

INSPECTIONS AND APPEALS DEPARTMENT[481]

Adopted and Filed

Pursuant to the authority of Iowa Code sections 10A.104(5) and 135B.7, the Department of Inspections and Appeals hereby amends Chapter 51, “Hospitals,” Iowa Administrative Code.

The purpose of the adopted amendments is to add the Center for Improvement in Healthcare Quality (CIHQ) to the list of hospital accreditation organizations. Current rules specify three accreditation organizations: The Joint Commission, the American Osteopathic Association, and Det Norske Veritas. The CIHQ was recently approved by the federal Centers for Medicare and Medicaid Services (CMS) as a hospital accreditation organization.

The Department does not believe that the amendments impose any financial hardship on any regulated entity. Rather, the amendments simply add CIHQ to the existing list of hospital accreditation organizations.

Notice of Intended Action was published in the Iowa Administrative Bulletin on December 11, 2013, as **ARC 1230C**. No comments were received on the proposed amendments. The adopted amendments are identical to those published under Notice of Intended Action.

The amendments were presented to the Hospital Licensing Board at its October 24, 2013, meeting, at which time the Board approved them.

The State Board of Health initially reviewed the amendments at its November 13, 2013, meeting and subsequently approved this rule making at its January 8, 2014, meeting.

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

These amendments are intended to implement Iowa Code sections 10A.104(5) and 135B.7.

These amendments shall become effective March 12, 2014.

The following amendments are adopted.

ITEM 1. Amend subrules 51.2(5) and 51.2(6) as follows:

51.2(5) The department shall recognize, in lieu of its own licensure inspection, the comparable inspections and inspection findings of The Joint Commission (JC), the American Osteopathic Association (AOA), ~~or~~ Det Norske Veritas (DNV), or the Center for Improvement in Healthcare Quality (CIHQ) if the department is provided with copies of all requested materials relating to the inspection process. In cases of the initial licensure, the department may require its own inspection when needed in addition to comparable accreditations to allow the hospital to begin operations. The department may also initiate its own inspection when it is determined that the inspection findings of the JC, AOA, ~~or~~ DNV, or CIHQ are insufficient to address concerns identified as possible licensure issues.

51.2(6) Hospitals not accredited by the JC, AOA, ~~or~~ DNV, or CIHQ shall be inspected by the department utilizing the current Medicare conditions of participation found in Title XVIII of the federal Social Security Act and 42 CFR Part 482, Subparts A, B, C, D, and E, or 42 CFR Part 485, Subpart F, as of October 1, 2006. Licensed-only hospitals shall be inspected utilizing the requirements of this chapter. The department may promulgate additional standards. The department may recognize, in lieu of its own licensure inspection, the comparable inspection and inspection findings of a Medicare conditions of participation survey.

ITEM 2. Amend rule 481—51.6(135B), introductory paragraph, as follows:

481—51.6(135B) Patient rights and responsibilities. The hospital governing board shall adopt a statement of principles relating to patient rights and responsibilities. In developing a statement of principles, the hospital may use reference statements of patient rights and responsibilities developed by the American Hospital Association, The Joint Commission (JC), the American Osteopathic Association (AOA), Det Norske Veritas (DNV), the Center for Improvement in Healthcare Quality (CIHQ), and other appropriate sources.

ITEM 3. Amend subrule 51.53(7) as follows:

51.53(7) The department shall recognize, in lieu of its own inspection, the comparable inspections and inspections findings of The Joint Commission (JC), the American Osteopathic Association (AOA), ~~or Det Norske Veritas (DNV)~~, or the Center for Improvement in Healthcare Quality (CIHQ) if the department is provided with copies of all requested materials relating to the inspections and the inspection process.

[Filed 1/15/14, effective 3/12/14]

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EDITOR'S NOTE: For replacement pages for IAC, see IAC Supplement 2/5/14.