: February 4, 2022

Agency: Human Services

IAC citation: 441 IAC 8

Agency contact: Denise Dutton

Summary of the rule:

When a department employee's personal items are damaged or destroyed during an employee's tour of duty, the department may reimburse the employee for replacement or repair of the item. Claims that are approved are to be paid from the department's support allocation and cannot exceed \$300 per item. This is an increase in the maximum allocation of \$150 per item and is being done to bring the rules into compliance with the Iowa Code.

Fill in this box if the impact meets these criteria:

- No fiscal impact to the state.
- Fiscal impact of less than \$100,000 annually or \$500,000 over 5 years.
- Fiscal impact cannot be determined.

Brief explanation:

[Budget Analysts must complete this section for ALL fiscal impact statements.](#)

There is no fiscal impact to the state. No additional costs to the regulated community or State of Iowa as a whole are anticipated. The Department has been authorizing \$300 payments since the Iowa Code change went into effect in 2007, thus the department is already following this and the rule change clarifies this.

Fill in the form below if the impact does not fit the criteria above:

- Fiscal impact of \$100,000 annually or \$500,000 over 5 years.

Assumptions:

There is no fiscal impact to the state.

Describe how estimates were derived:

There are no potential costs estimated for this rule.

Estimated Impact to the State by Fiscal Year

	Year 1 (FY 2022)	Year 2 (FY 2023)
Revenue by each source:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL REVENUE	_____	_____
Expenditures:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL EXPENDITURES	_____	_____
NET IMPACT	_____	_____
<input type="checkbox"/> This rule is required by state law or federal mandate. <i>Please identify the state or federal law:</i> Identify provided change fiscal persons:		
<input type="checkbox"/> Funding has been provided for the rule change. <i>Please identify the amount provided and the funding source:</i>		
<input checked="" type="checkbox"/> Funding has not been provided for the rule. <i>Please explain how the agency will pay for the rule change:</i> There is no fiscal impact to the state.		
<i>Fiscal impact to persons affected by the rule:</i> There is no fiscal impact. There is no fiscal impact to the state. No additional costs to the regulated community or State of Iowa as a whole are anticipated. The Department has been authorizing \$300 payments since the Iowa Code change went into effect in 2007, thus the department is already following this and the rule change clarifies this.		
<i>Fiscal impact to counties or other local governments (required by Iowa Code 25B.6):</i> No impact.		
Agency representative preparing estimate:	Rob Beran	JH 02/18/2022
Telephone number:	281-6188	

HUMAN SERVICES DEPARTMENT[441]

Notice of Intended Action

Proposing rule making related to offset of county debts owed department
and providing an opportunity for public comment.

The Human Services Department hereby proposes to amend Chapter 14, "Offset Of County Debts Owed Department," Iowa Administrative Code.

Legal Authority for Rule Making

This rule making is proposed under the authority provided in Iowa Code sections 217.6 and 234.6.

State or Federal Law Implemented

This rule making implements, in whole or in part, Iowa Code sections 217.6 and 234.6.

Purpose and Summary

The Department is proposing to eliminate Chapter 14 in its entirety. The process for offsets of debts owed to state agencies in this chapter is duplicative of the requirements in 11 - Chapter 40 and the setoff procedures in Iowa Code section 8A.504. As the Department of Administrative Services has established a process by which state agencies can participate in the offset program by identifying debtors who owe liabilities to that agency and offset those liabilities against claims owed to debtors by agencies, this rule chapter is no longer necessary.

Fiscal Impact

This rule making has no fiscal impact to the State of Iowa.

Jobs Impact

After analysis and review of this rule making, no impact on jobs has been found.

Waivers

Any person who believes that the application of the discretionary provisions of this rule making would result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any, pursuant to rule 441 IAC_1.8(17A, 217).

Public Comment

Any interested person may submit written comments concerning this proposed rule making. Written comments in response to this rule making must be received by the Department no later than 4:30 p.m. on April 12, 2022. Comments should be directed to:

**Nancy Freudenberg
Iowa Department of Human Services
Hoover State Office Building, Fifth Floor
1305 East Walnut Street
Des Moines, Iowa 50319-0114
Email: appeals@dhs.state.ia.us**

Public Hearing

No public hearing is scheduled at this time. As provided in Iowa Code section 17A.4(1)“b,” an oral presentation regarding this rule making may be demanded by 25 interested persons, a governmental subdivision, the Administrative Rules Review Committee, an agency, or an association having 25 or more members.

Review by Administrative Rules Review Committee

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rule making by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rule making at its [regular monthly meeting](#) or at a special meeting. The Committee’s meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

The following rule-making action is proposed:

Rescind and reserve 441_Chapter 14.



Iowa Department of Human Services
Information on Proposed Rules

Table with 3 columns: Name of Program Specialist (Denise Dutton), Telephone Number (515-242-6302), Email Address (ddutton@dhs.state.ia.us)

1. Give a brief purpose and summary of the rulemaking:

The Department is eliminating Chapter 14 in its entirety. The process for offsets of debts owed to state agencies in this chapter is duplicative of the requirements in 11 Iowa Administrative Code Chapter 40 and the setoff procedures in Iowa Code 8A.504. As the Department of Administrative Services has established a process by which state agencies can participate in the offset program by identifying debtors who owe liabilities to that agency and offset those liabilities against claims owed to debtors by agencies, this rule chapter is no longer necessary.

2. What is the legal basis for the change? (Cite the authorizing state and federal statutes and federal regulations):

Iowa Code Section 217.6 and 234.6

3. Describe who this rulemaking will positively or adversely impact.

As this rulemaking reduces duplication of regulations regarding debtor offsets owed to state agencies, this rulemaking positively impacts any debtor who owes liabilities to a state agency.

4. Does this rule contain a waiver provision? If not, why?

The proposed amendments do not include waiver provisions because they confer benefits on those affected and are pursuant to federal law that does not provide for waivers, given that the process is optional. Individuals may request a waiver under the Department's general rule on exceptions at Iowa Admin. Code 441—1.8.

5. What are the likely areas of public comment?

While Chapter 14 is being eliminated, the process for state agencies to participate in an offset program by identifying debtors who owe liabilities to the agency can be found at 11 Iowa Administrative Code Chapter 40 and Iowa Code 8A.504, there is no likely area of public comment.

6. Do these rules have an impact on private-sector jobs and employment opportunities in Iowa? (If yes, describe nature of impact, categories and number of jobs affected, state regions affected, costs to employer per employee.)

The proposed amendments have no impact on private-sector jobs and employment opportunities in Iowa.



Administrative Rule Fiscal Impact Statement

Date: February 7, 2022

Agency: Human Services
IAC citation: 441 IAC Chapter 14
Agency contact: Denise Dutton

Summary of the rule:

The Department is eliminating Chapter 14 in its entirety. The process for offsets of debts owed to state agencies in this chapter is duplicative of the requirements in 11 Iowa Administrative Code Chapter 40 and the setoff procedures in Iowa Code 8A.504. As the Department of Administrative Services has established a process by which state agencies can participate in the offset program by identifying debtors who owe liabilities to that agency and offset those liabilities against claims owed to debtors by agencies, this rule chapter is no longer necessary.

Fill in this box if the impact meets these criteria:

- No fiscal impact to the state.
- Fiscal impact of less than \$100,000 annually or \$500,000 over 5 years.
- Fiscal impact cannot be determined.

Brief explanation:

[Budget Analysts must complete this section for ALL fiscal impact statements.](#)

There is no fiscal impact to the state. No additional costs to the regulated community or State of Iowa as a whole are anticipated.

Fill in the form below if the impact does not fit the criteria above:

- Fiscal impact of \$100,000 annually or \$500,000 over 5 years.

Assumptions:

There is no fiscal impact to the state.

Describe how estimates were derived:

There are no potential costs estimated for this rule.

Estimated Impact to the State by Fiscal Year

	<u>Year 1 (FY 2022)</u>	<u>Year 2 (FY 2023)</u>
Revenue by each source:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL REVENUE	_____	_____
Expenditures:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL EXPENDITURES	_____	_____
NET IMPACT	_____	_____

This rule is required by state law or federal mandate.
Please identify the state or federal law:
Identify provided change fiscal persons:

Funding has been provided for the rule change.
Please identify the amount provided and the funding source:

Funding has not been provided for the rule.
Please explain how the agency will pay for the rule change:
There is no fiscal impact to the state.

Fiscal impact to persons affected by the rule:

There is no fiscal impact. There is no fiscal impact to the state. No additional costs to the regulated community or State of Iowa as a whole are anticipated.

Fiscal impact to counties or other local governments (required by Iowa Code 25B.6):

No impact.

Agency representative preparing estimate: Rob Beran

JH 02/21/2022

Telephone number: 281-6188

HUMAN SERVICES DEPARTMENT[441]

Notice of Intended Action

Proposing rule making related to mental health institutes and resource centers and providing an opportunity for public comment.

The Human Services Department hereby proposes to amend Chapter 28, "Policies For Mental Health Institutes And Resource Centers," Iowa Administrative Code.

Legal Authority for Rule Making

This rule making is proposed under the authority provided in Iowa Code sections 218.4 and 222.6.

State or Federal Law Implemented

This rule making implements, in whole or in part, Iowa Code sections 218.4 and 222.6.

Purpose and Summary

The Department proposes to update rules in chapter 28, to align with current practices and eliminate outdated terminology. This is part of the Department's five-year rules review process under 17A. 7(2).

Fiscal Impact

This rule making has no fiscal impact to the State of Iowa.

Jobs Impact

After analysis and review of this rule making, no impact on jobs has been found.

Waivers

Any person who believes that the application of the discretionary provisions of this rule making would result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any pursuant to rule 441_1.8(17A,217).

Public Comment

Any interested person may submit written comments concerning this proposed rule making. Written comments in response to this rule making must be received by the Department no later than 4:30 p.m. on . Comments should be directed to:

Nancy Freudenberg
Iowa Department of Human Services
Hoover State Office Building, Fifth Floor
1305 East Walnut Street
Des Moines, Iowa 50319-0114
Email: appeals@dhs.state.ia.us

Public Hearing

No public hearing is scheduled at this time. As provided in Iowa Code section 17A.4(1)“b,” an oral presentation regarding this rule making may be demanded by 25 interested persons, a governmental subdivision, the Administrative Rules Review Committee, an agency, or an association having 25 or more members.

Review by Administrative Rules Review Committee

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rule making by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rule making at its [regular monthly meeting](#) or at a special meeting. The Committee’s meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

The following rule-making action is proposed:

ITEM 1. Amend rule 441—28.1(218), definitions of “Catchment area,” “Informed consent” and “Superintendent,” as follows:

“*Catchment area*” means the group of counties, designated by the division administrator, that each ~~mental health institute or~~ state resource center is assigned to serve.

“*Informed consent*” means an agreement by an individual or by the individual’s parent, guardian, or legal representative to participate in an activity based upon an understanding of all of the following:

1. A full explanation of the procedures to be followed, including an identification of those that are experimental.
2. A description of the ~~attendant~~ discomforts and risks.
3. A description of the benefits to be expected.
4. A disclosure of appropriate alternative procedures that would be advantageous for the individual.
5. Assurance that consent is given freely and voluntarily without fear of retribution or withdrawal of services.

“*Superintendent*” means the superintendent of any of the ~~four~~ two mental health institutes and the two state resource centers.

ITEM 2. Rescind the definitions of “Central point of coordination process,” “Family contact” and “Official designated agent” in rule 441—28.1(218).

ITEM 3. Amend rule 441—28.2(218,222) as follows:

441—28.2(218,222) Selection of facility. Application for voluntary admission to a resource center shall be made to the facility in the catchment area within which the individual for whom admission is sought has a county of residence. The individual may be admitted to a state resource center in another catchment area if that facility has a more suitable opening.

~~28.2(1) Application for voluntary admission to a state mental health institute or resource center shall be made to the facility in the catchment area, as defined in rule 441—29.1(218) or 441—30.1(218,222), within which the individual for whom admission is sought has a county of residence.~~

~~28.2(2) Court commitment of an individual shall be made:~~

~~a. To the facility in the catchment area, as defined in rule 441—29.1(218) or 441—30.1(218,222), within which the individual who is being committed has a county of residence; or~~

~~b. As designated by the division administrator.~~

~~28.2(3) The division administrator shall consider granting exceptions to the established catchment areas when requested by the individual seeking a voluntary admission or by the committing court. The division administrator’s decision shall be made within 48 hours of receipt of the request. The decision shall be based on:~~

~~a. The clinical needs of the individual;~~

~~b. The availability of appropriate program services;~~

~~c. Available bed space within the program at the requested facility; and~~

~~d. The consent of the superintendents of both facilities involved.~~

This rule is intended to implement Iowa Code sections 218.19, and 218.20, ~~and 222.6.~~

ITEM 4. Adopt the following new implementation sentence in rule **441—28.7(218)**:

This rule is intended to implement Iowa Code chapter 218.



Iowa Department of Human Services
Information on Proposed Rules

Name of Program Specialist Mark Swore	Telephone Number 515-242-3256	Email Address mswore@dhs.state.ia.us
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1. Give a brief purpose and summary of the rulemaking:
To bring Chapter 28 into alignment with current practices and eliminate outdated terms.
2. What is the legal basis for the change? (Cite the authorizing state and federal statutes and federal regulations):
Per Iowa Code 17A.7(2), all state agencies are required to do a periodic and comprehensive review of all of the agency's rules every five years.
3. Describe who this rulemaking will positively or adversely impact.
This will have no impact on operations or those served.
4. Does this rule contain a waiver provision? If not, why?
No.
5. What are the likely areas of public comment?
There is no anticipated public comment.
6. Do these rules have an impact on private-sector jobs and employment opportunities in Iowa? (If yes, describe nature of impact, categories and number of jobs affected, state regions affected, costs to employer per employee.)
No impact.



Administrative Rule Fiscal Impact Statement

Date: 01/05/2022

Agency: Human Services
IAC citation: 441 IAC Chapter 28
Agency contact: Mark Swore

Summary of the rule:

441- Chapter 28 Policies for Mental Health Institutes and Resource Center, to bring into alignment with current practices and eliminate outdated terms

Fill in this box if the impact meets these criteria:

- No fiscal impact to the state.
- Fiscal impact of less than \$100,000 annually or \$500,000 over 5 years.
- Fiscal impact cannot be determined.

Brief explanation:

[Budget Analysts must complete this section for ALL fiscal impact statements.](#)

These changes bring Chapter 28 into alignment with current practices and eliminates outdated terms. This will have no impact on operations or those served.

Fill in the form below if the impact does not fit the criteria above:

- Fiscal impact of \$100,000 annually or \$500,000 over 5 years.

Assumptions:

Describe how estimates were derived:

Estimated Impact to the State by Fiscal Year

	<u>Year 1 (FY 2022)</u>	<u>Year 2 (FY 2023)</u>
Revenue by each source:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL REVENUE	_____	_____
Expenditures:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL EXPENDITURES	_____	_____
NET IMPACT	_____	_____

- This rule is required by state law or federal mandate.
Please identify the state or federal law:
Identify provided change fiscal persons:

- Funding has been provided for the rule change.
Please identify the amount provided and the funding source:

- Funding has not been provided for the rule.
Please explain how the agency will pay for the rule change:

Fiscal impact to persons affected by the rule:

None

Fiscal impact to counties or other local governments (required by Iowa Code 25B.6):

None

Agency representative preparing estimate: Lanny Nihart JH 01/05/22
Telephone number: 515-281-7822

HUMAN SERVICES DEPARTMENT[441]

Notice of Intended Action

Proposing rule making related to nurse aid program training and providing an opportunity for public comment

The Human Services Department hereby proposes to amend Chapter 81, “Nursing Facilities,” Iowa Administrative Code.

Legal Authority for Rule Making

This rule making is proposed under the authority provided in Iowa Code chapter 249A.

State or Federal Law Implemented

This rule making implements, in whole or in part, Iowa Code chapter 249A.

Purpose and Summary

The proposed rule making updates subrule 81.16(3) to reflect federal regulations regarding the increased number of hours of training required for nurse aid programs. The proposed increase of the instructor-to-student ratio will allow more students to attend nurse aid programs. Additional language is being added for laboratory training and clinical training options.

Fiscal Impact

The Department currently does not pay for certified nursing assistant (CNA) training but allows for a deduction on the cost reports. The amount of future additional students

cannot be determined; however, fiscal impact is expected to be minimal. Any expenditures will be absorbed within the Medical Assistance appropriation.

Jobs Impact

After analysis and review of this rule making, no impact on jobs has been found.

Waivers

Any person who believes that the application of the discretionary provisions of this rule making would result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any, pursuant to rule 441—1.8(17A,217).

Public Comment

Any interested person may submit written comments concerning this proposed rule making. Written comments in response to this rule making must be received by the Department no later than 4:30 p.m. on March 29, 2022. Comments should be directed to:

Nancy Freudenberg
Iowa Department of Human Services
Hoover State Office Building, Fifth Floor
1305 East Walnut Street
Des Moines, Iowa 50319-0114
Email: appeals@dhs.state.ia.us

Public Hearing

No public hearing is scheduled at this time. As provided in Iowa Code section 17A.4(1)“b,” an oral presentation regarding this rule making may be demanded by 25 interested persons, a governmental subdivision, the Administrative Rules Review Committee, an agency, or an association having 25 or more members.

Review by Administrative Rules Review Committee

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rule making by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rule making at its [regular monthly meeting](#) or at a special meeting. The Committee's meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

The following rule-making actions are proposed:

ITEM 1. Amend subparagraph **81.16(3)“a”(4)** as follows:

(4) Include at least ~~15~~ 16 hours of laboratory experience provided in a face-to-face environment that complements the didactic theory curricula, and

ITEM 2. Amend subparagraph **81.16(3)“a”(5)** as follows:

(5) Include 30 hours of supervised clinical training in a face-to-face or laboratory setting environment and supervised by a department of inspections and appeals-approved instructor in a manner not inconsistent with the licensing requirements of the Iowa board of nursing, and

ITEM 3. Amend subparagraph **81.16(3)“a”(7)** as follows:

(7) Meet the following requirements for department of inspections and appeals-approved instructors who train nurse aides:

1. to 4. No change.
5. The ratio of department of inspections and appeals-approved instructors to students shall not exceed one registered nurse, or licensed practical nurse functioning as an assistant to a registered nurse, who is in the proximate area in the clinical setting, for every ~~ten~~ 15 students in the clinical setting, and



Iowa Department of Human Services
Information on Proposed Rules

Name of Program Specialist Jessica McBride	Telephone Number 515-201-4157	Email Address jmcbrid@dhs.state.ia.us
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1. Give a brief purpose and summary of the rulemaking:

The rule changes will update sections of 81.16 to reflect federal regulations regarding the number of hours required for training. The proposed ratio increase of instructors to students will allow for more students to attend the program. Also adding language to allow for laboratory training options in addition to clinical training options.

2. What is the legal basis for the change? (Cite the authorizing state and federal statutes and federal regulations):

42 CFR 483.152

441 IAC 81.16(3)(5)

441 IAC 81.16(3)(a)5

441 IAC 81.1(249A)

3. Describe who this rulemaking will positively or adversely impact.

The rule amendments will positively impact the nurse aide training programs.

4. Does this rule contain a waiver provision? If not, why?

No

5. What are the likely areas of public comment?

Public comment would support the proposed changes.

6. Do these rules have an impact on private-sector jobs and employment opportunities in Iowa? (If yes, describe nature of impact, categories and number of jobs affected, state regions affected, costs to employer per employee.)

No



Administrative Rule Fiscal Impact Statement

Date: February 4, 2022

Agency: Human Services

IAC citation: 441 IAC 81.16

Agency contact: Jessica McBride

Summary of the rule:

The rule changes will update sections of 81.16 to reflect federal regulations regarding the number of hours required for training. This rule allows a proposed ratio increase of instructors to student. This also adds language to allow for laboratory training options in addition to clinical training options.

Fill in this box if the impact meets these criteria:

- No fiscal impact to the state.
- Fiscal impact of less than \$100,000 annually or \$500,000 over 5 years.
- Fiscal impact cannot be determined.

Brief explanation:

[Budget Analysts must complete this section for ALL fiscal impact statements.](#)

The rule changes will update sections of 81.16 to reflect federal regulations regarding the number of hours required for training. The proposed ratio increase of instructors to student will allow for more students to attend the program. This also adds language to allow for laboratory training options in addition to clinical training options. The department currently does not pay for CNA training but allows for a deduction on the cost reports. The amount of future additional students cannot be determined; fiscal impact is expected to be minimal. Any expenditures will be absorbed within the Medical Assistance appropriation.

Fill in the form below if the impact does not fit the criteria above:

- Fiscal impact of \$100,000 annually or \$500,000 over 5 years.

Assumptions:

Describe how estimates were derived:

Estimated Impact to the State by Fiscal Year

	<u>Year 1 (FY 22)</u>	<u>Year 2 (FY 23)</u>
Revenue by each source:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL REVENUE	<u>0.00</u>	<u>0.00</u>
Expenditures:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL EXPENDITURES	<u>0.00</u>	<u>0.00</u>
NET IMPACT	<u>0.00</u>	<u>0</u>

This rule is required by state law or federal mandate.

Please identify the state or federal law:

Identify provided change fiscal persons:

42 CFR 483.152

Funding has been provided for the rule change.

Please identify the amount provided and the funding source:

Expenditures will be absorbed within the Medical Assistance appropriation

Funding has not been provided for the rule.

