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The Iowa Administrative Code Supplement is published biweekly pursuant to Iowa Code section 17A.6. The Supplement contains replacement chapters to be inserted in the loose-leaf Iowa Administrative Code (IAC) according to instructions included with each Supplement. The replacement chapters incorporate rule changes which have been adopted by the agencies and filed with the Administrative Rules Coordinator as provided in Iowa Code sections 7.17 and 17A.4 to 17A.6. To determine the specific changes in the rules, refer to the Iowa Administrative Bulletin bearing the same publication date.

In addition to the changes adopted by agencies, the replacement chapters may reflect objection to a rule or a portion of a rule filed by the Administrative Rules Review Committee (ARRC), the Governor, or the Attorney General pursuant to Iowa Code section 17A.4(6); an effective date delay imposed by the ARRC pursuant to section 17A.4(7) or 17A.8(9); rescission of a rule by the Governor pursuant to section 17A.4(8); or nullification of a rule by the General Assembly pursuant to Article III, section 40, of the Constitution of the State of Iowa.

The Supplement may also contain replacement pages for the IAC Index or the Uniform Rules on Agency Procedure.

INSTRUCTIONS

FOR UPDATING THE

IOWA ADMINISTRATIVE CODE

Agency names and numbers in bold below correspond to the divider tabs in the IAC binders. New and replacement chapters included in this Supplement are listed below. Carefully remove and insert chapters accordingly.

Editor's telephone (515)281-3355 or (515)242-6873

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Replace Chapter 31

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Replace Chapter 22
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199—31.1(476) Applicability and definition of terms. This chapter applies to all rate-regulated gas or electric public utilities. All terms used in this chapter shall be defined as the terms are defined in Iowa Code section 476.72 unless further defined in this chapter.

"Fully distributed cost" is a costing approach that fully allocates all current and embedded costs to determine the revenue contribution of regulated and nonregulated affiliate operations.

"Net book value" means the original purchase price minus depreciation.

[**ARC 3063C**, IAB 5/10/17, effective 6/14/17]

199—31.2(476) Availability of records.

31.2(1) *Separate records.* All affiliates of the public utility shall maintain records which are separate from the records of the public utility.

31.2(2) *Records to be maintained.* The records maintained by each affiliate and made available for inspection through the public utility shall include, but not be limited to: ledgers; balance sheets; income statements—both consolidated and consolidating; documents depicting accounts payable and vouchers; purchase orders; time sheets; journal entries; source and supporting documents for all transactions; supporting documents and models for all forecasts of affiliates used by the public utility; all contracts, including summaries of unwritten contracts or agreements; a description of methods used to allocate revenues, expenses, and investments among affiliates or jurisdictions, including supporting detail; and copies of all filings required by other state and federal agencies.

31.2(3) *Method of inspection.* The records of each affiliate shall be made available to the board at the principal place of business of the public utility. Notwithstanding rule 199—18.3(476), upon receipt of a formal request in writing from the board for information, the public utility shall produce the requested information within seven days. Upon a showing of good cause, the board may approve additional time for response.

[**ARC 3063C**, IAB 5/10/17, effective 6/14/17]

199—31.3(476) Annual filing.

31.3(1) On or before June 30 of each year, all public utilities shall file with the board the following information:

a. An executive summary of each new or revised contract, arrangement, or other similar transaction between the public utility and an affiliate. The executive summary shall include: the document number, the start and end date of the contract, the providing affiliate, the receiving affiliate, the total estimated dollar value, the dollar amount reported for the calendar year, and a description of the service or goods covered.

b. Verified copies of contracts, arrangements, or other similar transactions between the public utility and an affiliate shall be provided to the board upon request. This includes all contracts, arrangements, or other similar transactions as required by Iowa Code subsections 476.74(1) to 476.74(4).

31.3(2) Contracts, arrangements, or other similar transactions with an affiliate where the consideration is not in excess of $50,000 or 5 percent of the capital equity of the utility, whichever is smaller, are exempt from this filing requirement. In lieu of the filing requirement, the public utility shall file on or before June 30 of each year a report of the total amount of each contract, arrangement, or other similar transactions with affiliates qualifying under this exemption. Each affiliate shall be identified separately.

31.3(3) After an initial filing under rule 199—31.3(476), a public utility shall file only new contracts or arrangements or other similar transactions and modifications or amendments to existing contracts or arrangements, or other similar transactions on an annual basis. If there have been no new contracts, arrangements, or other similar transactions, the public utility shall file a statement to that effect.

31.3(4) If a new affiliate is created, if an existing affiliate is dissolved or merged, if a contractual arrangement or other similar transactional relationship between the public utility and an affiliate is created, or if a contractual arrangement or other similar transactional relationship is terminated between the public utility and an affiliate, the public utility shall notify the board in writing within 30 days of the date of the event. This subrule does not apply if a proposal for reorganization pursuant to 199—Chapter 32 is to be filed with the board.

