

## CORRECTIONS DEPARTMENT[201]

### Adopted and Filed

#### Rule making related to physician assistants

The Corrections Department hereby amends Chapter 45, “Parole,” Chapter 50, “Jail Facilities,” and Chapter 51, “Temporary Holding Facilities,” Iowa Administrative Code.

#### *Legal Authority for Rule Making*

This rule making is adopted under the authority provided in Iowa Code section 147.77 as enacted by 2022 Iowa Acts, House File 803, and section 904.108.

#### *State or Federal Law Implemented*

This rule making implements, in whole or in part, Iowa Code section 147.77 as enacted by 2022 Iowa Acts, House File 803.

#### *Purpose and Summary*

This rule making implements amendments enacted by 2022 Iowa Acts, House File 803. House File 803 directed the Department to add physician assistants to lists of health care workers who may perform various duties that are within their scope of practice.

#### *Public Comment and Changes to Rule Making*

Notice of Intended Action for this rule making was published in the Iowa Administrative Bulletin on October 19, 2022, as **ARC 6607C**. No public comments were received. No changes from the Notice have been made.

#### *Adoption of Rule Making*

This rule making was adopted by the Department on February 2, 2023.

#### *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 201—Chapter 7.

#### *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 March 29, 2023.

The following rule-making actions are adopted:

ITEM 1. Amend paragraph **45.2(1)“e”** as follows:

*e. Substance abuse.* The parolee shall not use, purchase, or possess alcoholic beverages and shall submit to alcohol tests and drug tests when directed by the parolee’s supervising officer. The parolee shall not enter taverns or liquor stores or other establishments where the primary activity is the sale of alcoholic beverages. The parolee will not use, ingest, inject, huff, possess or smoke any illegal or synthetic substances. The parolee shall not use, purchase, possess or transfer any drugs unless they are prescribed by a physician or physician assistant.

ITEM 2. Amend rule 201—50.15(356,356A) as follows:

**201—50.15(356,356A) Medical services.** The jail administrator shall establish a written policy and procedure to ensure that prisoners have the opportunity to receive necessary medical attention for the prisoners’ objectively serious medical and dental needs which are known to the jail staff. A serious medical need is one that has been diagnosed by a physician or physician assistant as requiring treatment or is one that is so obvious that even a lay person would easily recognize the necessity for a physician’s or physician assistant’s attention. The plan shall include a procedure for emergency care. Responsibility for the costs of medical services and products remains that of the prisoner. However, no prisoner will be denied necessary medical services, dental service, medicine or prostheses because of a lack of ability to pay. Medical and dental prostheses shall be provided only for the serious medical needs of the prisoner, as determined by a licensed health care professional. Cosmetic or elective procedures need not be provided.

**50.15(1) Medical resources.** Each jail shall have a designated licensed physician, licensed osteopathic physician, physician assistant or medical resource, such as a hospital or clinic staffed by licensed physicians, ~~or~~ licensed osteopathic physicians or physician assistants, designated for the medical supervision, care and treatment of prisoners as deemed necessary and appropriate. Medical resources shall be available on a 24-hour basis.

**50.15(2) to 50.15(6)** No change.

**50.15(7) Medication procedures.**

*a. to c.* No change.

*d.* Prescription medication, as ordered by a licensed physician, licensed osteopathic physician, physician assistant or licensed dentist, shall be provided in accordance with the directions of the prescribing physician, licensed osteopathic physician, physician assistant or dentist. Prisoners with medication from a personal physician, osteopathic physician, physician assistant or dentist may be evaluated by a physician, osteopathic physician, physician assistant or dentist selected by the jail administrator to determine if the present medication is appropriate.

**50.15(8)** No change.

**50.15(9) Medication storage.**

*a. and b.* No change.

*c.* Expired drugs or drugs not in unit dose packaging, whose administration had been discontinued by the attending physician or physician assistant, shall be destroyed by the jail administrator or designee in the presence of a witness. A record of drug destruction shall be made in each prisoner’s medical record. The record shall include the name, the strength and the quantity of the drug destroyed, and the record shall be signed by the jail administrator or designee and by the witness.

*d. and e.* No change.

ITEM 3. Amend subrule 50.16(5) as follows:

**50.16(5) Medical diets.** Special diets as prescribed by a physician or physician assistant shall be followed and documented. The physician or physician assistant who prescribes the special diet shall specify a date on which the diet will be reviewed for renewal or discontinuation. Unless specified by the prescribing physician or physician assistant, a certified dietitian shall develop the menu.

ITEM 4. Amend subparagraph **50.24(5)“a”(10)** as follows:

(10) Special diets as prescribed by a physician or physician assistant shall be followed and documented.

ITEM 5. Amend rule 201—51.13(356,356A) as follows:

**201—51.13(356,356A) Medical services.** The facility administrator shall establish a written policy and procedure to ensure that detainees have the opportunity to receive necessary medical attention for the detainee’s objectively serious medical and dental needs which are known to the facility staff. A serious medical need is one that has been diagnosed by a physician or physician assistant as requiring treatment, or one that is so obvious that even a lay person would easily recognize the necessity for a physician’s or physician assistant’s attention. The plan shall include a procedure for emergency services day or night and a procedure for regular medical attention. Responsibility for the costs of medical services remains that of the detainee. However, no detainee will be denied necessary medical services, dental service, or medicine because of a lack of ability to pay. Medical and dental prostheses shall be provided only for the serious medical needs of the detainee, as determined by a licensed health care professional. Cosmetic or elective procedures need not be provided.

**51.13(1) Medical resources.** Each facility shall have a designated licensed physician, licensed osteopathic physician, physician assistant or medical resource, such as a hospital or clinic staffed by licensed physicians, physician assistants or licensed osteopathic physicians, designated for the medical supervision, care and treatment of detainees as deemed necessary and appropriate. Medical resources shall be available on a 24-hour basis.

**51.13(2) to 51.13(6)** No change.

**51.13(7) Medication procedures.**

*a. to c.* No change.

*d.* Prescription medication, as ordered by a licensed physician, licensed osteopathic physician, physician assistant or licensed dentist, shall be provided in accordance with the directions of the prescribing physician, licensed osteopathic physician, physician assistant or dentist. Detainees with medication from a personal physician, osteopathic physician, physician assistant or dentist may be evaluated by a physician, osteopathic physician, physician assistant or dentist selected by the facility administrator to determine if the present medication is appropriate.

**51.13(8)** No change.

**51.13(9) Medication storage.**

*a. and b.* No change.

*c.* Expired drugs or drugs not in unit dose packaging, whose administration had been discontinued by the attending physician or physician assistant, shall be destroyed by the facility administrator or designee in the presence of a witness. A record of drug destruction shall be made in each detainee’s medical record. The record shall include the name, the strength and the quantity of the drug destroyed; and the record shall be signed by the facility administrator or designee and by the witness.

*d. and e.* No change.

ITEM 6. Amend subrule 51.14(4) as follows:

**51.14(4) Medical diets.** Special diets as prescribed by a physician or physician assistant shall be followed and documented.

ITEM 7. Amend subparagraph **51.20(5)“a”(10)** as follows:

(10) Special diets as prescribed by a physician or physician assistant shall be followed and documented.

[Filed 2/2/23, effective 3/29/23]

[Published 2/22/23]

EDITOR’S NOTE: For replacement pages for IAC, see IAC Supplement 2/22/23.