Please explain how the agency will pay for the rule change:

Fiscal impact to persons affected by the rule:

Unknown.

Fiscal impact to counties or other local governments (required by Iowa Code 25B.6):

None anticipated.

Agency representative preparing estimate: Soraya Miller

JH 02/07/2022

Telephone number: 515-281-6017

HUMAN SERVICES DEPARTMENT[441]

Notice of Intended Action

**Proposing rule making related to child care center staff-to child ratios
and providing an opportunity for public comment.**

The Human Services Department hereby proposes to amend Chapter 109, "Child Care Centers," Iowa Administrative Code.

Legal Authority for Rule Making

This rule making is proposed under the authority provided in Iowa Code chapter 237A.5

State or Federal Law Implemented

This rule making implements, in whole or in part, Iowa Code chapter 237A.5

Purpose and Summary

The Department is proposing to revise the administrative rules for child care centers to allow an increased number of children to be served per staff person in a licensed child care center. This proposed rule making allows an increased number of children to be served per staff person in the two-year old and three-year old age categories. In addition, this rule making would modify requirements for combining age groups and also allows a staff person 15 years of age to provide child care while still being supervised. The rule making also will provide additional flexibility for child care centers dealing with workforce shortages. The higher staff ratios could result in enrollment of additional child care assistance eligible children in child care centers.

Fiscal Impact

Little to no fiscal impact is expected with this action, because this change is not expected to alter staffing levels, nor does it change overall capacity limits. The higher staff ratios could result in enrollment of additional child care assistance (CCA) eligible children in child care centers. This increase is not expected to be significant, but may help cases return to pre-pandemic levels, which is already assumed in the current CCA budget.

Jobs Impact

Child Care is a known issue to workforce shortages because many parents cite a lack of access to child care as a work-force barrier. Increasing child care ratio allowances may improve access to child care for families and also increase access to employment.

Waivers

Any person who believes that the application of the discretionary provisions of this rule making would result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any, pursuant to rule 441.1_8(17A, 217).

Public Comment

Any interested person may submit written comments concerning this proposed rule making. Written comments in response to this rule making must be received by the Department no later than 4:30 p.m. on April 12, 2022. Comments should be directed to:

Nancy Freudenberg
Department of Human Services
Hoover State Office Building, Fifth Floor
1305 East Walnut Street
Des Moines, Iowa 50319-0114
Email: appeals@dhs.state.ia.us

Public Hearing

No public hearing is scheduled at this time. As provided in Iowa Code section 17A.4(1)“b,” an oral presentation regarding this rule making may be demanded by 25 interested persons, a governmental subdivision, the Administrative Rules Review Committee, an agency, or an association having 25 or more members.

Review by Administrative Rules Review Committee

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rule making by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rule making at its [regular monthly meeting](#) or at a special meeting. The Committee’s meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

The following rule-making actions are proposed:

Please see attached.

Proposed Rule Changes for Chapter 109

The following rule-making actions are proposed:

ITEM 1. Amend paragraph **109.8(1)“a”** as follows:

a. Be at least ~~16~~ 15 years of age. If less than 18 years of age, the staff shall be under the direct supervision of an adult.

ITEM 2. Amend subrule 109.8(2) as follows:

109.8(2) Staff ratio. The staff-to-child ratio shall be as follows:

<u>Age of children</u>	<u>Minimum ratio of staff to children</u>
Two 2 weeks to two 2 years	One 1 to every four 4 children
Two 2 years	One 1 to every six <u>7</u> children
Three 3 years	One 1 to every eight <u>10</u> children
Four 4 years	One 1 to every twelve 12 children
Five 5 years to ten 10 years	One 1 to every fifteen 15 children
Ten 10 years and over	One 1 to every twenty 20 children

a. Combinations of age groupings for children four years of age and older may be allowed and may have staff ratio determined on the age of the majority of the children in the group. ~~If children three years of age and under are included in the combined age group, the staff ratio for children aged three and under shall be maintained for these children. Preschools shall have staff ratios determined on the age of the majority of the children, including children who are three years of age.~~

b. Combinations of age groupings for children between three years of age and five years of age may be allowed with a staff ratio of 1 to every 12 children.

~~b. c.~~ If a child between the ages of 18 and 24 months is placed outside the infant area, as defined at subrule 109.11(2) Children between 18 months and three years of age may be combined, if appropriate to the developmental needs of the child. If a child under two years of age is placed in

a combined age grouping, the staff ratio of 1 to 4 7 shall be maintained ~~as would otherwise be required for the group until the child reaches the age of two~~ otherwise staff ratio may be determined by the age of the majority of the children in the group.

~~e-~~ d. Every child-occupied program room shall have adult supervision present in the room. Brief absences of a staff member may be allowed for no more than five minutes when another staff person is present.

~~d-~~ e. During nap time, at least one staff shall be present in every room where children are resting. Staff ratio requirements may be reduced to one staff per room where children are resting ~~for a period of time not to exceed one hour~~ provided staff ratio coverage can be maintained in the center. The staff ratio shall always be maintained in the infant area.

~~e.~~ ~~The minimum staff ratio shall be maintained at mealtimes and for any outdoor activities at the center.~~

f. When ~~seven or more~~ than eight children ~~over the age of three~~ are present on the licensed premises or are being transported in one vehicle, at least two adult staff shall be present. Only one adult is required when a center is transporting children in a center-owned vehicle with parent authorization for the sole purpose of transporting children to and from school. When a center contracts with another entity to provide transportation other than for the purpose of transporting school-age children to or from school, at least one adult staff in addition to the driver shall be present if at least ~~seven~~ eight children provided care by the center are transported.

g. Any child care center-sponsored program activity involving five or more children conducted away from the licensed facility shall provide a minimum of one additional staff over the required staff ratio for the protection of the children.

h. For a period of two hours or less at the beginning ~~or~~ and end of the center's hours of operation, one staff may care for ~~six~~ seven or fewer children, provided no more than ~~two~~ four of the children are under the age of two years and there are no more than ~~six~~ seven children in the

center.

i. For centers or preschools serving school-age children, the ratio for school-age children may be exceeded for a period of no more than four hours during a day when school classes start late or are dismissed early or canceled due to inclement weather or structural damage provided the children are already enrolled at the center and the center does not exceed the licensed capacity.

ITEM 3. Amend subrule 109.11(2) as follows:

109.11(2) *Infants' area.* An area shall be provided properly and safely equipped for the use of infants and free from the intrusion of children two years of age and older.

~~Children over 18 months of age may be grouped outside this area if appropriate to the developmental needs of the child.~~ Upon the recommendation of a child's physician or the area education agency serving the child, a child who is two years of age or older with a disability that results in significant developmental delays in physical and cognitive functioning who does not pose a threat to the safety of the infants may, if appropriate and for a limited time approved by the department, remain in the infant area.



Iowa Department of Human Services
Information on Proposed Rules

Name of Program Specialist Ryan Page	Telephone Number 515-281-7714	Email Address rpage@dhs.state.ia.us
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1. Give a brief purpose and summary of the rulemaking:

These rule changes allow an increased number of children to be served per staff person in the 2 year old and 3 year old age categories in licensed child care centers. It modifies requirements of combining age groups and also allows a staff person to be 15 years of age.

2. What is the legal basis for the change? (Cite the authorizing state and federal statutes and federal regulations):

237A, 17A

3. Describe who this rulemaking will positively or adversely impact.

These rules will allow an increased number of children to be served per staff person in licensed child care centers, positively impacting the number of people that can return to work if child care access is a barrier to their employment.

4. Does this rule contain a waiver provision? If not, why?

This amendment does not provide a specific waiver authority because families may request a waiver of these provisions in a specified situation under the Department's general rule on exceptions at 441 – 1.8(17A, 217)

5. What are the likely areas of public comment?

Advocates for modifying ratios to be more aligned with national recommendations may be opposed to rule changes as there are concerns about safety and supervision. Child care centers struggling with staffing and maintaining ratios may agree with the recommended changes.

6. Do these rules have an impact on private-sector jobs and employment opportunities in Iowa? (If yes, describe nature of impact, categories and number of jobs affected, state regions affected, costs to employer per employee.)

Yes. Child Care is a known issue to workforce shortages as many parents cite a lack of access to child care as a workforce barrier. With access to child care due to increasing ratio allowances, this may improve access to child care for families.



Administrative Rule Fiscal Impact Statement

Date: January 13, 2022

Agency: Human Services
IAC citation: 441 IAC 441 IAC 109
Agency contact: Ryan Page

Summary of the rule:

These rule changes allow an increased number of children to be served per staff person in the 2 year old and 3 year old age categories in licensed child care centers. It modifies requirements of combining age groups and also allows a staff person to be 15 years of age.

Fill in this box if the impact meets these criteria:

- No fiscal impact to the state.
- Fiscal impact of less than \$100,000 annually or \$500,000 over 5 years.
- Fiscal impact cannot be determined.

Brief explanation:

[Budget Analysts must complete this section for ALL fiscal impact statements.](#)

Little to no fiscal impact is expected with this action, as this change is not expected to alter staffing levels, nor does it change overall capacity limits.
The higher staff ratios could result in centers enrolling additional CCA-eligible children. This increase is not expected to be significant, but may help cases return to pre-pandemic levels which is already assumed in the current Child Care Assistance budget.

Fill in the form below if the impact does not fit the criteria above:

- Fiscal impact of \$100,000 annually or \$500,000 over 5 years.

Assumptions:

Describe how estimates were derived:

Estimated Impact to the State by Fiscal Year

	<u>Year 1 (FY 2023)</u>	<u>Year 2 (FY 2024)</u>
Revenue by each source:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL REVENUE	_____	_____
Expenditures:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL EXPENDITURES	_____	_____
NET IMPACT	_____	_____

This rule is required by state law or federal mandate.

Please identify the state or federal law:

Identify provided change fiscal persons:

Funding has been provided for the rule change.

Please identify the amount provided and the funding source:

Funding has not been provided for the rule.

Please explain how the agency will pay for the rule change:

Fiscal impact to persons affected by the rule:

This rule change will provide additional flexibility for child care centers dealing with workforce shortages. Allowing an increased number of children to be served per staff person in licensed child care centers may also positively impact the number of people that can return to work if child care access is a barrier to their employment. The specific impact to these groups is not known.

Fiscal impact to counties or other local governments (required by Iowa Code 25B.6):

None anticipated.

Agency representative preparing estimate: Francis Thurman

JH 01/13/22

Telephone number: 281-6855

HUMAN SERVICES DEPARTMENT[441]

Notice of Intended Action

Proposing rule making related to funding for local services and providing an opportunity for public comment.

The Human Services Department hereby proposes to amend Chapter 153, "Funding For Local Services," Iowa Administrative Code.

Legal Authority for Rule Making

This rule making is proposed under the authority provided in Iowa Code chapter 232 and Iowa Code sections 217.6 and 234.6.

State or Federal Law Implemented

This rule making implements, in whole or in part, Iowa Code chapter 232 and Iowa Code sections 217.6 and 234.6.

Purpose and Summary

This review is part of the Department's five-year rules review process. Division I sets the requirements for developing a social services block grant preexpenditure report. This rulemaking adds references to the intended use plan, which is done in tandem with the social services block grant preexpenditure report. The proposed report and intended use plan need to be available for public review and comment for a minimum of ten days, instead of two weeks. Division II updates the number of the Department's service areas from eight to six and updates the name of community empowerment to Early Childhood Iowa. Division IV is rescinded as the program no longer exists and Iowa Code Section 331.440 that authorized the program has been repealed.

Fiscal Impact

This rule making has no fiscal impact to the State of Iowa.

Jobs Impact

After analysis and review of this rule making, no impact on jobs has been found.

Waivers

Any person who believes that the application of the discretionary provisions of this rule making would result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any, pursuant to rule 441_1.8(17A,217).

Public Comment

Any interested person may submit written comments concerning this proposed rule making. Written comments in response to this rule making must be received by the Department no later than 4:30 p.m. on April 12, 2022. Comments should be directed to:

Nancy Freudenberg
Iowa Department of Human Services
Hoover State Office Building, Fifth Floor
1305 East Walnut Street
Des Moines, Iowa 50319-0114
Email: appeals@dhs.state.ia.us

Public Hearing

No public hearing is scheduled at this time. As provided in Iowa Code section 17A.4(1)“b,” an oral presentation regarding this rule making may be demanded by 25 interested persons, a governmental subdivision, the Administrative Rules Review Committee, an agency, or an association having 25 or more members.

Review by Administrative Rules Review Committee

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rule making by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rule making at its [regular monthly meeting](#) or at a special meeting. The Committee’s meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

The following rule-making action is proposed:

Please see attached.

Proposed Rule Changes

ITEM 1. Amend rule 441-153.2(234) as follows:

441—153.2(234) Development of preexpenditure report and intended use plan.

153.2(1) The department of human services shall develop the social services block grant preexpenditure report and intended use plan on an annual basis. The report and plan shall be developed in accordance with the Code of Federal Regulations, Title 45, Part 96, Subpart G, as amended to ~~July 20, 2000~~ December 8, 2021. The report and plan shall describe the services to be funded, in what areas services are available and the amount of funding available. The plan shall also indicate the source of funding.

153.2(2) The department shall issue a proposed preexpenditure report and intended use plan before publication of the final report and plan. The proposed report and plan shall be available for public review and comment:

a. In each local office where a service area manager is based during regular business hours for a ~~two-week~~ ten-day period; and

b. On the department's Internet ~~Web-site~~ website, www.dhs.iowa.gov.

153.2(3) The time and scope of public review will be announced each year. The announcement will indicate the time the proposed report and plan can be viewed. The department:

a. Shall make this information available on the department's Internet ~~Web-site~~ website, www.dhs.iowa.gov, and post signs in each local human services office; and

b. May publish advertisements in each service area listing the time of review.

153.2(4) The department shall accept comments about the preexpenditure report and intended use plan during the specified public review and comment period. Individuals or groups may submit written comments to the service area manager or to the Division of Fiscal Management, Iowa Department of Human Services, Hoover State Office Building, 1305 E. Walnut Street, Des

Proposed Rule Changes

Moines, Iowa 50319-0114. The service area manager may arrange public hearings where testimony will be accepted.

153.2(5) The department shall consider the public comment when developing the final preexpenditure report and intended use plan.

153.2(6) A copy of the final preexpenditure report and intended use plan will be available:

- a. In each local office where a service area manager is based; and
- b. On the department's Internet ~~Web site~~ website, www.dhs.iowa.gov.

ITEM 2. Amend rule 441-153.3(234) as follows:

441—153.3(234) Amendment to preexpenditure report and intended use plan.

153.3(1) The preexpenditure report and intended use plan may be amended throughout the year. The department may file an amendment changing the kind, scope or duration of a service. Decisions to change a direct service or state purchase service will be made by the department.

Prior to filing an amendment the department ~~and the county boards of supervisors~~ will evaluate available funds and the effect any change will have on clients.

153.3(2) An amendment in the preexpenditure report and intended use plan will be posted in the local offices affected by the amendment at least 30 days prior to the effective date of the change. However, in the event funding for the service has been exhausted, an amendment shall be posted immediately notifying the public that the service will no longer be available. The service area manager will, whenever possible, give advance notice of a service termination made necessary because funds have been exhausted. When a service is added or extended, an amendment may be posted immediately and a 30-day posting period is not required.

153.3(3) Individuals or groups may submit written comments to the service area manager or to the Division of Fiscal Management, Iowa Department of Human Services, Hoover State Office

Proposed Rule Changes

Building, 1305 E. Walnut Street, Des Moines, Iowa 50319-0114.

153.3(4) Nothing in this rule will supersede the requirement for notifying clients of adverse action as provided in 441—130.5(234).

ITEM 3. Amend subrule 441-153.5(2) as follows:

153.5(2) Funding for services shall be allocated in accordance with the annual budgeting process. The department’s annual budget is available for review on the department’s Internet ~~Web site~~ website at www.dhs.iowa.gov. Costs may be shifted in and between service areas to ensure continued statewide availability of services.

ITEM 4. Amend rule 441-153.11(232), definition of “Service area manager” as follows:

“*Service area manager*” means the department official responsible for managing the department’s programs, operations, and child welfare budget within one of the ~~eight~~ six department service areas. The centralized service area does not utilize decategorization services.

ITEM 5. Amend rule 441-153.12(232) as follows:

441—153.12(232) Implementation requirements. The decategorization initiative shall be implemented through the creation and operation of decategorization projects in department service areas that utilize decategorization services. One or more counties may jointly agree to form a decategorization project to implement the initiative. The decategorization initiative shall be implemented in accordance with the following requirements:

153.12(1) Decategorization agreement. Representatives from the department, juvenile court services, and county government within the county or counties interested in forming a decategorization project shall develop a written agreement to work together to implement decategorization.

153.12(2) Department approval. A decategorization project must request and receive approval

Proposed Rule Changes

from the department director.

153.12(3) *Governance board.* A decategorization project shall be implemented by a decategorization governance board.

a. The department director shall ensure that each decategorization project has an operating governance board that includes:

(1) Representatives designated by administrators of the department and of juvenile court services; and

(2) Officials with the authority to represent county government in the affected county or counties.

b. Decategorization projects may choose to expand their governance boards to include representatives from other entities.

153.12(4) *Department information.* The service area manager shall provide the governance board with:

a. Information concerning the department service area's funding allocation for department-administered child welfare service programs; and

b. A copy of the service area's child welfare and juvenile justice annual plan.

153.12(5) *Juvenile justice information.* The chief juvenile court officer shall provide the governance board with information on the judicial district's allocation of funding for juvenile justice service programs.

153.12(6) *Support and coordination.* The department service area manager and the chief juvenile court officer shall:

a. Work with the governance board throughout each state fiscal year to coordinate planning and to target resources most effectively.

Proposed Rule Changes

b. Regularly provide the governance board with available data concerning child welfare and juvenile justice needs, service trends and expenditures, child welfare and juvenile justice outcomes, and other relevant issues.

c. Work with the governance board to:

(1) Support board planning and service development; and

(2) Promote effective alignment of available financial resources to enhance preventive, family-centered, and community-based services.

ITEM 6. Amend paragraph 441-153.13(5)“b” as follows:

b. In community planning, the governance board may use information from federal reviews of Iowa’s child welfare system and indicators and outcomes from other community planning efforts. The governance board shall coordinate its community planning efforts as much as possible with those of other planning entities in the community, such as but not limited to:

(1) Communities of promise;

(2) ~~Community empowerment~~ Early Childhood Iowa;

(3) United Way;

(4) Community partnerships for protecting children;

(5) Comprehensive school improvement planning;

(6) Comprehensive substance abuse agency planning; and

(7) Substance-abuse-free environment (SAFE) program planning.

ITEM 7. Amend subrule 441-153.18(2) as follows:

153.18(2) *Submission of plan.* The decategorization services plan shall be submitted to the department’s child welfare administrator and to the Early Childhood Iowa ~~empowerment~~ State board by October 1 of each state fiscal year.

Proposed Rule Changes

ITEM 8. Amend subrule 441-153.19(2) as follows:

153.19(2) *Submission of report.* The progress report shall be submitted to the department's child welfare administrator and to the Early Childhood Iowa empowerment State board by December 1 of each state fiscal year.

ITEM 9. Amend 441 Chapter 153 by rescinding and reserving Division IV.



Iowa Department of Human Services
Information on Proposed Rules

Table with 3 columns: Name of Program Specialist (Denise Dutton), Telephone Number (515-242-6302), Email Address (ddutton@dhs.state.ia.us)

1. Give a brief purpose and summary of the rulemaking:

This rulemaking was reviewed as part of the Department's five-year rules review process. Division I set the requirements for developing a social services block grant preexpenditure report. This rulemaking adds references to the intended use plan, which is always done in tandem with the social services block grant preexpenditure report. The proposed report and intended use plan need to be available for public review and comment for a minimum of ten days, instead of two weeks. Division II updates the number of the Department's service areas from eight to six and updates the name of community empowerment to Early Childhood Iowa. Division IV is rescinded as the program no longer exists and Iowa Code Section 331.440 that authorized the program has been repealed.

2. What is the legal basis for the change? (Cite the authorizing state and federal statutes and federal regulations):

Iowa Code Chapter 217.6, 232 and 234.6

3. Describe who this rulemaking will positively or adversely impact.

This rulemaking will have a positive impact on Department staff who are responsible for handling the social services block grant preexpenditure report and intended use plan. The rulemaking will have a positive impact on decategorization of child welfare and juvenile justice funding as the rules will reflect the current name for Early Childhood Iowa.

4. Does this rule contain a waiver provision? If not, why?

The proposed amendments do not include waiver provisions because they confer benefits on those affected and are pursuant to federal law that does not provide for waivers, given that the process is optional. Individuals may request a waiver under the Department's general rule on exceptions at Iowa Admin. Code 441—1.8.

5. What are the likely areas of public comment?

There is no likely area of public comment.

6. Do these rules have an impact on private-sector jobs and employment opportunities in Iowa? (If yes, describe nature of impact, categories and number of jobs affected, state regions affected, costs to employer per employee.)

The proposed amendments have no impact on private-sector jobs and employment opportunities in Iowa.

Describe how estimates were derived:

There are no potential costs estimated for this rule.

Estimated Impact to the State by Fiscal Year

	<u>Year 1 (FY 2022)</u>	<u>Year 2 (FY 2023)</u>
Revenue by each source:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL REVENUE	_____	_____
Expenditures:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL EXPENDITURES	_____	_____
NET IMPACT	_____	_____

This rule is required by state law or federal mandate.

Please identify the state or federal law:

Identify provided change fiscal persons:

Funding has been provided for the rule change.

Please identify the amount provided and the funding source:

Funding has not been provided for the rule.

Please explain how the agency will pay for the rule change:

There is no fiscal impact to the state.

Fiscal impact to persons affected by the rule:

There is no fiscal impact. There is no fiscal impact to the state. No additional costs to the regulated community or State of Iowa as a whole are anticipated.

Fiscal impact to counties or other local governments (required by Iowa Code 25B.6):

No impact.

Agency representative preparing estimate: Rob Beran

JH 02/25/2022

Telephone number: 281-6188

HUMAN SERVICES DEPARTMENT[441]

Notice of Intended Action

Proposing rule making related to individual and family direct support and providing an opportunity for public comment.

The Human Services Department hereby proposes to amend Chapter 184, "Individual and Family Direct Support," Iowa Administrative Code.

Legal Authority for Rule Making

This rule making is proposed under the authority provided in Iowa Code sections 217.6 and 225.6.

State or Federal Law Implemented

This rule making implements, in whole or in part, Iowa Code sections 217.6 and 225.6.

Purpose and Summary

This rulemaking was reviewed as part of the Department's five-year rules review process. Division I regarding the Family Support Subsidy Program updates the definition of a family member based on the federal Development Disabilities Assistance and Bill of Rights as codified in 42 United States Code (U.S.C.) 15002(8). Iowa Code 225C.37 specifies the Department can no longer accept new applications for the program after January 1, 2010. Members who are currently enrolled in the program remain eligible until one of the reasons for termination is met. Members ongoing eligibility is determined annually based on a verification packet sent by the Department. If determined eligible, the member's monthly payment is determined annually based on the federal cost of living adjustment (COLA). This rulemaking package brings the rules into compliance with the Iowa Code. The Comprehensive Family Support Program referenced in division II, updates an outdated reference to the United States Code and removes the form name and number of the application used to apply for the program as the application form became obsolete effective July 1, 2016.

Fiscal Impact

This rule making has no fiscal impact to the State of Iowa.

Jobs Impact

After analysis and review of this rule making, no impact on jobs has been found.

Waivers

Any person who believes that the application of the discretionary provisions of this rule making would result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any pursuant to rule 441_1.8(17A, 217).

Public Comment

Any interested person may submit written comments concerning this proposed rule making. Written comments in response to this rule making must be received by the Department no later than 4:30 p.m. on April 12, 2022. Comments should be directed to:

Nancy Freudenberg
Iowa Department of Human Services
Hoover State Office Building, Fifth Floor
1305 East Walnut Street
Des Moines, Iowa 50319-0114
Email: appeals@dhs.state.ia.us

Public Hearing

No public hearing is scheduled at this time. As provided in Iowa Code section 17A.4(1)“b,” an oral presentation regarding this rule making may be demanded by 25 interested persons, a governmental subdivision, the Administrative Rules Review Committee, an agency, or an association having 25 or more members.

Review by Administrative Rules Review Committee

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rule making by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rule making at its [regular monthly meeting](#) or at a special meeting. The Committee’s meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

The following rule-making action is proposed:

Please see attached.

PROPOSED RULES FOR CHAPTER 184

ITEM 1. Amend rule 441--184.1(225C) definition of "Family member" as follows:

"Family member" means a person less than 18 years of age who by educational determination has a moderate, severe, or profound educational handicap or special health care needs or who otherwise meets the definition of developmental disability in the federal Developmental Disabilities Act, ~~Section 102(5)~~ Assistance and Bill of Rights, as codified in 42 U.S.C. ~~6001(5)~~ 15002(8).

ITEM 2. Amend rule 441--184.3(225) as follows:

~~441—184.3(225C) Application process. Program termination.~~ Applications for the family support subsidy program may be obtained at the local office of the department in the county in which the family resides. Arrangements shall be made through the local office for the parent or legal guardian to meet with a trained volunteer or staff person to respond to questions. As of July 1, 2010, the Department shall no longer accept new applications or approve pending applications for the family support subsidy program pursuant to Iowa Code 225C.37(3) Family members enrolled in the program as of July 1, 2010 will continue to receive subsidy payments until members meet one of the reasons for termination outlined in 441--184.8(1).

~~—184.3(1) A parent or legal guardian who wishes to apply shall complete Form 470-2526, Application for Family Support Subsidy, and provide the following verification for each family member for whom application is being made:~~

~~—a. Verification of the family's net taxable income for the previous calendar year, or estimated income for the current year.~~

~~—b. Verification of educational or health care needs.~~

~~—(1) If the child has undergone an educational evaluation and by educational determination has a moderate, severe, or profound educational handicap or special health care needs, either the child's school principal, local superintendent of schools or the director of special education for the area education association, or any person so designated by the above individuals, shall complete the educational sign-off portion of Form 470-2526, Application for Family Support Subsidy.~~

~~—(2) If the child has not undergone an educational evaluation and, therefore, the parents or guardians are unable to obtain signatures on the educational sign-off portion of Form 470-2526, then the medical sign-off portion of Form 470-2526 shall be utilized. When using the medical sign-off portion of Form 470-2526, the doctor completing the form shall be familiar with the child and the definition of developmental disability as defined in the federal Developmental Disabilities Act, Section 102(5), as codified in 42 U.S.C. 6001(5), which is contained on the form itself. In addition, the doctor shall be a doctor of medicine (M.D.) or a doctor of osteopathic medicine and surgery (D.O.) and licensed to practice in the doctor's state of residence.~~

~~—(3) The application shall identify the age at which the family member's eligibility shall end. The age identified is subject to approval by the department.~~

~~—184.3(2) The date of application is the date that Form 470-2526 and all verifications specified in subrule 184.3(1) are received in the local office of the department. Application materials shall be processed in the office within two working days of receipt. Obtaining verifications is the responsibility of the applicant.~~

~~—184.3(3) A determination of eligibility shall be made within 15 working days after the completed application and required verification are received by the department.~~

~~—184.3(4) After funds appropriated for this purpose are obligated, pending applications will be denied.~~

~~— a. A denial shall require a notice of decision to be mailed within ten calendar days following the determination that funds have been obligated. The notice shall state that the applicant meets eligibility requirements but no funds are available and that the applicant will be placed on the waiting list, or that the applicant does not meet eligibility requirements.~~

~~— b. Applicants not awarded funding who meet the eligibility requirements will be placed on a statewide waiting list according to the order in which the completed applications and verification were received by the local office. In the event that more than one application is received at one time, families shall be entered on the waiting list on the basis of the day of the month of the child's birthday, the lowest number being first on the waiting list. Any subsequent tie shall be decided by the month of birth, January being month one and the lowest number.~~

ITEM 3. Amend rule 441-184.4(225C) as follows:

441—184.4(225C) Family support services plan.

~~184.4(1) The special needs of the child and the family for the subsidy, and the resources available to meet those needs shall be identified on the application form.~~

~~184.4(2)~~ **184.4(1)** The applicant shall agree that the subsidy will be used to meet the special needs identified in the plan or other special needs of the child and family.

~~184.4(3)~~ **184.4(2)** Families shall retain the greatest possible flexibility in determining use of the subsidy, except a parent or legal guardian who receives family investment program benefits shall not use the subsidy to meet the basic needs of the family as defined in 441—subrule 41.28(2) or the special needs as defined in 441—subrule 41.28(3). In addition, if the child receives Medicaid, the subsidy shall only be used for the cost of services which are not covered by Medicaid.

ITEM 4. Amend rule 441-184.4(225C) as follows:

441—184.6(225C) Amount of subsidy payment. Families approved for payment shall receive an ongoing monthly payment that is determined annually by the Department based on the federal Cost of Living Adjustment (COLA).

~~184.6(1) *Monthly payment.* Families approved for payment shall receive an ongoing monthly payment that is determined by dividing the amount appropriated by the legislature by the number of available subsidy slots designated by the legislature for each state fiscal year. The number of slots and amount requested by the department shall be determined after consultation with the comprehensive family support council.~~

~~—184.6(2) *Advance payment.* In addition, a one time lump sum advance payment of twice the monthly amount may be paid to the parent or legal guardian whose family member will be returning home for the purpose of preparing for in home care.~~

~~—184.6(3) *Effective date.* An approved subsidy shall be payable as of the first of the month following approval. A notice of decision stating that the application is approved shall be sent within two working days of the approval. The notice shall state the date payments will begin, the amount of monthly payments, and, if different, the amount of the first payment.~~

ITEM 5. Amend rule 441-184.4(225C) as follows:

441—184.7(225C) Redetermination of eligibility. The department shall send a verification packet which shall include instructions and necessary forms for verification of continuing eligibility to all recipients of subsidy payments at least 30 calendar days prior to deadline date for annual redetermination of eligibility. The completed verification materials shall be submitted

annually to the department of human services. If the signed verification of continuing eligibility is not received by the department by the last working day of the renewal month, the family's subsidy shall be terminated.

~~184.7(1) The department shall send an application packet, which shall include instructions and necessary forms for verification of continuing eligibility, to all recipients of subsidy payments at least 30 calendar days prior to the deadline date for annual redetermination of eligibility. The completed Form 470-2526, Application for Family Support Subsidy, and required verification materials shall be submitted annually to the Department of Human Services, Division of MH/MR/DD, Hoover State Office Building, Des Moines, Iowa 50319-0114. If the signed application and verification of continuing eligibility are not received by the division by the last working day of the renewal month, the family's subsidy shall be terminated.~~

~~—184.7(2) When funding allows additional individuals to be added to the subsidy program, they shall be taken from the statewide waiting list, and their eligibility shall be redetermined at that time. An application packet, which includes instructions and necessary forms for verification of continuing eligibility, shall be sent to these families for completion and returned to the Department of Human Services, Division of MH/MR/DD, Hoover State Office Building, Des Moines, Iowa 50319-0114, within timelines specified by the department. If the signed application and verification of continuing eligibility are not received by the timeline specified by the department, the family's name shall be dropped from consideration for receipt of the subsidy payments.~~

ITEM 6. Amend subrule 441-184.8(3) as follows:

184.8(3) If funds are not sufficient to cover payments for all persons on the subsidy, persons will be terminated from the subsidy in inverse order to the dates they began receiving payments,

i.e., the last person to be added on to the subsidy being the first person to be removed. ~~The person terminated will move back to the waiting list with the person's original application date dictating the person's position as stated in subrule 184.3(4).~~ The division of ~~MH/MR/DD~~ Adult, Children and Family Services is responsible for notifying the persons who will be removed from the subsidy for this reason.

ITEM 7. Amend rule 441--184.21(225C) definition of "Individual with a disability" as follows:

"Individual with a disability" means a person who is less than 22 years of age and meets the definition of developmental disability in 42 U.S.C. § ~~6004~~ 15002.

ITEM 8. Amend rule 441-184.23(225C) as follows:

441—184.23(225C) Application. A family may apply on an application developed by an entity contracted by the department. The application shall be submitted to the department or to a local children at home contractor for assistance ~~using Form 470-4399, Application for Children at Home Services.~~ The local children at home contractor shall determine eligibility for services in accordance with the provisions of this division.

ITEM 9. Rescind and reserve rule 441-184.27(225C).



Iowa Department of Human Services
Information on Proposed Rules

Table with 3 columns: Name of Program Specialist (Wendy Hoogeveen), Telephone Number (515-281-8919), Email Address (whoogev@dhs.state.ia.us)

1. Give a brief purpose and summary of the rulemaking:

This rulemaking was reviewed as part of the Department's five-year rules review process. Division I regarding the Family Support Subsidy Program updates the definition of a family member based on the federal Development Disabilities Assistance and Bill of Rights as codified in 42 U.S.C. 15002(8). Iowa Code 225C.37 specifies the Department can no longer accept new applications for the program after January 1, 2010. Members who are currently enrolled in the program remain eligible until one of the reasons for termination is met. Members ongoing eligibility is determined annually based on a verification packet sent by the Department. If determined eligible, the member's monthly payment is determined annually based on the federal cost of living adjustment (COLA). This rulemaking package brings the rules into compliance with the Iowa Code. Division II regarding the Comprehensive Family Support Program updates an outdated reference to the United States Code and removes the form name and number of the application used to apply for the program from the rules as the application form became obsolete effective July 1, 2016.

2. What is the legal basis for the change? (Cite the authorizing state and federal statutes and federal regulations):

Iowa Code §217.6 and 225C.6

3. Describe who this rulemaking will positively or adversely impact.

This rule will positively impact participating families or stakeholders. It will increase clarity of the rule by updating references and removing sections that are no longer applicable.

4. Does this rule contain a waiver provision? If not, why?

The proposed amendments do not include waiver provisions because they confer benefits on those affected and are pursuant to federal law that does not provide for waivers, given that the process is optional. Individuals may request a waiver under the Department's general rule on exceptions at Iowa Admin. Code 441—1.8.

5. What are the likely areas of public comment?

There is no likely area of public comment.

6. Do these rules have an impact on private-sector jobs and employment opportunities in Iowa? (If yes, describe nature of impact, categories and number of jobs affected, state regions affected, costs to employer per employee.)

The proposed amendments have no impact on private-sector jobs and employment opportunities in Iowa.



Administrative Rule Fiscal Impact Statement

Date: November 2, 2021

Agency: Human Services
IAC citation: 441 IAC 184
Agency contact: Wendy Hoogeveen

Summary of the rule:

This rulemaking was reviewed as part of the Department's five-year rules review process. Division I regarding the Family Support Subsidy Program updates the definition of a family member based on the federal Development Disabilities Assistance and Bill of Rights as codified in 42 U.S.C. 15002(8). Iowa Code 225C.37 specifies the Department can no longer accept new applications for the program after January 1, 2010. Members who are currently enrolled in the program remain eligible until one of the reasons for termination is met. Members ongoing eligibility is determined annually based on a verification packet sent by the Department. If determined eligible, the member's monthly payment is determined annually based on the federal cost of living adjustment (COLA). This rulemaking package brings the rules into compliance with the Iowa Code. Division II regarding the Comprehensive Family Support Program updates an outdated reference to the United States Code and removes the form name and number of the application used to apply for the program from the rules as the application form became obsolete effective July 1, 2016.

Fill in this box if the impact meets these criteria:

- No fiscal impact to the state.
- Fiscal impact of less than \$100,000 annually or \$500,000 over 5 years.
- Fiscal impact cannot be determined.

Brief explanation:

Budget Analysts must complete this section for ALL fiscal impact statements.

Fill in the form below if the impact does not fit the criteria above:

- Fiscal impact of \$100,000 annually or \$500,000 over 5 years.

Assumptions:

Estimated Impact to the State by Fiscal Year

	<u>Year 1 (FY 2023)</u>	<u>Year 2 (FY 2024)</u>
Revenue by each source:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL REVENUE	_____	_____
Expenditures:		
General fund	_____	_____
Federal funds	_____	_____
Other (specify):	_____	_____
TOTAL EXPENDITURES	_____	_____
NET IMPACT	0.00	0.00

This rule is required by state law or federal mandate.
Please identify the state or federal law:
 Identify provided change fiscal persons:

Funding has been provided for the rule change.
Please identify the amount provided and the funding source:

Funding has not been provided for the rule.
Please explain how the agency will pay for the rule change:
 No fiscal impact.

Fiscal impact to persons affected by the rule:

No fiscal impact.

Fiscal impact to counties or other local governments (required by Iowa Code 25B.6):

No fiscal impact.

Agency representative preparing estimate: Minu Maviladath

JH 11/23/2021

Telephone number: 515-281-3720



Health Equity Update

Presented by Oliviah Walker, Health Equity Coordinator
3-10-22



Health Equity at IDPH and DHS

Health Equity Guiding Principle

We promote health for all by working to reduce health disparities and focusing on health where people live, learn, work and play.

Health Equity Vision

Building Health Equity for All Communities



What is health equity?

Health equity is the attainment of the highest possible level of health for all people. It means achieving the environmental, social, economic, and other conditions in which all people have the opportunity to attain their highest possible level of health.

IDPH definition

Health equity means that everyone has a fair and just opportunity to be as healthy as possible. This requires **removing obstacles to health** such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.

RWJ definition



Health Equity

Health equity means reducing and ultimately eliminating disparities in health and its determinants that adversely affect excluded or marginalized groups.

(Robert Wood Johnson Foundation)



Equity is not the same as equality.

Equality



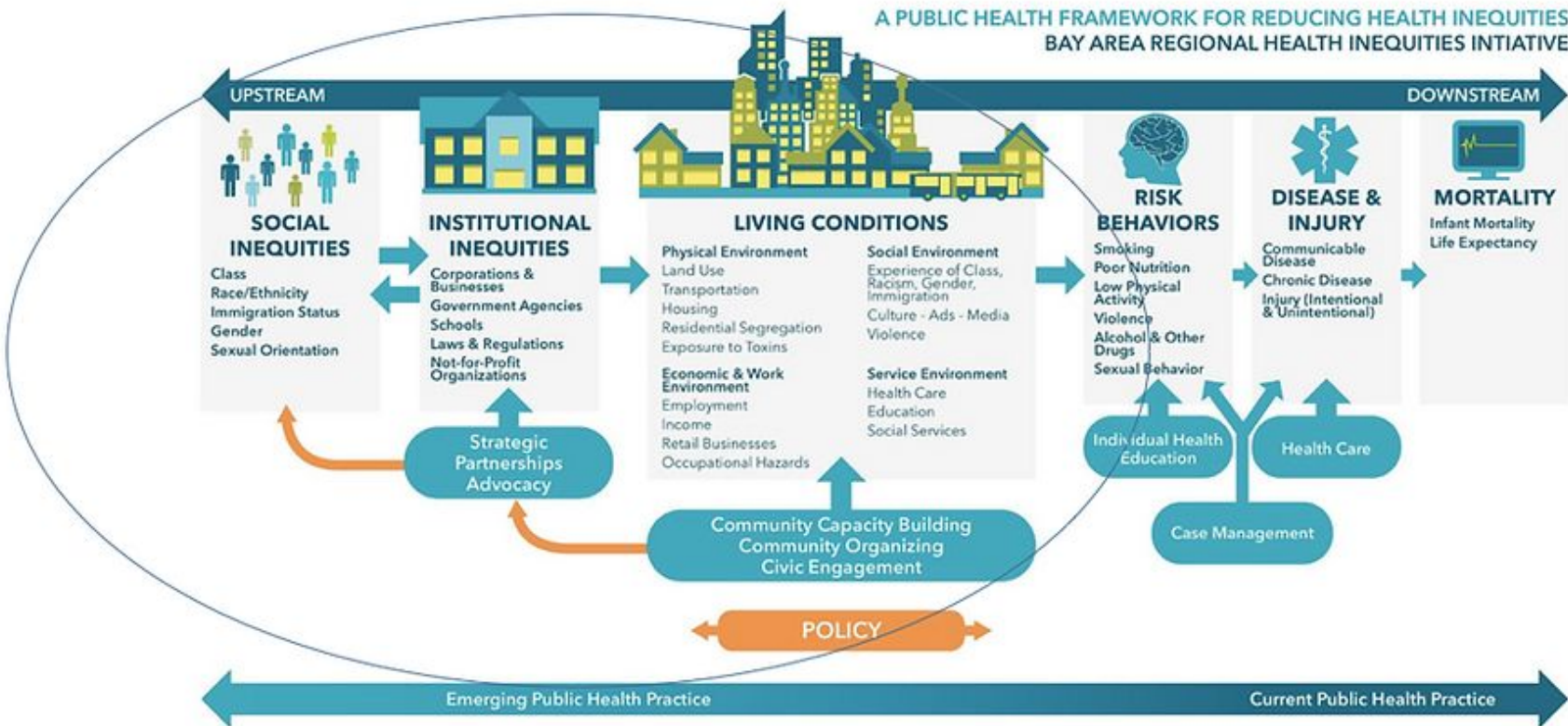
Equity



To equalize opportunities, those with worse health and fewer resources need more efforts and opportunities to improve their health.



A PUBLIC HEALTH FRAMEWORK FOR REDUCING HEALTH INEQUITIES
BAY AREA REGIONAL HEALTH INEQUITIES INITIATIVE



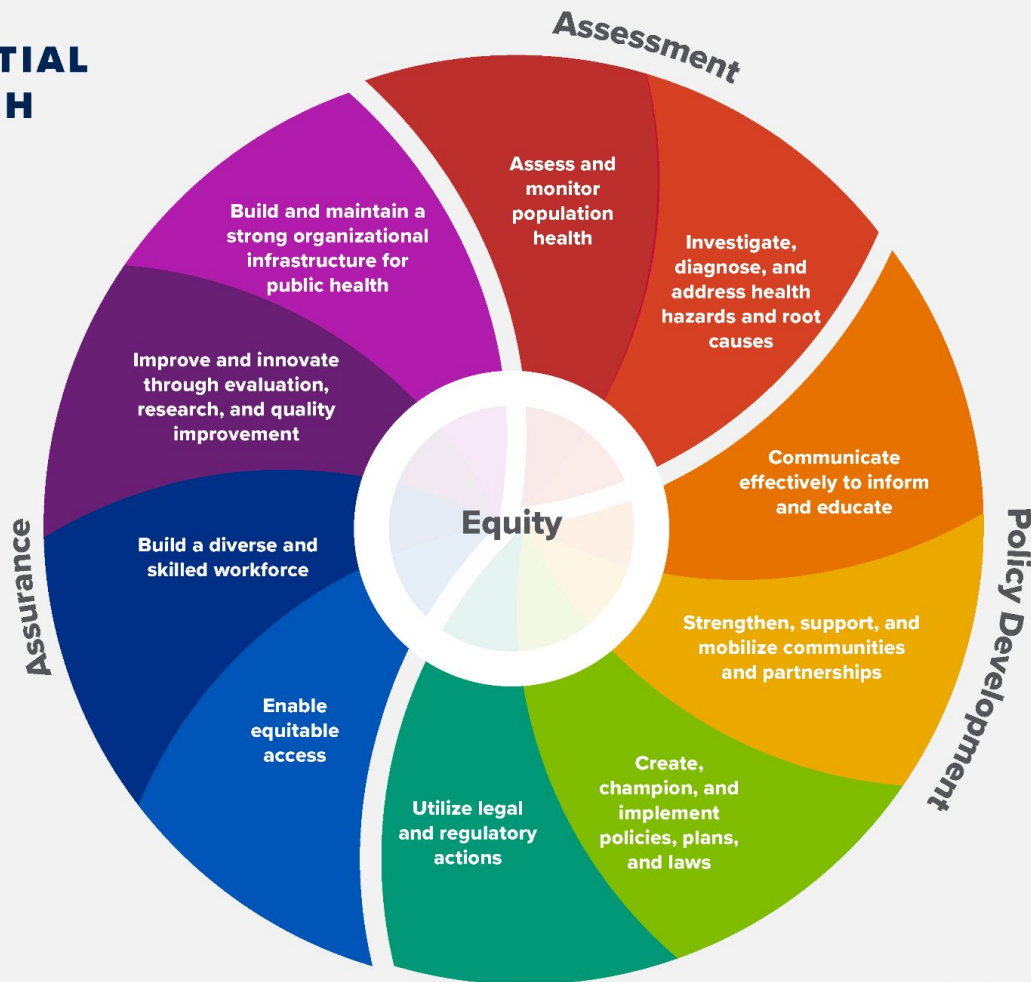
Social Determinants of Health



THE 10 ESSENTIAL PUBLIC HEALTH SERVICES

To protect and promote the health of all people in all communities

The 10 Essential Public Health Services provide a framework for public health to protect and promote the health of all people in all communities. To achieve optimal health for all, the Essential Public Health Services actively promote policies, systems, and services that enable good health and seek to remove obstacles and systemic and structural barriers, such as poverty, racism, gender discrimination, and other forms of oppression, that have resulted in health inequities. Everyone should have a fair and just opportunity to achieve good health and well-being.

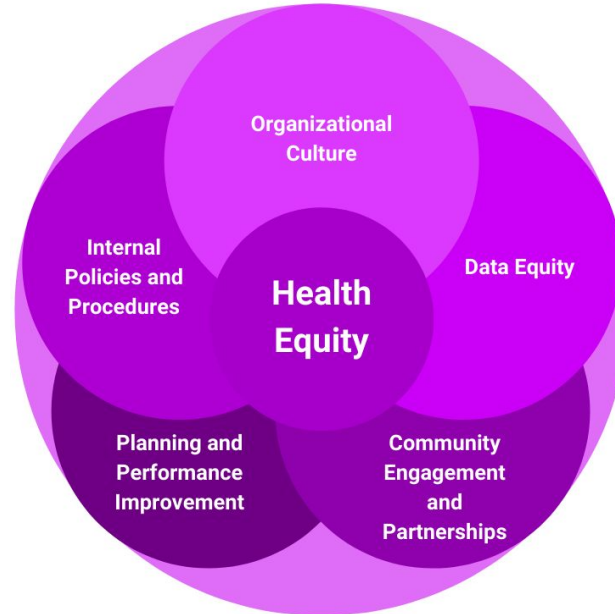


Created 2020



Iowa HHS Health Equity Framework

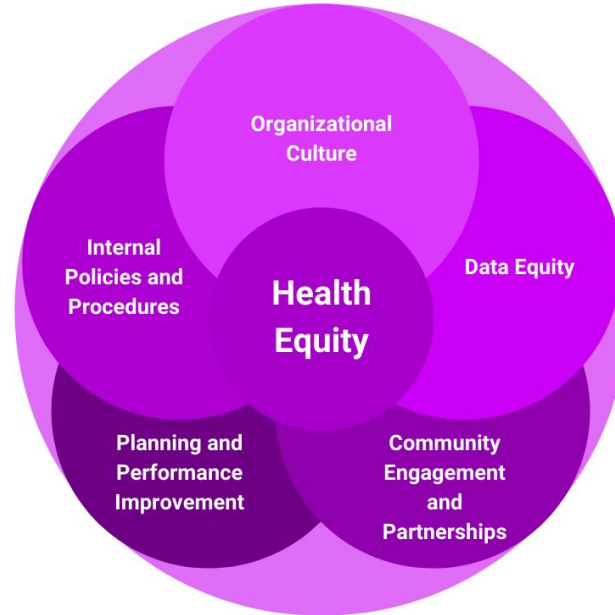
1. Organizational Culture
2. Internal Policies and procedures
3. Data Equity Framework
4. Planning and Performance Improvement
5. Partnerships and Community Engagement



Office of Equity

Purpose: Advance Health Equity through oversight and strategic support of department-wide equity initiatives

Functions: Communications, training, capacity-building, consultation, technical assistance, data analysis, grant-making, community collaboration



Organizational Culture

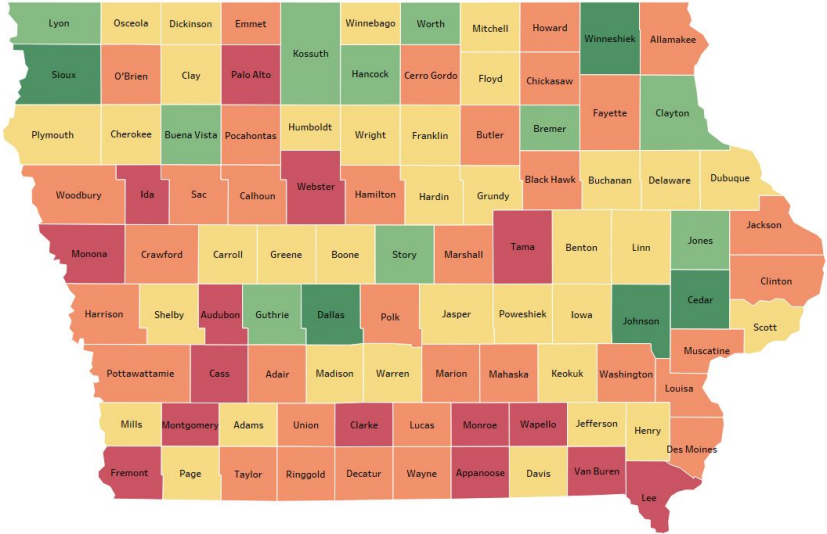


Internal Policies and Procedures



Data Equity

Collecting demographic information allows us to analyze data and identify trends and disparities that may be covered up when looking at the whole population set.



Source: 2021 County Health Rankings



Resources

- Development of Office of Equity
- Dedicated FTE
- DHS Cultural Equity Alliance
- IDPH Health Equity Drivers Forum
- Internal resources
 - Contracting guide
 - Performance plan examples
 - Resource library
- Workforce Development training opportunities
- External Resources



Discussion/Questions

Contact information:

Olivia Walker

Health Equity Coordinator

olivia.walker@idph.iowa.gov



Iowa Medicaid Enterprise (IME)



Managed Care Organization (MCO)

Report: SFY 2022, Quarter 1

(July - September 2021)

Performance Data

Published December 2021

Contents

This report is based on requirements of **2016 Iowa Acts Section 1139**. The legislature grouped these reports into three main categories: Consumer Protection, Outcome Achievement, and Program Integrity.

The Department grouped the managed care reported data in this publication as closely as possible to **House File 2460** categories but has made some alterations to ease content flow and data comparison. This publication content flows as follows:

Executive Summary	3
Managed Care Organization (MCO) Member Summary	4
MCO Financial Summary	6
Claims Universe	8
Claims Summary (Non-Pharmacy)	9
Claims Summary (Pharmacy)	11
Prior Authorizations	13
Grievances and Appeals	15
MCO Care Quality and Outcomes	17
MCO Children Summary	19
Long Term Services - Care Quality and Outcomes	21
Call Center Performance Metrics	25
Provider Network Access	27
MCO Program Integrity	29
Appendix: Glossary	30

Executive Summary

This report is based on Quarter 1 of State Fiscal Year (SFY) 2022 and includes the information for the Iowa Medicaid Managed Care Organizations (MCOs): Amerigroup (AGP) and Iowa Total Care (ITC)

Notes about the reported data:

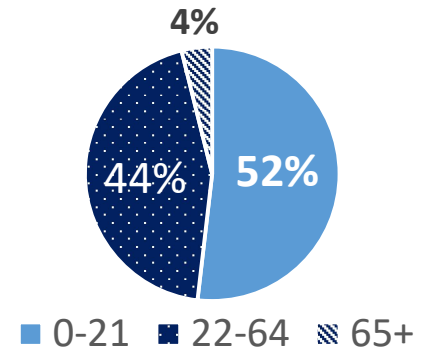
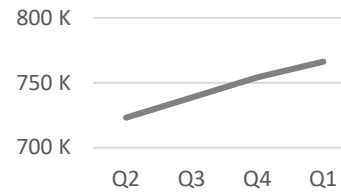
- This quarterly report is focused on key descriptors and measures that provide information about the managed care implementation and operations.
- The reports are largely based on managed care claims data. Because of this, the data will not be complete until a full 180 days has passed since the period reported. However, based on our knowledge of claims data this accounts for less than 15% of the total claim volume for that reporting period.
- Data pulled on other dates may not reflect the same numbers due to reinstatements and eligibility changes.
- The Medical Loss Ratio information is reflected as directly reported by the MCOs.
- The Department validates the data by looking at available fee-for-service historical baselines, encounter data, and by reviewing the source data provided by the MCOs.
- Providers and members can find more information on the IA Health Link program at: <http://dhs.iowa.gov/iahealthlink>

MCO Member Summary - All MCO Counts

Managed Care Organizations (MCOs) offer health insurance benefits for those adults and families that qualify for the IA Health Link (Medicaid) and the Healthy and Well Kids in Iowa (Hawki) programs.

In Iowa, almost 95% of the Medicaid population is covered by an MCO. Populations not covered by MCOs are provided coverage through the state's Fee-For-Service (FFS) program.

All MCO Members
766,267



+ 12,164 Members
1.61% Increase

All MCO Enrollment
(by Age)

Data Notes: September 2021 enrollment data as of October, 2021. The "Distinct" column represents the total number of unique individuals appearing at least once during the past four-quarters.

	SFY21 Q2	SFY21 Q3	SFY21 Q4	SFY22 Q1	Average	Distinct
MCO Member Summary - Overall Counts	723,211	738,739	754,103	766,267	745,580	809,207
0-21	383,041	388,655	393,703	397,383	390,696	425,728
22-64	311,554	321,248	330,873	338,971	325,662	361,015
65+	28,616	28,836	29,527	29,913	29,223	36,492
Fee-For-Service (FFS) - Non MCO Enrollees	41,375	42,216	43,938	45,062	43,148	60,434
Significant Change in Data? (+/-) <i>If Yes, explain:</i>	No <input checked="" type="checkbox"/> Yes <input type="checkbox"/>				Iowa Medicaid Population	855,887
					1 year distinct count	
o Disenrollment increased between Q4 and Q1 because of Open Enrollment						

MCO Member Summary



SFY21 Q4 SFY22 Q1

All Members - by MCO	439,824	445,169
Traditional Medicaid	271,198	273,370
Wellness Plan - IHAWP/Expansion	120,600	124,002
M-CHIP - Expansion	7,440	7,479
Healthy and Well Kids in Iowa (Hawki)	40,586	40,318
MCO Member Market Share	58.2%	58.1%
Disenrolled	242	1,157



SFY21 Q4 SFY22 Q1

All Members - by MCO	315,976	321,098
Traditional Medicaid	195,343	198,160
Wellness Plan - IHAWP/Expansion	97,111	100,062
M-CHIP - Expansion	6,313	6,325
Healthy and Well Kids in Iowa (Hawki)	17,209	16,551
MCO Member Market Share	41.8%	41.9%
Disenrolled	347	914

Long-Term Service & Support (LTSS)	22,429	22,219
HCBS Waivers	68.8%	68.6%
Facility Based Services	31.2%	31.4%
HCBS Waivers ¹	15,428	15,237
- Reference p. 23-24 for HCBS waiver and service plan enrollment		
Facility Based Services ²	7,001	6,982
ICF/ID ³	1,012	982
Mental Health Institute (MHI)	36	38
Nursing Facilities (NF)	5,788	5,804
Nursing Facilities for Mentally Ill	73	71
Skilled	92	87

Long-Term Service & Support (LTSS)	14,824	14,735
HCBS Waivers	65.3%	65.0%
Facility Based Services	34.7%	35.0%
HCBS Waivers ¹	9,676	9,571
- Reference p. 23-24 for HCBS waiver and service plan enrollment		
Facility Based Services ²	5,148	5,164
ICF/ID ³	608	594
Mental Health Institute (MHI)	27	33
Nursing Facilities (NF)	4,414	4,432
Nursing Facilities for Mentally Ill	31	36
Skilled	68	69

¹ Home- and Community-Based Service (HCBS) totals listed above exclude Habilitation (Hab) enrollment; however, member participation in Hab services is captured on pages 23-24.

² Facility Based Services listed above only include the institutional groups where members are most likely to have an option to transition to an HCBS setting. Excluded institution types include Hospice and Psychiatric Medical Institutions for Children (PMICs).

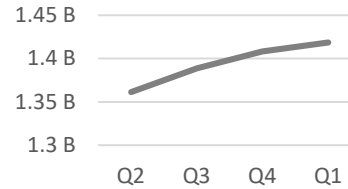
³ Intermediate Care Facilities for the Intellectually Disabled (ICF/ID).

MCO Financial Summary - All MCO Counts

The MCOs receive capitation payments from the State for members' medical services. Capitation payments are made whether or not a provider files a claims with the MCO for services provided to a member.

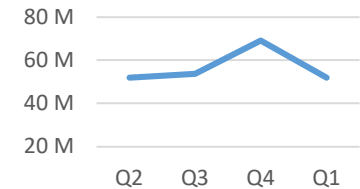
The MCOs are responsible for recovering Medicaid dollars when it is determined that other insurance coverage is available (e.g. health, auto, worker's comp, or even Medicare). This process is known as Third Party Liability (TPL). The MCO retains all recovered TPL funds: however, these funds are then used to develop future capitation rates.

All Capitation Payments
\$1.42 Billion



+ \$10.6 Million
0.76% Increase

Third Party Liability Recovered
\$51.95 Million



- \$ 17.3 Million
24.96% decrease

Data Notes: June 2021 capitation data as of July 2021. All Third Party Liability (TPL) data reported above is self-reported by MCOs. The "Average" column below represents a four-quarter rolling average while the "Total" column represents the sum of the past four-quarters.

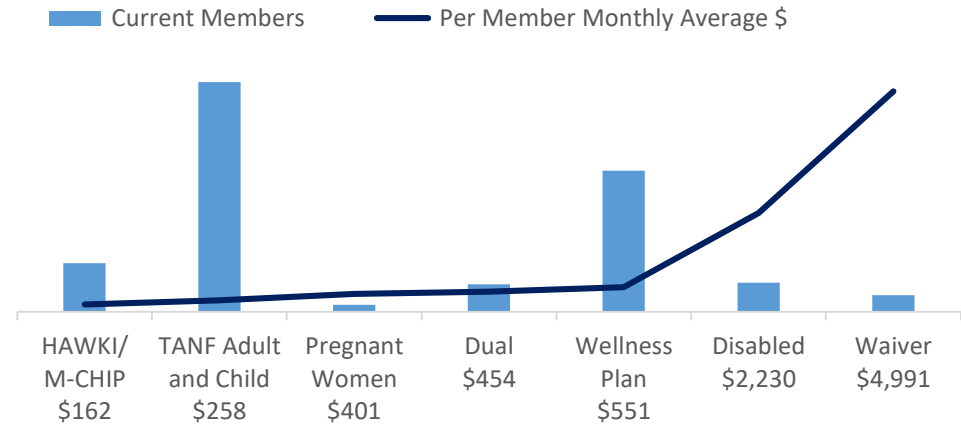
	SFY21 Q2	SFY21 Q3	SFY21 Q4	SFY22 Q1	Average	Total
Financial Summary						
Capitation Payments	\$1.36 B	\$1.39 B	\$1.41 B	\$1.42 B	\$1.39 B	\$5.58 B
Third Party Liability (TPL) Recovered	\$51.91 M	\$53.73 M	\$69.23 M	\$51.95 M	\$56.71 M	\$226.83 M
Significant Change in Data? (+/-)	No <input checked="" type="checkbox"/>		Yes <input type="checkbox"/>			
<i>If Yes, explain:</i>	<div style="border: 1px solid black; padding: 10px; margin-top: 10px;"> o TPL decreased by \$17.3M or 24.96% between Q4 and Q1. </div>					

MCO Financial Summary

Per member Medicaid capitation is determined by program eligibility. Medicaid capitation expenditures vary based on member eligibility group size and per member capitation rate. In Iowa, about 50% of all capitation expenditures are allocated to supporting the disabled & waiver eligibility groups.

Medical loss ratios (MLR) capture how much money is spent on medical claims and quality measures versus administrative expenses and profits. By contract, MCOs are required to spend a certain percentage of their capitation payments on claims annually or risk having to return the difference.

Monthly Capitation Expenditures



SFY21 Q4 SFY22 Q1



SFY21 Q4 SFY22 Q1

Capitation Totals	\$828.47 M	\$832.22 M
Adjustments	\$8.47 M	-\$2.07 M
Current	\$800.26 M	\$814.65 M
Retro	\$19.73 M	\$19.64 M
Third Party Liability (TPL) Recovered	\$29.29 M	\$15.35 M
Financial Ratios		
Medical Loss Ratio (MLR)	87.0%	90.5%
Administrative Loss Ratio (ALR)	5.9%	5.3%
Underwriting Ratio (UR)	7.0%	4.1%
	Annual MLR⁴	90.5%
Reported Reserves		
Acceptable Quarterly Reserves per Iowa Insurance Division (IID)	Y	Y

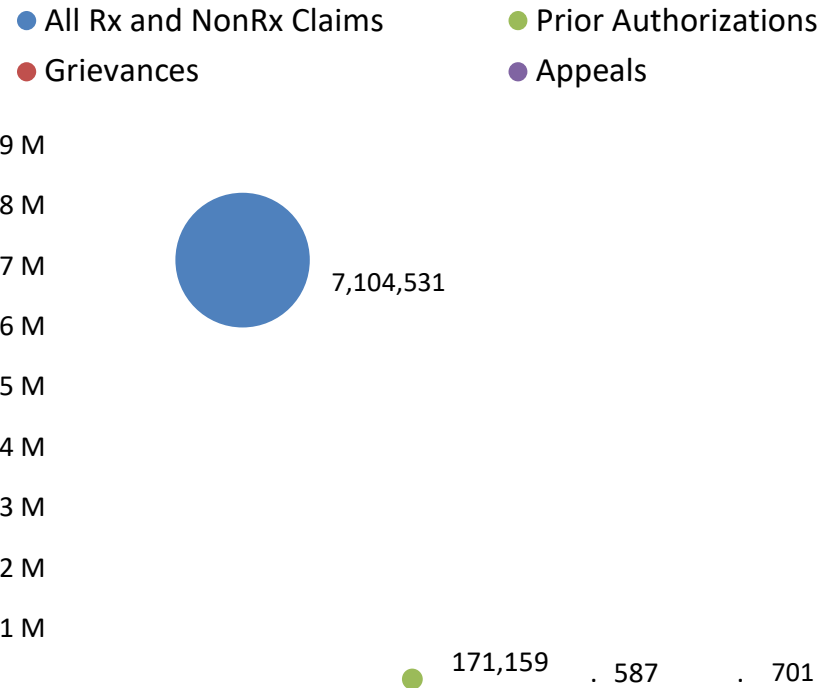
Capitation Totals	\$570.55 M	\$586.7 M
Adjustments	\$12.58 M	-938,683
Current	\$548.53 M	\$568.86 M
Retro	\$18.71 M	\$18.78 M
Third Party Liability (TPL) Recovered	\$39.94 M	\$36.59 M
Financial Ratios		
Medical Loss Ratio (MLR)	91.8%	93.2%
Administrative Loss Ratio (ALR)	4.4%	4.3%
Underwriting Ratio (UR)	3.7%	2.5%
	Annual MLR⁴	93.2%
Reported Reserves		
Acceptable Quarterly Reserves per Iowa Insurance Division (IID)	Y	Y

⁴ Annual MLR converts IID reported data on a calendar year basis into an average that follows state fiscal year. All amounts listed are unaudited. MCOs are required to submit data as prescribed within 30 days following the six (6) month claims run-out period for final determination of SFY MLR.

MCO Claims Universe - All MCO Counts

This illustration provides context to the volume of the following actions in comparison to the overall claims universe:

- Some benefits may require **Prior Authorization** before service
- Members may elect to file a **Grievance** to express general plan dissatisfaction
- Members or Providers may **Appeal** a filed claim based on a reduction in benefits or an outright rejection



	% of Claims Universe
Prior Authorizations	2.41%
Grievances	0.01%
Appeals	0.01%

	SFY21 Q2	SFY21 Q3	SFY21 Q4	SFY22 Q1	Average	Total
Claim Counts - All Paid & Denied (p. 9-12)	6.77 M	6.84 M	7.13 M	7.10 M	6.96 M	27.85 M
Non-Pharmacy	3.96 M	4.00 M	4.21 M	4.21 M	4.09 M	16.38 M
Pharmacy	2.81 M	2.84 M	2.92 M	2.90 M	2.87 M	11.47 M
Prior Authorization Summary (p. 13-14)	176,060	185,570	180,026	171,159	178,204	712,815
Non-Rx - Standard PAs Submitted	133,643	139,780	138,319	127,869	134,903	539,611
Pharmacy - Standard PAs Submitted	42,417	45,790	41,707	43,290	43,301	173,204
Grievances & Appeals Summary (p. 15-16)						
Standard Grievances	629	604	583	587	601	2,403
Standard Appeals	592	649	750	701	673	2,692

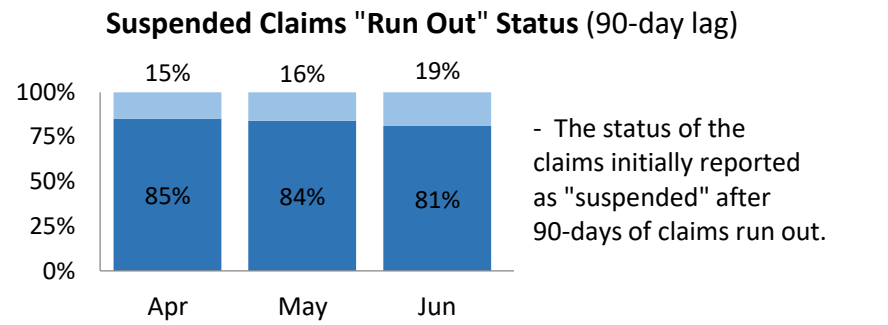
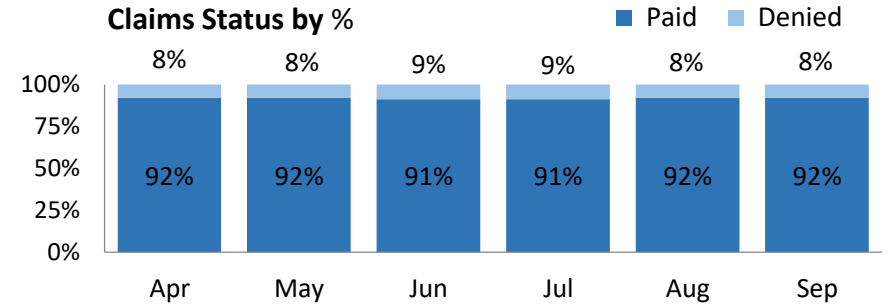
Claims Summary (Non-Pharmacy)

2.43 Million
Claims Paid & Denied



July Aug Sept

All Claims	July	Aug	Sept
Paid	678,917	788,575	765,102
Denied	70,298	64,685	63,511
Suspended	205,369	198,484	234,018
Clean Claims Processed			
in 30-days (Requirement 90%)	98%	97%	95%
in 45-days (Requirement 95%)	100%	98%	98%
Average Days to Pay	8	9	9
Provider Adjustment Requests & Errors Reprocessed in 30-days	100%	100%	100%



		Top 10 Reasons for Claims Denials (Non-Pharmacy)
	%	
1.	23%	Duplicate claim service
2.	14%	Charge exceeds fee schedule/maximum allowable or contracted/legislated fee arrangement
3.	8%	Expenses incurred after coverage terminated
4.	7%	Claim/service lacks information or has submission/billing error(s)
5.	7%	The impact of prior payer(s) adjudication including payments and/or adjustments.
6.	6%	At least one remark code must be provided
7.	5%	Precertification/authorization/notification absent
8.	5%	Service not payable per managed care contract
9.	3%	An attachment/other documentation is required to adjudicate this claim/service.
10.	3%	The time limit for filing has expired

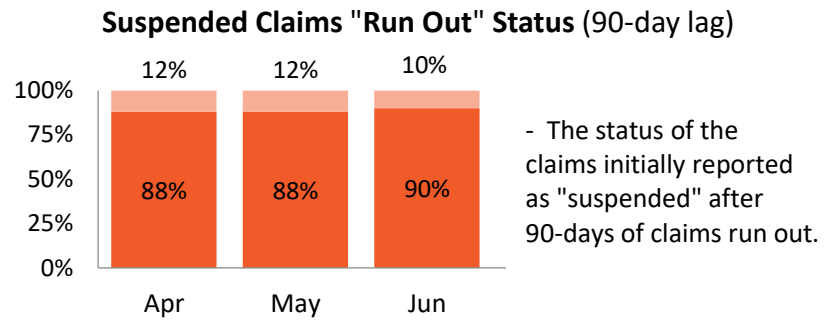
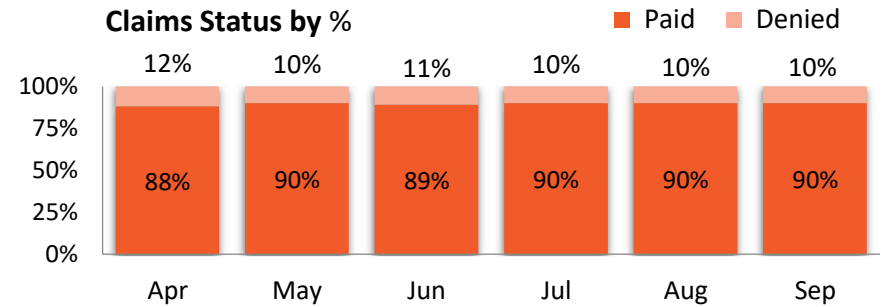
Claims Summary (Non-Pharmacy)

1.78 Million
Claims Paid & Denied



July Aug Sept

All Claims			
Paid	492,557	587,021	522,786
Denied	54,886	64,088	56,243
Suspended	137,184	80,348	109,535
Clean Claims Processed			
in 30-days (Requirement 90%)	97%	98%	99%
in 45-days (Requirement 95%)	98%	99%	99%
Average Days to Pay	10	8	8
Provider Adjustment Requests & Errors Reprocessed in 30-days	98%	98%	99%



Top 10 Reasons for Claims Denials (Non-Pharmacy)		
	%	
1.	26%	Duplicate claim service
2.	17%	Service can not be combined with other service on same day
3.	10%	Bill primary insurer first; resubmit with explanation of benefits (EOB)
4.	9%	Ace claim level return to provider (review claim remarks)
5.	9%	Service is not covered
6.	7%	No authorization on file that matches service(s) billed
7.	5%	Diagnosis code incorrectly coded per ICD10 manual
8.	5%	Procedure coverage not defined by Medicaid
9.	5%	CMS Medicaid National Correct Coding Initiative (NCCI) unbundling
10.	4%	Billing NPI not registered with IA DHS/Iowa Medicaid

Claims Summary (Pharmacy)

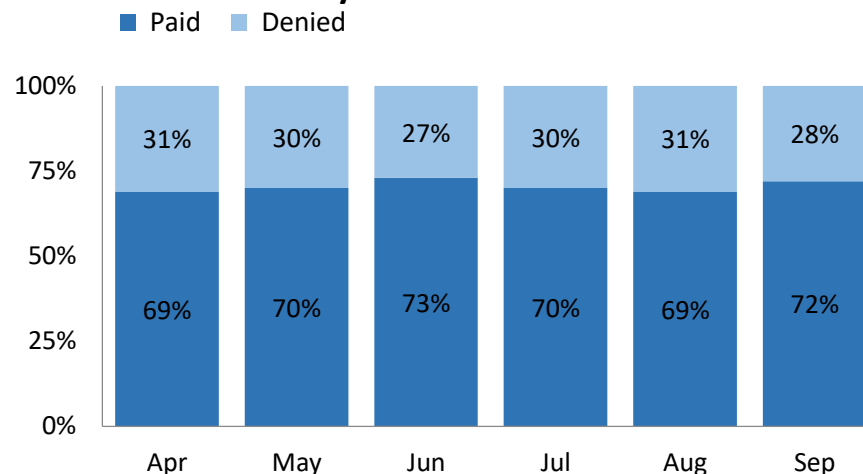


1.64 Million
Claims Paid & Denied

	July	Aug	Sept
--	------	-----	------

All Claims (Pharmacy)			
Paid	350,374	352,465	450,425
Denied	153,326	160,093	171,275
Clean Claims Processed			
in 30-days (Requirement 90%)	100%	100%	100%
in 45-days (Requirement 95%)	100%	100%	100%
Average Days to Pay			
	11	11	12

Claims Status by %



Top 10 Reasons for Claims Denials (Pharmacy)

	%	Reason
1.	38%	Refill too soon
2.	14%	Prior authorization required
3.	13%	Submit bill to other processor or primary payer
4.	11%	National Drug Code (NDC) not covered
5.	6%	Plan limitations exceeded
6.	4%	M/I other payer reject code
7.	3%	Non matched prescriber ID
8.	2%	Filled after coverage terminated
9.	1%	Pharmacy not enrolled in State Medicaid program
10.	1%	M/I other coverage code

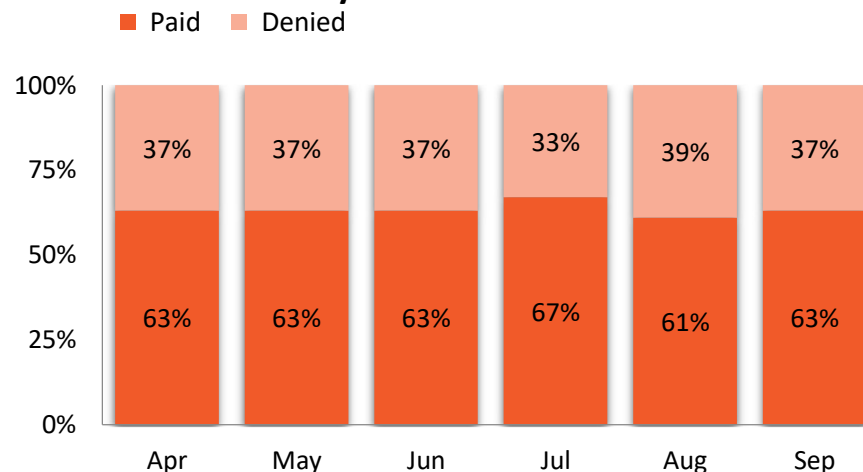
Claims Summary (Pharmacy)



1.27 Million
Claims Paid & Denied

	July	Aug	Sept
All Claims (Pharmacy)			
Paid	265,579	272,886	272,034
Denied	133,719	171,904	156,384
Clean Claims Processed			
in 30-days (Requirement 90%)	100%	100%	100%
in 45-days (Requirement 95%)	100%	100%	100%
Average Days to Pay	3	10	10

Claims Status by %



Top 10 Reasons for Claims Denials (Pharmacy)

	%	Reason
1.	26%	Refill too soon
2.	11%	National Drug Code (NDC) not covered
3.	9%	Prior authorization required
4.	5%	Plan limitations exceeded
5.	3%	Submit bill to other processor or primary payer
6.	2%	Prescriber is not enrolled in State Medicaid program
7.	2%	Drug Utilization Review (DUR) reject error
8.	2%	Pharmacy not enrolled in State Medicaid program
9.	1%	Drug not covered for patient age
10.	1%	Discrepancy other coverage code & other payer amount paid

Prior Authorization Summary



80,861
All PAs Submitted ⁵

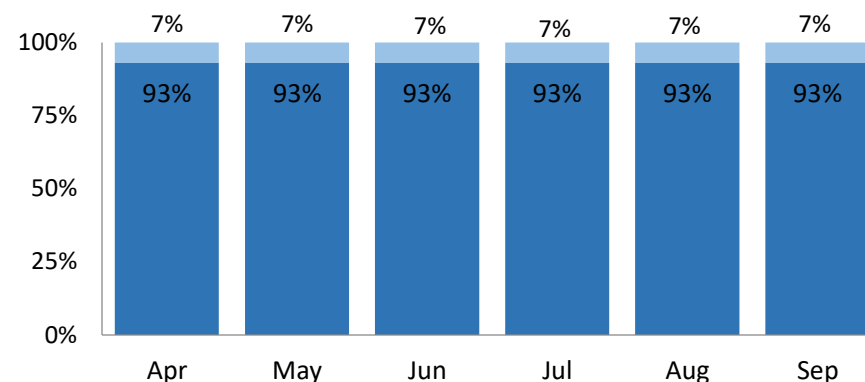
Non-Pharmacy

July Aug Sept

	July	Aug	Sept
Standard Prior Authorizations (PAs)			
Approved	17,052	17,526	17,564
Denied	1,274	1,303	1,247
Modified	1	0	0
Average Days to Process	4	4	4
Standard PAs Completed in 14-days (Requirement 99%)	100%	100%	100%
Expedited PAs Completed in 72-hours (Requirement 99%)	98%	98%	99%

Non-Pharmacy by Percentage

■ Approved ■ Modified ■ Denied



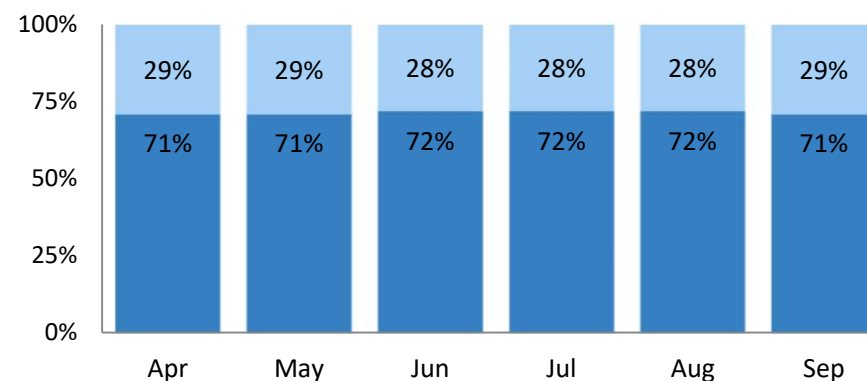
Pharmacy

July Aug Sept

	July	Aug	Sept
Prior Authorizations			
Approved	5,718	6,198	5,980
Denied	2,216	2,356	2,402
PAs Completed in 24-hours (Requirement 100%)	100%	99.9%	99.9%

Pharmacy by Percentage

■ Approved ■ Denied



⁵ Totals capture all standard non-pharmacy and pharmacy PA counts. In addition to approved, denied, or modified the submitted totals will also include PA's received, but not yet processed.

Prior Authorization Summary



90,298
All PAs Submitted ⁵

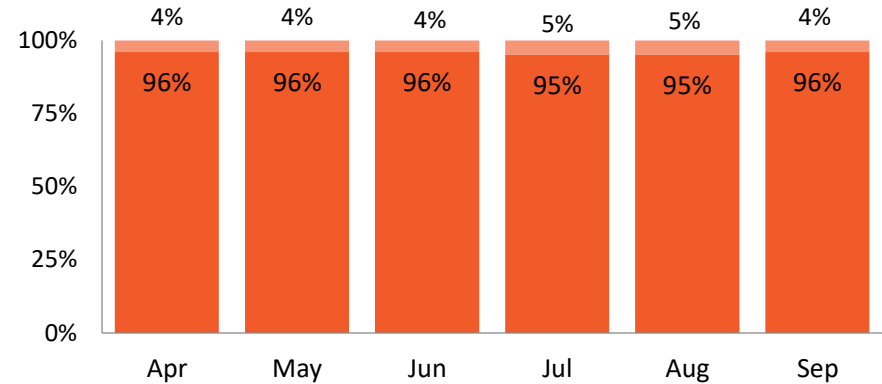
Non-Pharmacy

July Aug Sept

Standard Prior Authorizations (PAs)			
Approved	21,629	24,009	23,141
Denied	1,061	1,283	1,062
Modified	0	0	0
Average Days to Process	5	4	5
Standard PAs Completed in 14-days (Requirement 99%)	100%	100%	100%
Expedited PAs Completed in 72-hours (Requirement 99%)	100%	100%	99%

Non-Pharmacy by Percentage

Approved Modified Denied



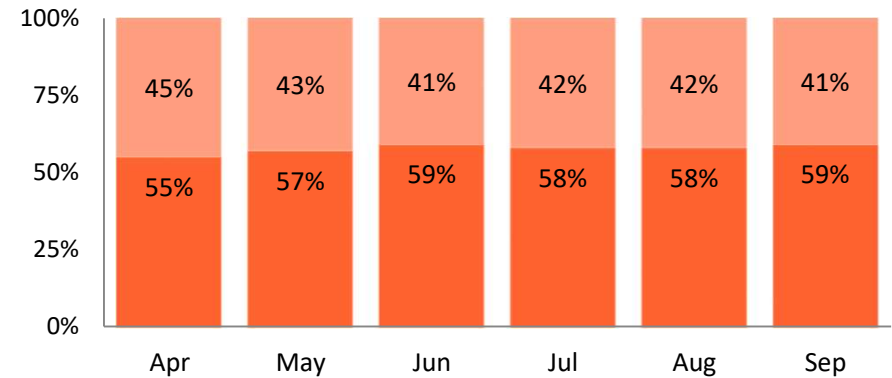
Pharmacy

July Aug Sept

Prior Authorizations			
Approved	3,144	3,400	3,150
Denied	2,242	2,452	2,153
PAs Completed in 24-hours (Requirement 100%)	99.8%	99.3%	99.9%

Pharmacy by Percentage

Approved Denied



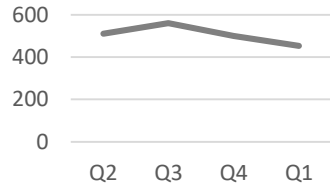
⁵ Totals capture all standard non-pharmacy and pharmacy PA counts. In addition to approved, denied, or modified the submitted totals will also include PA's received, but not yet processed.

Grievances and Appeals



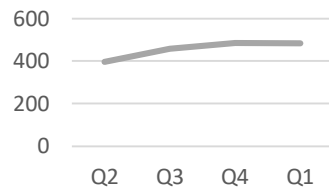
Standard Grievances

453



Standard Appeals

483

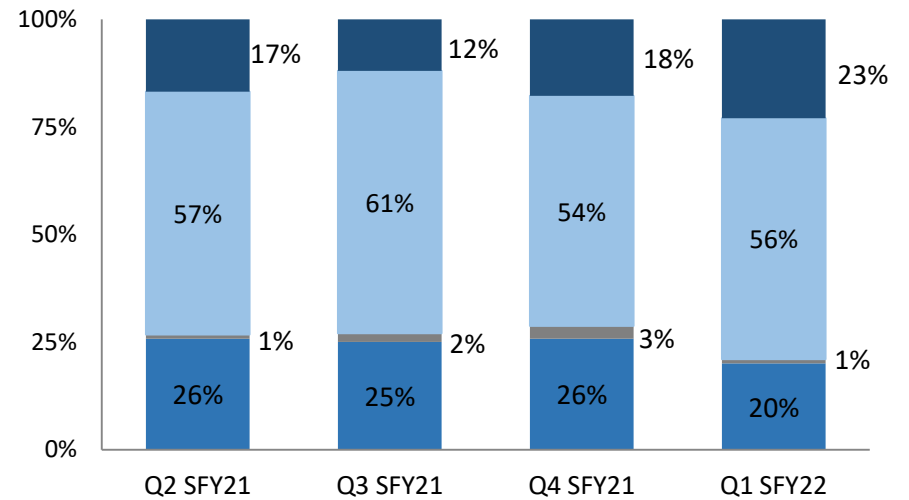


Resolved in 30-days
100%

Resolved in 30-days
100%



Standard Appeal Outcome %



Top 10 Reasons for Grievances ⁶

	%	Reason
1.	46%	Voluntary disenrollment
2.	15%	Provider balance billed
3.	6%	Transportation - Driver delay
4.	6%	Poor Customer Service
5.	5%	Transportation - Driver no-show
6.	5%	Treatment dissatisfaction
7.	4%	Provider dissatisfaction
8.	2%	Inadequate benefit access
9.	2%	Provider attitude/rudeness
10.	2%	Delay in obtaining Authorization/Referral

Top 10 Reasons for Appeals ⁶

	%	Reason
	22%	DME
	20%	Pharmacy - Non Injectable
	11%	Radiology
	9%	Pharmacy - Injectable
	6%	BH - Op Service
	6%	Surgery
	5%	Inpatient - Medical
	4%	Therapy - PT
	3%	Anesthesia for Dental Surgery
	3%	Outpatient Services - Medical

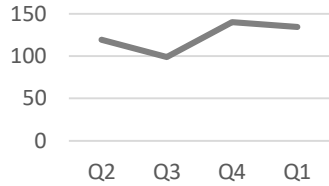
⁶ Top 10 reasons for grievances and appeals includes both standard and expedited counts. All percentages listed are based on quarterly totals.

Grievances and Appeals



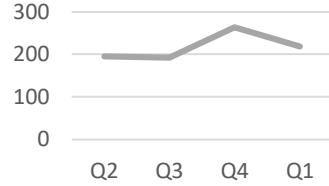
Standard Grievances

134



Standard Appeals

218

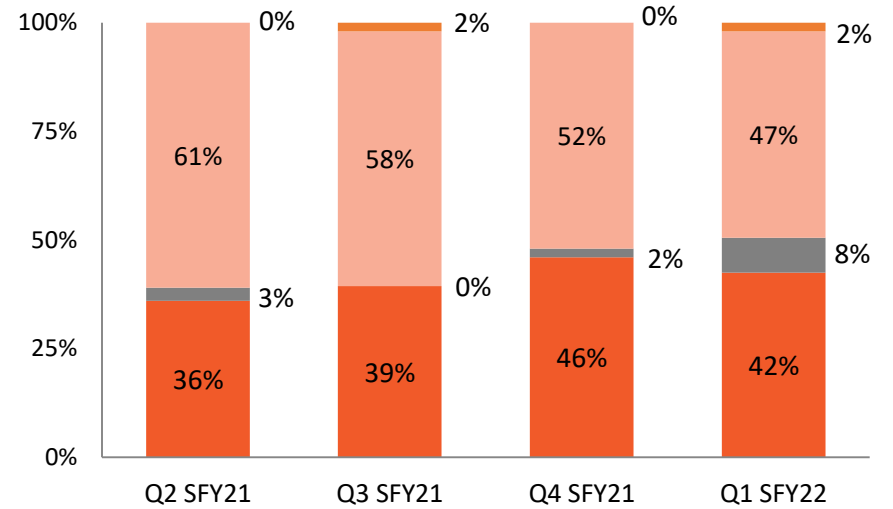


Resolved in 30-days
100%

Resolved in 30-days
100%

■ Withdrawn ■ Upheld
■ Partially Overturned ■ Overturned

Standard Appeal Outcome %



Top 10 Reasons for Grievances ⁶

	%	Reason
1.	15%	Unhappy with Benefits
2.	11%	Access to Care - Network Availability
3.	10%	Transportation - Missed Appointment
4.	9%	Transportation - General Complaint Vendor
5.	8%	Transportation - Late Appointment
6.	7%	Transportation - Driver no-show
7.	4%	Provider Staff
8.	4%	Provider
9.	3%	Transportation - Unsafe Driving
10.	3%	Lack of Caring/Concern

Top 10 Reasons for Appeals ⁶

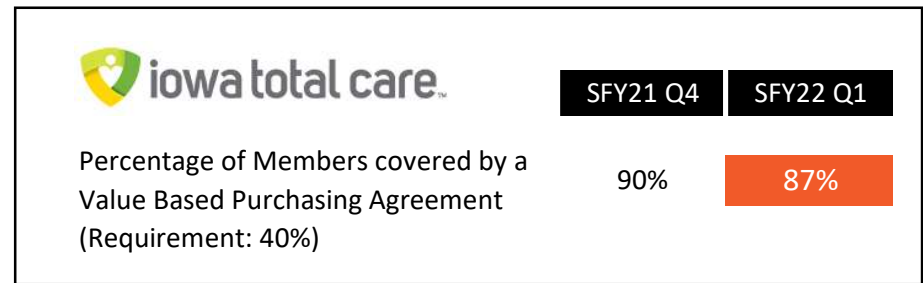
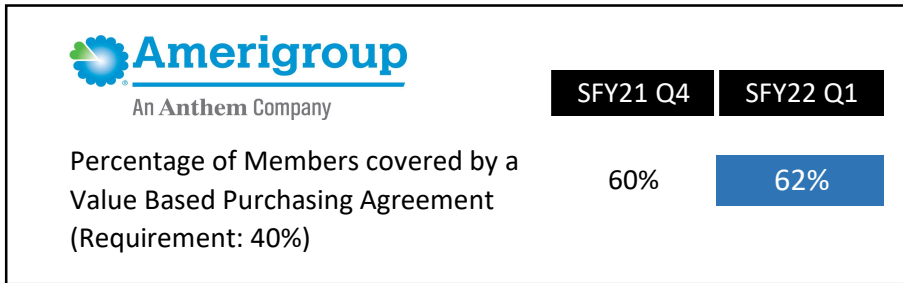
	%	Reason
	33%	RX - Does Not Meet PriorAuth Guidelines
	9%	Diagnostic - MRI
	7%	Other - Mental Health Service
	5%	Vendor Related - HomeCare
	4%	Outpatient - Home Health Visits
	3%	Injection - Self Injectables
	3%	Special Services - PainManagement
	3%	DME - Insulin Pump
	3%	DME - Other
	3%	Other - Self Injectable Medication

⁶ Top 10 reasons for grievances and appeals includes both standard and expedited counts. All percentages listed are based on quarterly totals.

MCO Care Quality and Outcomes

Value Based Purchasing (VBP) Agreement

Value Based Purchasing (VBP) Agreement: An agreement that holds health care providers accountable for both the cost and quality of care they provide by providing payment to improved performance.



Top 5 - Value Added Services (VAS)

Value Added Services (VAS) are optional benefits provided by the MCOs outside of the standard Medicaid benefit package. MCOs use value added services as an incentive to attract members to their plan. A complete listing by each MCO can also be found here:

<https://dhs.iowa.gov/sites/default/files/Comm504.pdf>

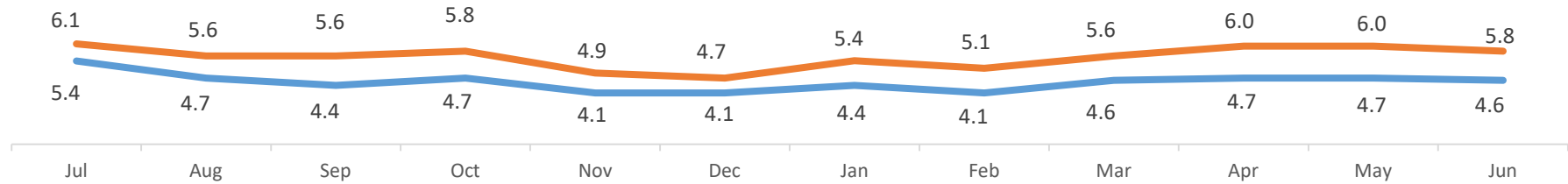
	SFY21 Q4	SFY22 Q1
Healthy Rewards	4,466	3,613
Taking Care of Baby and Me	1,514	2,310
Community Resource Link	1,007	2,046
Exercise Kit	402	662
SafeLink Mobile Phone	447	558

	SFY21 Q4	SFY22 Q1
My Health Pays Program	10,387	14,419
Start Smart for Your Baby	1,445	1,431
Mobile App	933	834
The Flu Program	974	759
Healthy Celebration Days	-	757

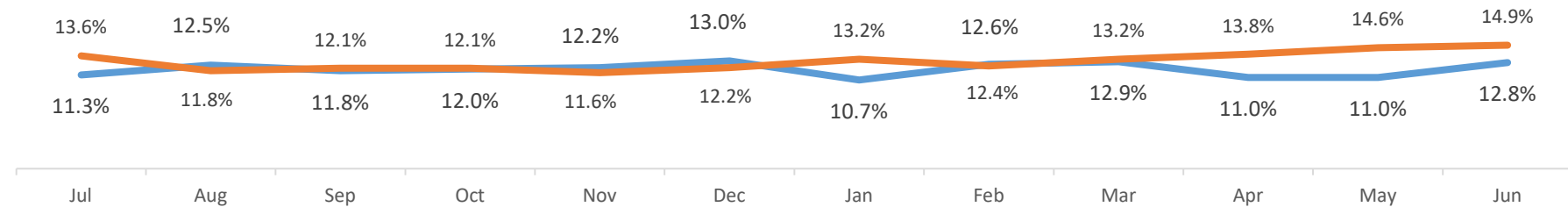
MCO Care Quality and Outcomes



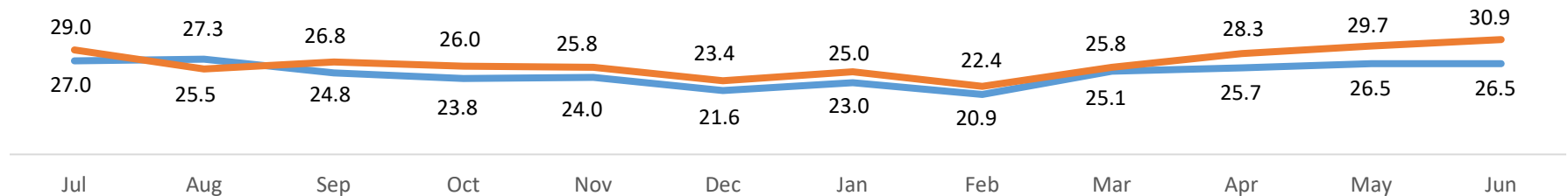
Inpatient Admissions per 1,000 Members per Month (90-day lag)



All Cause Readmissions within 30-days (90-day lag)⁷



Adult Non-Emergent Use Per 1,000 ED Visits (90-day lag)⁸



⁷ This measure requires 12 months of continuous enrollment with the MCO. Q2 SFY2021 is the first quarter that ITC is reporting data.

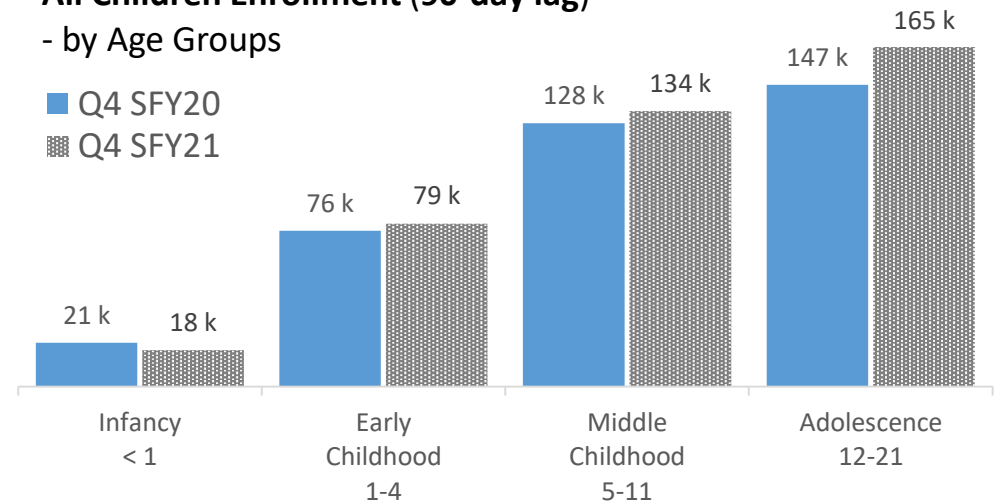
⁸ Effective January 1, 2020, the list of emergent diagnosis codes used to determine this measure was updated.

MCO Children Summary

Medicaid-eligible children either qualify for Traditional Medicaid or CHIP (Children’s Health Insurance Program). Which eligibility group children qualify for is based on household income status and other factors. In Iowa, CHIP is offered through the Healthy and Well Kids in Iowa (Hawki) program or M-CHIP (Medicaid expansion for kids).

Children (ages 0-21) make up over half of the enrolled MCO population. Of this population, 80% of children are Traditional Medicaid eligible. 20% of MCO enrolled children are CHIP eligible (Hawki/M-CHIP).

All Children Enrollment (90-day lag) - by Age Groups



SFY20 Q4 SFY21 Q4

Member Enrollment	223,742	236,807
Infancy < 1	11,082	9,176
Early Childhood 1 - 4	46,773	47,242
Middle Childhood 5 - 11	77,497	80,950
Adolescence 12 - 21	88,390	99,439
Well Child Exams (Preventive Visits)	29,958	36,804
Infancy < 1	10,935	11,392
Early Childhood 1 - 4	10,483	11,986
Middle Childhood 5 - 11	4,865	7,078
Adolescence 12 - 21	3,675	6,348
Lead Screenings	3,629	4,651
Infancy < 1	77	136
Early Childhood 1 - 4	3,346	4,174
Middle Childhood 5 - 11	190	295
Adolescence 12 - 21	16	46



SFY20 Q4 SFY21 Q4

Member Enrollment	147,722	158,536
Infancy < 1	10,164	8,480
Early Childhood 1 - 4	28,862	31,936
Middle Childhood 5 - 11	50,530	52,915
Adolescence 12 - 21	58,166	65,205
Well Child Exams (Preventive Visits)	22,277	29,353
Infancy < 1	10,728	11,207
Early Childhood 1 - 4	5,777	8,590
Middle Childhood 5 - 11	3,278	5,017
Adolescence 12 - 21	2,494	4,539
Lead Screenings	2,092	3,612
Infancy < 1	55	139
Early Childhood 1 - 4	1,864	3,182
Middle Childhood 5 - 11	144	268
Adolescence 12 - 21	29	23

MCO Children Summary



SFY20 Q4 **SFY21 Q4**



SFY20 Q4 **SFY21 Q4**

Hearing Screenings	1,328	1,779
Infancy < 1	116	140
Early Childhood 1 - 4	646	810
Middle Childhood 5 - 11	404	556
Adolescence 12 - 21	162	273
Vision Screenings	708	1,565
Infancy < 1	11	34
Early Childhood 1 - 4	378	865
Middle Childhood 5 - 11	216	452
Adolescence 12 - 21	103	214
Vaccination Totals	44,636	63,672
COVID-19 Dose 1	0	8,969
COVID-19 Dose 2	0	7,447
COVID-19 Single-Dose	0	209
DTaP (Diphtheria, Tetanus, Pertussis)	9,080	9,377
Influenza (FLU)	814	778
HepA (Hepatitis A)	4,378	4,497
HepB (Hepatitis B)	860	882
Haemophilus Influenza Type B (Hib)	5,248	5,007
Human Papillomavirus (HPV)	1,787	2,653
Meningococcal ACWY (MenACWY)	1,518	2,476
Meningococcal B - (MenB)	605	994
MMR (Measles, Mumps, Rubella)	3,619	3,682
Pneumococcal (PCV13)	7,806	7,423
Pneumococcal (PPSV23)	37	56
Polio (IPV)	128	225
RV (Rotavirus)	4,816	4,811
Tetanus and diphtheria (Td)	44	31
TDAP (Tetanus, Diphtheria, Pertussis)	1,571	2,171
Varicella Virus Vaccine (VAR)	2,325	1,984

Hearing Screenings	799	1,226
Infancy < 1	107	121
Early Childhood 1 - 4	350	506
Middle Childhood 5 - 11	247	409
Adolescence 12 - 21	95	190
Vision Screenings	438	1,075
Infancy < 1	19	30
Early Childhood 1 - 4	245	587
Middle Childhood 5 - 11	133	349
Adolescence 12 - 21	41	109
Vaccination Totals	28,114	39,098
COVID-19 Dose 1	0	2,419
COVID-19 Dose 2	0	2,092
COVID-19 Single-Dose	0	48
DTaP (Diphtheria, Tetanus, Pertussis)	6,702	7,726
Influenza (FLU)	596	691
HepA (Hepatitis A)	2,274	3,312
HepB (Hepatitis B)	772	780
Haemophilus Influenza Type B (Hib)	1,234	1,285
Human Papillomavirus (HPV)	1,223	1,794
Meningococcal ACWY (MenACWY)	1,008	1,544
Meningococcal B - (MenB)	0	618
MMR (Measles, Mumps, Rubella)	1,843	2,765
Pneumococcal (PCV13)	5,868	6,439
Pneumococcal (PPSV23)	0	33
Polio (IPV)	139	142
RV (Rotavirus)	4,255	4,256
Tetanus and diphtheria (Td)	26	19
TDAP (Tetanus, Diphtheria, Pertussis)	1,114	1,417
Varicella Virus Vaccine (VAR)	1,060	1,718

Long Term Services - Care Quality and Outcomes

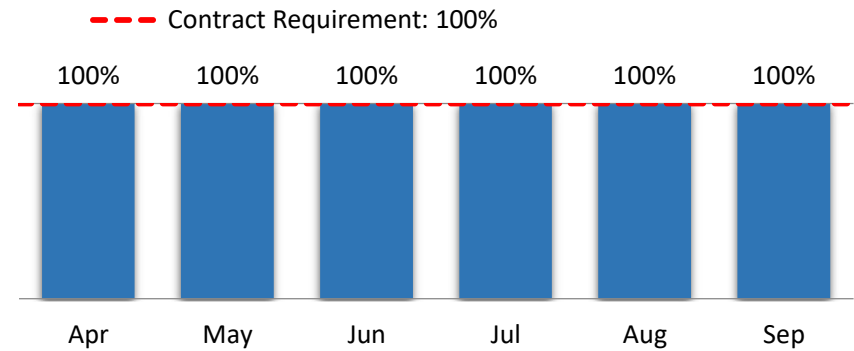
Non-LTSS Care Coordination and HCBS Case Management



Average Number of Contacts Per Month	SFY21 Q4	SFY22 Q1
by Care Coordinators	0.9	0.8
by Case Managers	1.2	1.2
"Members to" Ratios		
Members to Care Coordinators	34	27
HCBS Members to Case Managers	65	68

There are no current MCO contract standards for ratios of members to care coordinators or community based case managers. However, MCO contracts do state that members are to be visited in their residence face-to-face by their care coordinator at least quarterly with an interval of at least 60 days between visits.

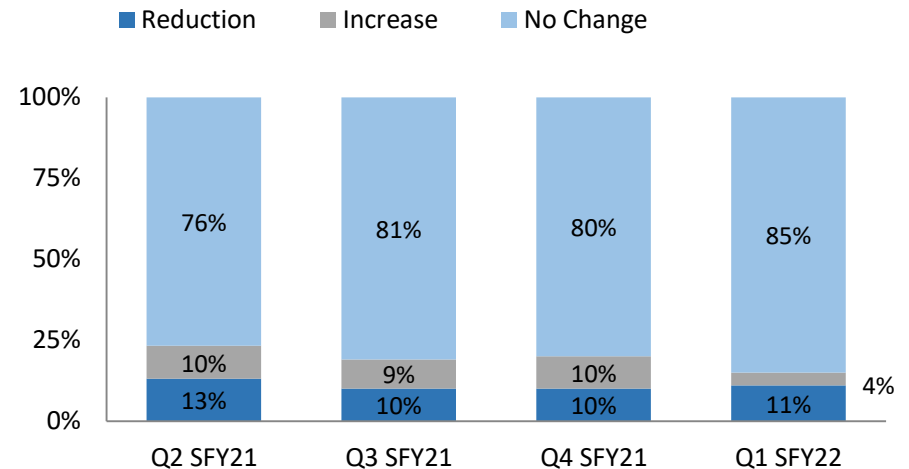
Percentage of Level of Care (LOC) Reassessments Completed Timely



Iowa Participant Experience Survey (IPES)

Waiver members reporting...		SFY21 Q4	SFY22 Q1
They were part of service planning.	I don't know	0.0%	0.0%
	No	0.0%	0.0%
	Sometimes	0.0%	0.0%
	Yes	100.0%	100.0%
They feel safe where they live.	I don't know	0.0%	0.0%
	No	0.0%	0.0%
	Sometimes	0.0%	0.0%
	Yes	100.0%	100.0%
Their services make their lives better.	I don't know	0.9%	0.5%
	No	0.3%	0.0%
	Sometimes	0.0%	0.0%
	Yes	98.8%	99.5%

Waiver Service Plan Outcomes



Long Term Services - Care Quality and Outcomes

Non-LTSS Care Coordination and HCBS Case Management



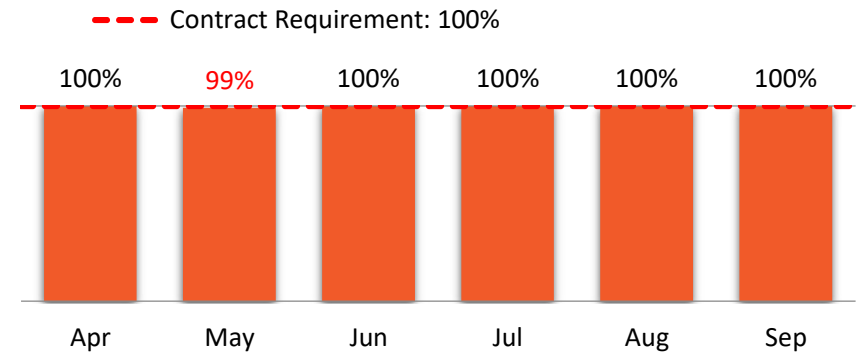
Average Number of Contacts Per Month	SFY21 Q4	SFY22 Q1
by Care Coordinators	0.8	0.8
by Case Managers	1.0	1.0
"Members to" Ratios		
Members to Care Coordinators	47	49
HCBS Members to Case Managers	41	44

MCO contracts also state that community based case managers shall contact HCBS waiver members either at least monthly in person or by telephone with an interval of at least 14 calendar days between contacts. All Level of Care (LOC) and functional need assessments must be updated annually or as a member's needs change

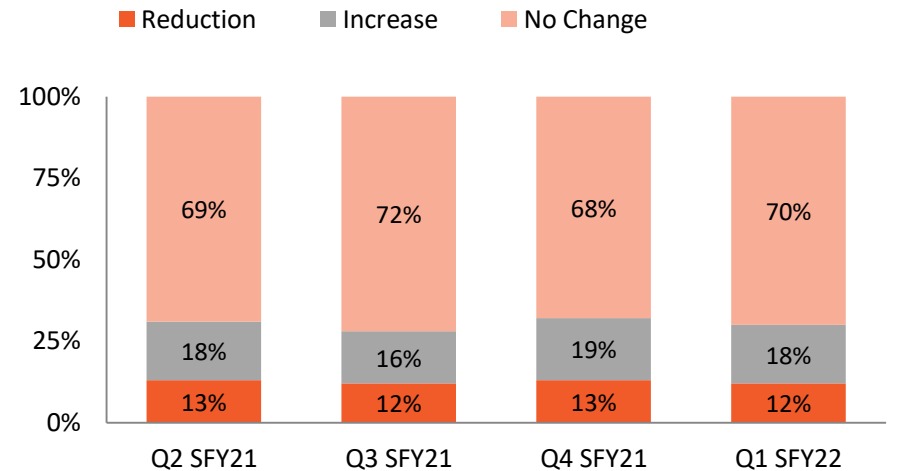
Iowa Participant Experience Survey (IPES)

Waiver members reporting...		SFY21 Q4	SFY22 Q1
They were part of service planning.	I don't know	0.0%	0.4%
	No	1.4%	0.8%
	Sometimes	0.4%	0.0%
	Yes	98.2%	98.9%
They feel safe where they live.	I don't know	0.0%	0.0%
	No	1.4%	0.8%
	Sometimes	0.4%	1.1%
	Yes	98.2%	98.1%
Their services make their lives better.	I don't know	0.0%	0.4%
	No	1.4%	0.4%
	Sometimes	0.7%	0.4%
	Yes	97.8%	98.9%

Percentage of Level of Care (LOC) Reassessments Completed Timely



Waiver Service Plan Outcomes



Long Term Services - Waiver Service Plan Participation

Home- and Community-Based Services (HCBS) programs are available for eligible members with disabilities or older lowans that would otherwise require care in a medical institution. The following information captures the Top 5 services used by members with active waiver service plans.

Top 5 Waiver Services

- by Member Usage



	SFY21 Q4	SFY22 Q1
AIDS/HIV - Unique Service Plans	19	20
Home Delivered Meals	15	14
CDAC (individual) by 15 minute units	3	0
CDAC (agency) by 15 minute units	3	0
Brain Injury (BI) Waivers	814	808
Financial Management Services	234	241
Supported Community Living (by unit)	178	187
Respite (by 15 minute units)	167	166
Personal Emergency Response	162	162
Supported Community Living (daily)	107	110
Children's Mental Health (CMH)	840	763
Respite (by 15 minute units)	415	408
Family and Community Support	218	223
Respite (Hos/NF) - 15 minute units	223	214
Respite (Resident Camp) by units	11	11
Respite (Resident Camp) by day	3	5
Elderly Waivers	4,637	4,581
Personal Emergency Response	2,920	2,895
Home Delivered Meals	2,903	2,884
CDAC (agency) by 15 minute units	461	392
Assisted Living Services	363	372
Personal Emergency Response (install)	285	302

	SFY21 Q4	SFY22 Q1
Habilitation (Hab)	4,498	4,346
Home-based Habilitation	3,870	3,921
Long Term Job Coaching	393	440
Day Habilitation (units by day)	373	402
Individual Supported Employment	165	181
Day Habilitation (by 15 minute units)	131	151
Health & Disability (HD)	1,384	1,375
Financial Management Services	353	385
Respite (by 15 minute units)	345	358
Personal Emergency Response	318	314
Home Delivered Meals	306	303
Respite (Hos/NF) - 15 minute units	66	73
Intellectual Disability (ID)	7,053	7,033
Supported Community Living (by unit)	1,785	1,810
Day Habilitation (units by day)	1,363	1,448
Financial Management Services	1,388	1,423
Supported Community Living (RCF)	1,249	1,411
Supported Community Living (daily)	1,242	1,207
Physical Disability (PD)	681	657
Personal Emergency Response	355	345
CDAC (agency) by 15 minute units	88	57
CDAC (individual) by 15 minute units	58	46
Home Delivered Meals	42	39
Financial Management Services	35	37

Long Term Services - Waiver Service Plan Participation

All eligible members receive service coordination and a customized individual service plan. For additional information on the HCBS waiver program to include wait list information and a full list of available services, reference: <http://dhs.iowa.gov/ime/members/medicaid-a-to-z/hcbs/waivers>.

Top 5 Waiver Services

- by Member Usage



	SFY21 Q4	SFY22 Q1		SFY21 Q4	SFY22 Q1
AIDS/HIV - Unique Service Plans	10	9	Habilitation (Hab)	2,353	2,300
Home Delivered Meals	7	7	Home-based Habilitation	1,906	1,951
CDAC (individual) by 15 minute units	4	4	Day Habilitation (by 15 minute units)	341	296
Homemaker (by 15 minute units)	2	1	Long Term Job Coaching	256	274
CDAC (agency) by 15 minute units	0	1	Day Habilitation (units by day)	276	249
Personal Emergency Response	0	1	Individual Supported Employment	140	148
Brain Injury (BI) Waivers	527	526	Health & Disability (HD)	639	616
Supported Community Living (by unit)	229	218	Respite (by 15 minute units)	286	277
Respite (by 15 minute units)	145	137	Home Delivered Meals	169	175
Personal Emergency Response	129	131	Personal Emergency Response	154	168
Supported Community Living (daily)	124	103	CDAC (agency) by 15 minute units	112	113
CDAC (agency) by 15 minute units	87	89	CDAC (individual) by 15 minute units	118	110
Children's Mental Health (CMH)	352	326	Intellectual Disability (ID)	4,488	4,494
Respite (by 15 minute units)	201	189	Supported Community Living (by unit)	1,854	1,856
Respite (Hos/NF) - 15 minute units	131	127	Day Habilitation (units by day)	1,673	1,669
Family and Community Support	102	97	Day Habilitation (by 15 minute units)	1,828	1,466
Mental Health Service	38	39	Supported Community Living (RCF)	1,325	1,330
Respite (Resident Camp) by days	1	5	Respite (by 15 minute units)	1,039	1,022
Elderly Waivers	3,285	3,237	Physical Disability (PD)	375	363
Personal Emergency Response	2,393	2,464	Personal Emergency Response	212	209
Home Delivered Meals	2,432	2,462	CDAC (agency) by 15 minute units	176	167
CDAC (agency) by 15 minute units	1,284	1,307	CDAC (individual) by 15 minute units	132	125
Homemaker (by 15 minute units)	830	812	Transportation (1-way trip)	41	41
CDAC (individual) by 15 minute units	695	649	Personal Emergency Response (install)	15	18

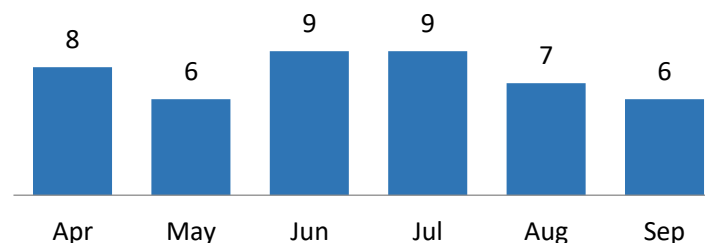
Call Center Performance Metrics



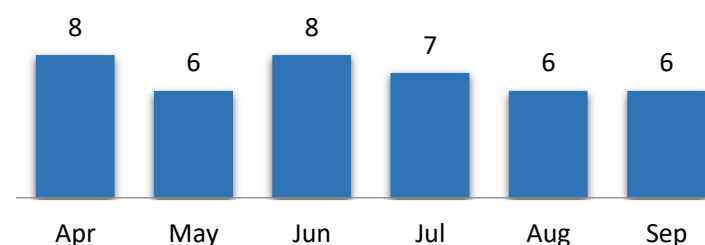
	July	Aug	Sept
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	July	Aug	Sept
Member Helpline			
Service Level (Requirement 80%)	91.84%	88.86%	94.88%
Abandonment Rate - Must be 5% or less	1.16%	1.08%	0.54%
Member Pharmacy Helpline			
Service Level (Requirement 80%)	91.66%	89.11%	92.63%
Abandonment Rate - Must be 5% or less	0.51%	0.26%	0.55%
Provider Helpline			
Service Level (Requirement 80%)	85.32%	80.98%	89.92%
Abandonment Rate - Must be 5% or less	0.76%	0.78%	0.37%
Provider Pharmacy Helpline			
Service Level (Requirement 80%)	93.50%	92.17%	93.63%
Abandonment Rate - Must be 5% or less	0.10%	0.05%	0.00%
Non-Emergency Medical Transportation (NEMT) Helpline			
Service Level (Requirement 80%)	90.41%	79.64%	33.04%
Abandonment Rate - Must be 5% or less	1.53%	2.13%	16.33%

Secret Shopper Scores - Member Helpline



Secret Shopper Scores - Provider Helpline



Data Notes: Top 5 Call Reasons are captured during the last month of the reporting period.

Top 5 Call Reasons (Member Helpline)

- Benefit Inquiry
- ID Card Request or Inquiry
- Enrollment Information
- Claim Inquiry
- Transportation Inquiry

Top 5 Call Reasons (Provider Helpline)

- Benefit Inquiry
- Authorization Status
- Claim Status
- Claim Payment Question or Dispute
- Authorization New

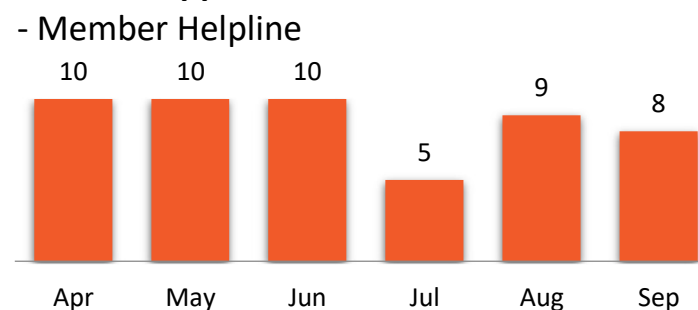
Call Center Performance Metrics



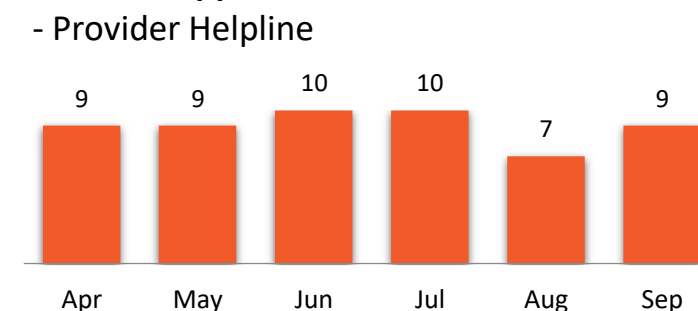
	July	Aug	Sept
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	July	Aug	Sept
Member Helpline			
Service Level (Requirement 80%)	82.81%	82.99%	84.44%
Abandonment Rate - Must be 5% or less	3.80%	3.96%	4.45%
Member Pharmacy Helpline			
Service Level (Requirement 80%)	89.58%	93.23%	82.64%
Abandonment Rate - Must be 5% or less	5.85%	2.77%	5.06%
Provider Helpline			
Service Level (Requirement 80%)	84.35%	81.79%	86.48%
Abandonment Rate - Must be 5% or less	2.84%	3.24%	3.70%
Provider Pharmacy Helpline			
Service Level (Requirement 80%)	87.19%	93.23%	94.11%
Abandonment Rate - Must be 5% or less	0.20%	0.00%	0.38%
Non-Emergency Medical Transportation (NEMT) Helpline			
Service Level (Requirement 80%)	93.37%	81.09%	29.41%
Abandonment Rate - Must be 5% or less	1.28%	1.95%	16.04%

Secret Shopper Scores - Member Helpline



Secret Shopper Scores - Provider Helpline



Data Notes: Top 5 Call Reasons are captured during the last month of the reporting period.

Top 5 Call Reasons (Member Helpline)

- Benefits and Eligibility for Member
- Update Address for Member
- Coordination Of Benefits for Member
- Update PCP/PPG for Member
- Member Rewards for Member

Top 5 Call Reasons (Provider Helpline)

- Medical Claims Inquiry for Provider
- Coordination Of Benefits for Provider
- Benefits and Eligibility for Provider
- Provider Outreach for Provider
- View Authorization for Provider

Provider Network Access Summary

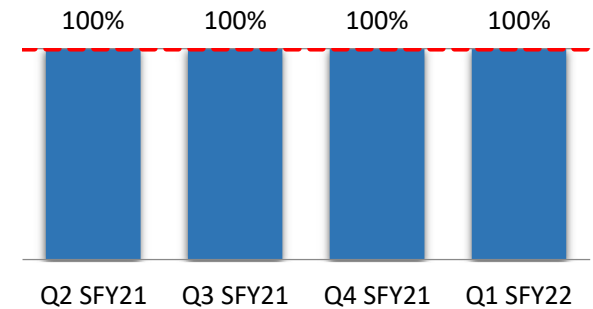


Primary Care Providers (PCP)

	SFY21 Q2	SFY21 Q3	SFY21 Q4	SFY22 Q1
Adults PCP				
Provider Count	6,641	6,672	6,632	6,589
Members with Access	210,795	219,428	224,574	228,637
Average Distance (Miles)	1.5	1.9	1.8	1.8
Pediatric PCP				
Provider Count	6,677	6,707	6,666	6,621
Members with Access	203,169	209,553	211,406	213,136
Average Distance (Miles)	1.6	2.0	2.0	2.0

Adult PCP - Standards 30 minutes or 30 miles

--- Contract Requirement: 100%

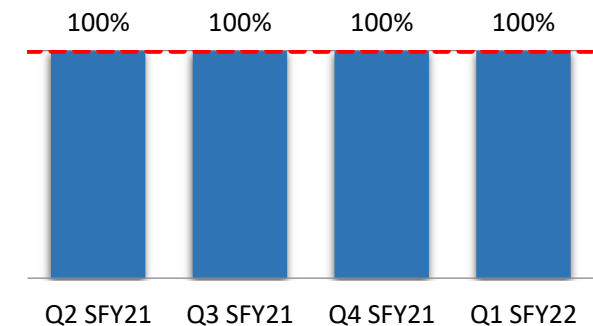


Specialty Care & Behavioral Health (BH)

	SFY21 Q2	SFY21 Q3	SFY21 Q4	SFY22 Q1
OB/GYN Adult				
Provider Count	399	403	402	401
Members with Access	137,341	142,865	146,051	148,670
Average Distance (Miles)	5.6	5.7	5.6	5.6
Outpatient - Behavioral Health				
Provider Count	4,043	4,137	4,205	4,305
Members with Access	413,964	428,981	435,980	441,773
Average Distance (Miles)	2.1	2.3	2.3	2.3
Inpatient - Behavioral Health				
Provider Count	48	48	50	50
Rural Members				
Members with Access	169,705	175,907	178,368	180,629
Average Distance (Miles)	21.6	21.4	21.4	21.4
Urban Members				
Members with Access	244,259	253,074	257,612	261,144
Average Distance (Miles)	5.7	5.8	5.8	5.8

Pediatric PCP - Standards 30 minutes or 30 miles

--- Contract Requirement: 100%



Link to Geo Access Reports:

<https://dhs.iowa.gov/ime/about/performance-data-geoaccess>

Provider Network Access Summary

Primary Care Providers (PCP)

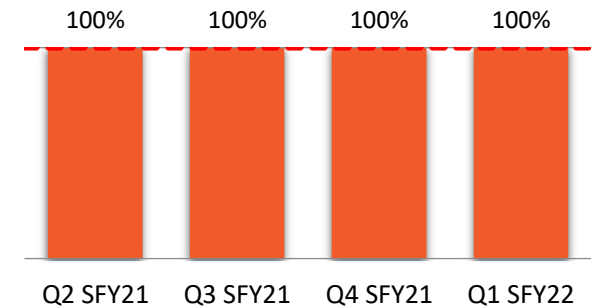
SFY21 Q2 SFY21 Q3 SFY21 Q4 SFY22 Q1

Adults PCP				
Provider Count	8,548	9,085	9,704	9,894
Members with Access	160,490	166,971	171,647	175,634
Average Distance (Miles)	2.0	2.0	2.0	2.0
Pediatric PCP				
Provider Count	9,262	9,820	10,472	10,658
Members with Access	136,490	138,828	140,406	141,050
Average Distance (Miles)	2.1	2.1	2.1	2.1



Adult PCP - Standards 30 minutes or 30 miles

--- Contract Requirement: 100%



Specialty Care &

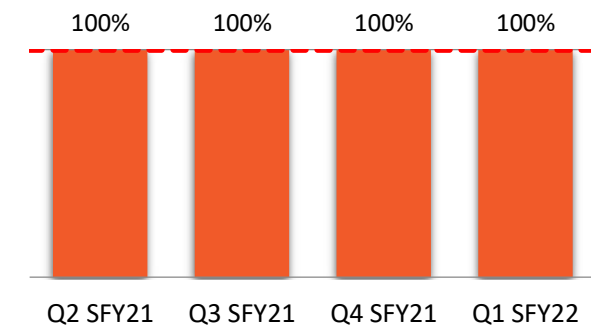
Behavioral Health (BH)

SFY21 Q2 SFY21 Q3 SFY21 Q4 SFY22 Q1

OB/GYN Adult				
Provider Count	1,207	1,234	1,286	1,298
Members with Access	106,694	110,381	113,317	115,394
Average Distance (Miles)	5.4	5.4	5.4	5.4
Outpatient - Behavioral Health				
Provider Count	8,251	8,737	9,476	9,688
Members with Access	296,980	305,799	312,053	316,684
Average Distance (Miles)	2.5	2.5	2.5	2.4
Inpatient - Behavioral Health				
Provider Count	35	36	36	36
Rural Members				
Members with Access	212,426	218,902	223,411	226,908
Average Distance (Miles)	24.7	24.6	24.6	24.6
Urban Members				
Members with Access	84,554	86,897	88,642	89,776
Average Distance (Miles)	8.4	8.4	8.4	8.4

Pediatric PCP - Standards 30 minutes or 30 miles

--- Contract Requirement: 100%



Link to Geo Access Reports:

<https://dhs.iowa.gov/ime/about/performance-data-geoaccess>

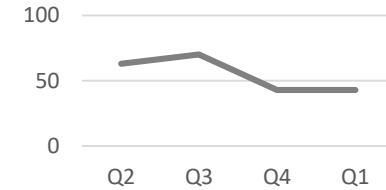
MCO Program Integrity

Program integrity (PI) encompasses a number of activities to ensure appropriate billing and payment. The main strategy for eliminating fraud, waste and abuse is to use state-of-the-art technology to eliminate inappropriate claims before they are processed. This pre-edit process is done through sophisticated billing systems, which have a series of edits that reject inaccurate or duplicate claims. Increased program integrity activities will be reported over time as more claims experience is accumulated by the MCOs, medical record reviews are completed, and investigations are closed.

The billing process generates the core information for program integrity activities. Claims payment and claims history provide information leading to the identification of potential fraud, waste, and abuse. Therefore MCO investigations, overpayment recovery, and referrals to MFCU listed in this chart would be considered pending until final determinations are made.

Total Investigations
Opened in SFY22 Q1

43



22 Total Cases
Referred to MCFU Q1



	SFY21 Q2	SFY21 Q3	SFY21 Q4	SFY22 Q1	Average	Total
Investigations opened	34	42	33	28	34	137
Overpayments identified	23	10	23	14	18	70
Member concerns referred to IME	3	4	2	2	3	11
Cases referred to the Medicaid Fraud Control Unit (MCFU)	6	2	6	6	5	20



	SFY21 Q2	SFY21 Q3	SFY21 Q4	SFY22 Q1	Average	Total
Investigations opened	29	28	10	15	21	82
Overpayments identified	1	0	6	12	5	19
Member concerns referred to IME	4	6	10	10	8	30
Cases referred to the Medicaid Fraud Control Unit (MCFU)	3	2	12	16	8	33

Appendix: Glossary

Abandonment Rate: Percentage of unanswered calls abandoned by the caller after 30 seconds of the call entering the queue. (E.g. caller hangs up before speaking to anyone after waiting more than 30 seconds in a queue.)

Administrative Loss Ratio (ALR): See Financial Ratios

Adult Day Care: An organized program of supportive care in a group environment. The care is provided to members who need a degree of supervision and assistance on a regular or intermittent basis in a day care setting.

All Cause Readmissions: This measure looks at the rate of provider visits within 30 days of discharge from an acute care hospital per 1,000 discharges among beneficiaries assigned.

AIDS/HIV Waiver: A HCBS waiver that offers services for those who have been diagnosed with AIDS or HIV.

Appeal: An appeal is a request for a review of an adverse benefit determination. A member or a member's authorized representative may request an appeal following a decision made by an MCO. Actions that a member may choose to appeal:

- Denial of or limits on a service.
- Reduction or termination of a service that had been authorized.
- Denial in whole or in part of payment for a service.
- Failure to provide services in a timely manner.
- Failure of the MCO to act within required time-frames.
- For a resident of a rural area with only one MCO, the denial of services outside the network

Members may file an appeal directly with the MCO. If the member is not happy with the outcome of the appeal, they may file an appeal with DHS or they may ask to ask for a state fair hearing.

Brain Injury (BI) Waiver: A HCBS waiver that offers services for those who have been diagnosed with a brain injury due to an accident or an illness.

Capitation Expenditures: Medicaid payments the Department makes on a monthly basis to the MCOs for member health coverage. MCOs are paid a set amount for each enrolled person assigned to that MCO, regardless of whether services are used that month. Capitated rate payments vary depending on the member's eligibility.

- **Adjustments:** Monetary only payments/adjustments that can occur within the paid month for same month or prior months
 - Example - Recoup and repay when rate changes occur
- **Current:** Payments that occur within the paid month for same month

Capitation Expenditures (continued...):

- **Retro:** Payments for months prior to the current month for member months not previously paid for
 - o Member months are counted if request is to provide member months within a specific date range for more than one month
 - o Data is not pulled by paid date, but by eligibility month

Care Coordinator: A person who helps manage the health of members with chronic health conditions.

Case Manager: See Community Based Case Management (CBCM)

Centers for Medicare and Medicaid Service (CMS): A federal agency that administers the Medicare program and works in partnership with state governments to administer Medicaid standards.

Children's Mental Health (CMH) Waiver: A HCBS waiver that offers services for children up to age 18, who have been diagnosed with a serious emotional disturbance.

Children's Health Insurance Program (CHIP): A federal program administered by state governments to provide health care coverage for children and families whose income is too high to qualify for Medicaid, but too low to afford individual or work-provided health care.

Claims: What providers submit to the MCOs or the Department in order to receive payment for services rendered.

- **Paid:** Claim is received and the provider is reimbursed for the service rendered
- **Denied:** Claim is received and services are not covered benefits, duplicate, or other substantial issues that prevent payment
- **Suspended:** Pending internal review for medical necessity and/or additional information must be submitted for processing
- **Run Out:** Additional time for providers to submit claims for services rendered
- **Provider Adjustment Requests and Errors Reprocessed:**
 - o Claims where the provider may request a reopening to fix clerical errors or billing errors
 - o Claims identified by the MCOs as erroneously paid or denied which are corrected

Clean Claims: The claim is on the appropriate form, identifies the service provider that provided service sufficiently to verify, if necessary, affiliation status, patient status and includes any identifying numbers and service codes necessary for processing.

Community: A natural setting where people live, learn, work, and socialize.

Community Based Case Management (CBCM): Helps LTSS members manage complex health care needs. It includes planning, facilitating and advocating to meet the member's needs. It promotes high quality care and cost effective outcomes. CBCMs make sure that the member's care plan is carried out. They make updates to the care plan as needed.

Consumer Directed Attendant Care (CDAC): Helps people do things that they normally would for themselves if they were able. CDAC services may include unskilled tasks such as bathing, grocery shopping, household chores or skilled tasks such as medication management, tube feeding, recording vital signs. CDAC providers are available through an agency or from an individual such as a family member, friend, or neighbor that meets eligibility requirements.

Denied Claims: See Claims

Department of Human Services (DHS): The state's health and social services agency.

Disabled: Group descriptions include: Age Blind Disabled (ABD), Residential Care Facility (RFC), Nursing Facility (NF), Hospice, Skilled Nursing Facility (SNF), Intermediate Care Facility (ICF), State Mental Health Hospital, and Children in Psychiatric Mental Institutions (PMIC).

Disenrollment: Refers to members who have chosen to change their enrollment with one MCO to an alternate MCO.

Dual: Members who have both Medicare and Medicaid benefits.

Durable Medical Equipment (DME): Reusable medical equipment for use in the home. It is rented or owned by the member and ordered by a provider.

Elderly Waiver: A HCBS waiver that offers services for elderly persons. An applicant must be at least 65 years of age.

Financial Ratios: The Affordable Care Act requires insurance companies to spend at least 80% or 85% of premium dollars on medical care. In Iowa, the Medical Loss Ratio (MLR) for MCOs is contractually set at 88%.

- **Administrative Loss Ratio (ALR):** The percent of capitated rate payments an MCO spends on administrative costs.
- **Medical Loss Ratio (MLR):** The percent of capitated rate payments an MCO spends on claims and expenses that improve health care quality of Medicaid members.
- **Underwriting Ratio (UR):** If total expenses exceed capitated rate payments, an underwriting loss occurs. If total capitated rate payments exceed total expenses, an underwriting profit occurs.

Grievance: Members have the right to file a grievance with their MCO. A grievance is an expression of dissatisfaction about any matter other than a decision. The member, the member's representative or provider who is acting on their behalf and has the member's written consent may file a grievance. The grievance must be filed within 30 calendar days from the date the matter occurred. Examples include but are not limited to:

- Member is unhappy with the quality of your care
- Doctor who the member wants to see is not in the MCO's network
- Member is not able to receive culturally competent care
- Member got a bill from a provider for a service that should be covered by the MCO

Grievance (continued...):

- Rights and dignity
- Member is commended changes in policies and services
- Any other access to care issues

Habilitation (Hab) Services: A program that provides HCBS for lowans with the functional impairments typically associated with chronic mental illnesses.

Health & Disability (HD) Waiver: A HCBS waiver that offers services for those persons who are blind or disabled. An applicant must be less than 65 years of age for this waiver.

Healthy and Well Kids in Iowa (Hawki): In Iowa, CHIP is offered through the Hawki program. Hawki offers health coverage, through a MCO, for uninsured children of working families. A family who qualifies for Hawki may have to pay a monthly premium.

Home Delivered Meals: Meals that are prepared outside of the member's home and delivered to the member.

Home Health Aide: Medical services that provide direct personal care. This may include assistance with oral medications, eating, bathing, dressing, personal hygiene, accompanying member to medical services, transporting member to and from school or medical appointments, and other necessary activities of daily living that is intended to prevent or postpone institutionalization.

Homemaker Services: Services provided when the member lives alone or when the person who usually performs these functions for the member needs assistance. Homemaker service is limited to essential shopping, limited house cleaning, and meal preparation.

Home and Community Based Services (HCBS): Types of person-centered care delivered in the home and community. A variety of health and human services can be provided. HCBS programs address the needs of people with functional limitations who need assistance with everyday activities, like getting dressed or bathing. HCBS are often designed to enable people to stay in their homes, rather than moving to a facility for care.

Inpatient Admissions: A member has formally been admitted to a hospital to receive care.

Intellectual Disability (ID) Waiver: A HCBS waiver that offers services for persons who have been diagnosed with an intellectual disability.

Intermediate Care Facilities for the Intellectually Disabled (ICF/ID): The ICF/IID benefit is an optional Medicaid benefit. The Social Security Act created this benefit to fund "institutions" (4 or more beds) for individuals with intellectual disabilities, and specifies that these institutions must provide "active treatment," as defined by the Secretary. Currently, all 50 States have at least one ICF/IID facility. This program serves over 100,000 individuals with intellectual disabilities and other related conditions. Most have other disabilities as well as intellectual disabilities. Many of the individuals are non-ambulatory, have seizure disorders, behavior problems, mental illness, visual or hearing impairments, or a combination of the above. All must qualify for Medicaid assistance financially.

Iowa Health and Wellness Plan (IHAWP): The Iowa Health and Wellness Plan covers Iowans, ages 19-64, with incomes up to and including 133 percent of the Federal Poverty Level (FPL). The plan provides a comprehensive benefit package and is part of Iowa's implementation of the Affordable Care Act or Medicaid expansion.

Iowa Insurance Division (IID): The state regulator which supervises all insurance business transacted in the state of Iowa.

Iowa Medicaid Enterprise (IME): The division of DHS that administers the Iowa Medicaid Program.

Iowa Participant Experience Survey (IPES): A survey tool developed for use with HCBS programs that asks members about the services they receive, and where the service is provided.

Level of Care (LOC): Members asking for HCBS waivers or facility care must meet Level of Care criteria. These must be consistent with people living in a care facility such as a nursing facility. Level of Care is determined by an assessment approved by DHS.

Long Term Services and Supports (LTSS): Medical and/or personal care and supportive services needed by individuals who have lost some capacity to perform activities of daily living, such as bathing, dressing, eating, transfers, and toileting, and/or activities that are essential to daily living, such as housework, preparing meals, taking medications, shopping, and managing money.

M-CHIP: Refers to Medicaid CHIP, or Medicaid expansion. M-CHIP provides coverage to children ages 6-18 whose family income is between 122 and 167 percent of the Federal Poverty Level (FPL), and infants whose family income is between 240 and 375 percent of the FPL.

Managed Care Organization (MCO): A health plan contracted with DHS to provide Iowa Medicaid members with comprehensive health care services, including physical health, behavioral health, and LTSS.

Medicaid: Provides medically necessary health care coverage for financially needy adults, children, parents with children, people with disabilities, elderly people and pregnant women. Also known as Title XIX under the Social Security Act.

Medicaid Expansion: See Iowa Health and Wellness Plan (IHAWP) and/or M-CHIP

Medicaid Fraud Control Unit (MFCU): A division within the Iowa Department of Inspections & Appeals whose primary goal is to prevent abuse of taxpayer resources through professional investigation of criminal activity. MFCU staffs experienced criminal investigators, auditors, and attorneys to achieve this goal.

Medical Loss Ratio (MLR): See Financial Ratios

Mental Health Institute (MHI): Provide short term psychiatric treatment and care for severe symptoms of mental illness. Iowa has two MHIs located in **Cherokee** and **Independence**. The services at each MHI vary.

Monthly Capitation Expenditures: See Capitation Expenditures

Nursing Facility (NF): Provide 24-hour care for individuals who need nursing or skilled nursing care.

Non-Emergent Use: Illnesses or injuries that are generally not life-threatening and do not need immediate treatment at an Emergency Department.

Non-Emergency Medical Transportation (NEMT): Services are for members with full Medicaid benefits, who need travel reimbursement or a ride to get to their medical appointments.

Physical Disability (PD) Waiver: A HCBS waiver that offers services for persons who are physically disabled. An applicant must be at least 18 years of age, but less than 65 years of age.

Prior Authorization (PA): Some services or prescriptions require approval from the MCO for them to be covered. This must be done before the member gets that service or fills that prescription. Prior Authorizations for pharmaceuticals are becoming more complex and may require more specific data for approval.

Primary Care Provider (PCP): A physician, a physician assistant or nurse practitioner, who directly provides or coordinates member health care services. A PCP is the main provider the member will see for checkups, health concerns, health screenings, and specialist referrals.

Program Integrity (PI): Program Integrity (PI) is charged with reducing fraud, waste and abuse in the Iowa Medicaid program.

Provider Adjustment Requests and Errors Reprocessed: See Claims

Provider Network Access: Each MCO has a network of providers across Iowa who their members may see for care. Members don't need to call their MCO before seeing one of these providers. Before getting services from providers, members should show their ID card to ensure they are in the MCO network. There may be times when a member needs to get services outside of the MCO network. If a needed and covered service is not available in-network, it may be covered out-of-network at no greater cost to the member than if provided in-network.

Psychiatric Medical Institute for Children (PMIC): Institutions which provide more than 24-hours of continuous care involving long-term psychiatric services to three or more children in residence. The expected periods of stay for diagnosis and evaluation are fourteen days or more and for treatment the expected period of stay is 90-days or more.

Reported Reserves: Refer to an MCO's ability to pay their bills and the amount of cash they have on hand to do so.

Service Level (SL): In relation to call centers, service level is defined as the percentage of calls answered within a predefined amount of time.

Service Plan: Plan of services for HCBS members. A member's service plan is based on the member's needs and goals. It is created by the member and their interdisciplinary team to meet HCBS Waiver criteria.

Skilled Nursing Care: See Nursing Facility

Suspended Claims: See Claims

Temporary Assistance for Needy Families (TANF) Adult and Child: A program to help needy families achieve self-sufficiency.

Third-Party Liability (TPL) Recovered: Third party payments include recoveries from health insurance coverage, settlements or court awards for casualty/tort (accident) claims, product liability claims (global settlements), medical malpractice, worker's compensation claims, etc. This means all other available TPL resources must meet their legal obligation to pay claims for the care of an individual eligible for Medicaid. By law, Medicaid is generally the payer of last resort, meaning that Medicaid only pays claims for covered items and services if there are no other liable payers.

Underwriting Ratio (UR): See Financial Ratios

Value Added Services (VAS): Optional benefits provided by the MCOs outside of the standard Medicaid benefit package. MCOs use value added services as an incentive to attract members to their plan. The following VAS examples, captured from each MCO's handbook, provide a description of their most active services offered. A complete listing by each MCO can also be found here:

<https://dhs.iowa.gov/sites/default/files/Comm504.pdf>

- **Taking Care of Baby and Me® (AGP):** It's very important to see your primary care provider (PCP), obstetrician or gynecologist (OB/GYN) for care when you're pregnant. This kind of care is called prenatal care. It can help you have a healthy baby. Prenatal care is always important even if you've already had a baby. With our program, members receive health information and rewards for getting prenatal and postpartum care.
- **My Health Pays (ITC):** This program rewards members who engage in healthy behaviors with predetermined nominal dollar amounts. Members who complete plan determined healthy behaviors will receive a reloadable Visa card. This Visa card can only be used at participating retailers, such as Walmart and for additional options such as transportation, utilities, phone bills, education costs, child care and rent. This card does not allow for the purchase of tobacco, firearms, or alcohol. In addition to this, members may utilize this card for medical cost share. Should a member incur a copay for a non-emergent emergency department visit, they may use the card to pay for this copay.

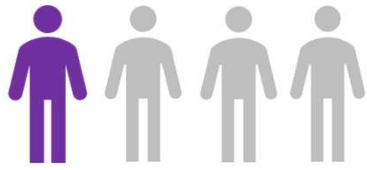
Value Based Purchasing (VBP) Agreement: An agreement that holds health care providers accountable for both the cost and quality of care they provide by providing payment to improved performance.

Waivers: See Home and Community Based Services (HCBS) or reference by individual waiver descriptions (Elderly, Physical Disability, Health and Disability, AIDS/HIV, Brain Injury, Intellectual Disability, or Children's Mental Health)

Waiver Service Plan: See Service Plan

Iowa Medicaid Infographic - SFY2021 Member Enrollment

Medicaid eligibility is not the same as Medicare.



1 in 4 Iowans

As of June 2021, 25% of Iowa's population was enrolled in a covered Medicaid program. Iowa Medicaid provides medically necessary health care coverage for financially needy adults, children, parents with children, people with disabilities, older Iowans, and pregnant women to help them live healthy, stable, and self-sufficient lives.

Member Enrollment

798K as of June 2021

837K Distinct Count - All of SFY21

**Enrollment totals listed exclude 9,143 members enrolled in dental only benefits.*

31% of all distinct count members reside in 3 counties (Polk, Linn, and Scott).

Nearly 1 in 2 Children in Iowa are served by Medicaid.



Iowa Medicaid Infographic - SFY2021 Program Overview



Traditional Medicaid

497K
Members

- \$4.36 Billion or \$9,199 Per Member (Federal & State Cost)
 - Avg. FMAP: 67.81%
 - State Estimate: \$1.41B
- Includes Children, Adults, Older Iowans, and/or Disabled Persons
- Unless otherwise noted may include other member focused programs (Medicare Dual Eligibility, MEPD, HIPP, Family Planning, PACE, American Indian)
- Facility & Home-Community Based Services available to eligible members

Medicaid is a joint Federal and State program where States are responsible for their own plan administration. Traditional Medicaid, Medicaid Expansion, and CHIP are the core Medicaid programs. Each State has some flexibility with how they operate their own variety of programs, criteria for enrollment eligibility, or even the services and benefits offered.



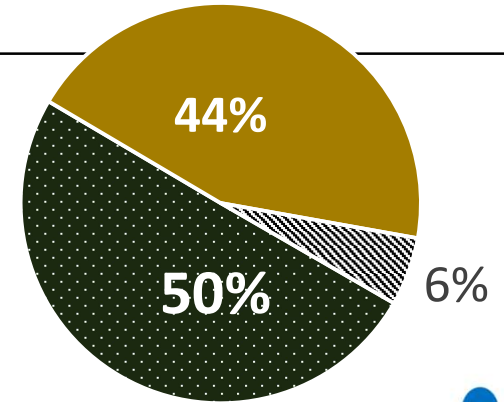
Iowa Health & Wellness Plan (IHAWP)

227K
Members

- \$1.42 Billion or \$6,121 Per Member (Federal & State Cost)
 - Avg. FMAP: 86.37%
 - State Estimate: \$193.8M
- Medicaid Expansion Program for Adults (ages 19-64)
- Iowa is 1 of 38 states that have adopted Medicaid Expansion

All Programs (by Age)

- 0-21
- 22-64
- 65+



Children's Health Insurance Program (CHIP)



74K
Members

- \$165 Million or \$2,208 Per Member (Federal & State Cost)
 - Avg. eFMAP: 80.35%
 - State Estimate: \$32.4M
- Healthy and Well Kids in Iowa (Hawki) for ages 1-18; M-CHIP (Expansion) for ages 0-1 & 6-18

*Estimates include both medical/dental capitation plus paid FFS claims. FMAP is the Federal match while eFMAP is the enhanced Federal match for CHIP.

Iowa Medicaid Infographic - SFY2021 Managed Care Benefits & Services

Medicaid is not just for **Emergency Care**.

Iowa's Medicaid programs are very comparable to health insurance benefits offered by employers and in some cases can provide benefits not offered in the marketplace or even by Medicare. Benefits are subject to program eligibility, medical necessity, and may require a prior authorization



95%



Managed Care Program

In 2016, Iowa shifted most of its Medicaid population to the IA Health Link managed care program. Today, almost 95% of the Medicaid population is covered by a Managed Care Organization (MCO). Populations not covered by MCOs are provided coverage through the state's Fee-For-Service (FFS) program.



Medical Coverage

As of July 2019, members have the option of Amerigroup or Iowa Total Care to administer their medical and prescription plan coverage.

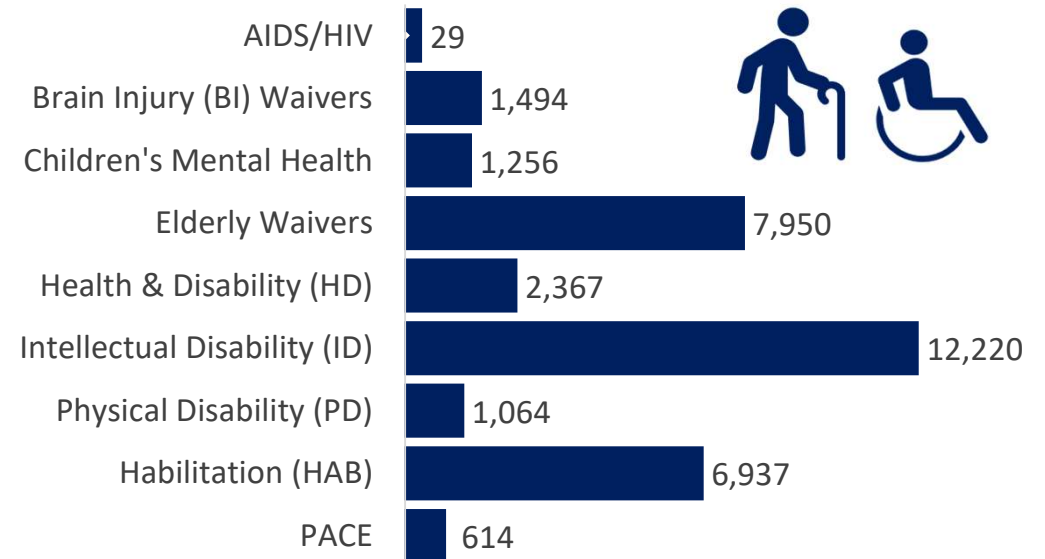


Dental Coverage

Delta Dental is the primary administrator for Hawki kids. Those eligible under Traditional Medicaid and IHAWP can use either Delta Dental or MCNA Dental.

Expanded HCBS Coverages

- Iowa currently has seven Home-and Community-Based Services (HCBS) Waivers that provide individualized support to maintain eligible members in their own homes or communities.
- A Habilitation program is available for eligible members with functional impairments typically associated with chronic mental illnesses.
- The Program of All Inclusive Care for the Elderly (PACE) combines medical, long-term care, and prescriptions to help frail and disabled individuals ages 55 and older in certain counties.



*Active MCO & FFS plans as of June 2021.

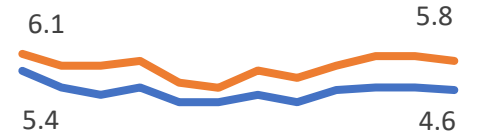
Iowa Medicaid Infographic - SFY2021 Quality and Outcome

Managed Care Overall claims between SFY20 & SFY21 increased by 2.14 million or 8.35%; prior authorizations decreased between by 36,710 or 4.89%; and the overall number of grievances decreased by 331 or 11.55%.

On September 12, 2021, the National Committee for Quality Assurance (NCQA) published their 2021 Health Plan Ratings. Amerigroup received an overall star rating of 4.0 out of 5.0 stars. ITC will not be rated until the next SFY.

Hospitalization Rates

Inpatient Admissions per 1,000 Members



All Cause Readmissions within 30-days



Adult Non-Emergent Use Per 1,000 ED Visits



FFS

Enrollment - All Members	438K	315K	44K
Claims Counts - All Paid & Denied (Rx & Non-Rx)	15.5M	12.3M	2.2M
Prior Authorization Summary (Rx & Non-Rx)	331K	383K	10K
Grievances & Appeals - Standard	3,896	1,353	n/a
% of Members using HCBS Waivers HCBS Waivers vs. Facility Based Services	68.8%	65.3%	80.9%
Waiver Members (Q4 Survey Results) Reporting their services make life better	98.8%	97.8%	100.0%