199—31.4(476) Additional filing requirements for affiliated telecommunications service providers. Rescinded **ARC 3063C**, IAB 5/10/17, effective 6/14/17.

199—31.5(476) Verified copies and confidential treatment.

31.5(1) *Verified copies.* For purposes of this chapter, a copy is verified if it is accompanied by an affidavit signed by a corporate officer with personal knowledge of the veracity of the copy. Only one affidavit signed by a corporate officer with personal knowledge of the veracity of the copy need be included in an individual filing in order to verify all contracts, arrangements, or other similar transactions included in the filing.

31.5(2) *Confidential treatment.* When a public utility files contracts, arrangements, or other similar transactions with the board, all such contracts or arrangements for which confidential treatment is sought shall be clearly marked. In addition to the requirements set out in 199—1.9(22), the public utility shall provide, at the time of filing with the board, a list designating the contracts, arrangements, and other similar transactions, if any, for which confidential treatment is sought. The public utility shall designate where and to whom contracts, arrangements, and other similar transactions determined by the board to be confidential shall be returned.

199—31.6(476) Comparable information. For the purpose of satisfying the filing requirements of this chapter, the public utility may request approval to file alternative but comparable information which the public utility files with other state or federal regulatory agencies. If the proposal is approved by the board, the public utility may file the information as a partial substitute for, or in lieu of, the information required by rule 199—31.3(476), and the board may provide that the public utility continue to file the approved alternative information in future filings. The public utility shall file the same information, whether it is the alternative information filed with other agencies, or the information required by rule 199—31.3(476), for at least five consecutive years. Proposals to file alternative information shall be filed by the public utility on or before December 1 of the year preceding the year for which approval is sought.

199—31.7(476) Standards for costing service transfers between regulated operations and nonregulated affiliates.

31.7(1) *Nonregulated affiliate provides service to a regulated affiliate.* The service shall be priced to the regulated affiliate's operations at the price charged to nonaffiliates. If no such price is available, the service shall be priced at the lower of fully distributed cost, the lowest price actually charged to other affiliates, or a market price of comparable services. If a market price of comparable services is not reasonably determinable, the service shall be priced at the lower of fully distributed cost or the lowest price actually charged to other affiliates. Under no circumstances shall the service be priced to a regulated affiliate's operations at a higher cost than what the regulated affiliate actually paid the unregulated affiliate for the service.

31.7(2) *Service is provided by the utility to a nonregulated affiliate.* Utility service shall be provided at the tariffed price. If it is not a tariffed service, the service shall be recorded at fully distributed cost.

199—31.8(476) Standards for costing asset transfers between regulated operations and non-regulated affiliates valued at less than $2 million.

31.8(1) *Asset of a nonregulated affiliate transferred to a regulated affiliate.* The asset transfer shall be recorded at the lesser of net book value, the price actually charged to affiliates or nonaffiliates, or the market price of comparable assets. Under no circumstances shall the asset be recorded at a cost higher than what the regulated affiliate actually paid for the asset.

31.8(2) *Asset of a regulated affiliate transferred to a nonregulated affiliate.* The asset transfer to the nonregulated affiliate shall be recorded at the greater of net book value, a price actually charged to other affiliates or nonaffiliates, or the market price of comparable assets.

199—31.9(476) Waivers. Any public utility may file an application for waiver of the requirements of this chapter. The application shall include a detailed statement of why the waiver is in the public interest and shall otherwise comply with rule 199—1.3(17A,474,476).
[**ARC 3063C**, IAB 5/10/17, effective 6/14/17]

These rules are intended to implement Iowa Code sections 476.73 and 476.74.

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HUMAN SERVICES DEPARTMENT[441]

Rules transferred from Social Services Department[770] to Human Services Department[498], see 1983 Iowa Acts, Senate File 464, effective July 1, 1983.
Rules transferred from agency number [498] to [441] to conform with the reorganization numbering scheme in general, IAC Supp. 2/11/87.

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PREAMBLE

These rules provide for definitions of diagnostic and financial eligibility, provider qualifications, and appeal procedures related to the autism support program created in 2013 Iowa Acts, Senate File 446, division XVII. The purpose of the autism support program is to provide funding for applied behavioral analysis services and care coordination for children with a diagnosis of autism who meet certain financial and clinical eligibility criteria.
[**ARC 1329C**, IAB 2/19/14, effective 4/1/14]

441—22.1(225D) Definitions.

"Administrator" means the entity selected by the department through a request for proposal process or other contractual arrangement to administer the autism support program.

"Applicant" means an individual on whose behalf an application has been submitted but who has not been identified as an eligible individual, or an individual who has received a denial of eligibility for the program.

"Applied behavioral analysis" or *"ABA"* means the same as defined in Iowa Code section 225D.1.

"Autism" means autism spectrum disorders as defined in Iowa Code section 514C.28.

"Autism service provider" means a person providing applied behavioral analysis, who meets both of the following criteria:

1. The person:

- Is certified as a behavior analyst by the Behavior Analyst Certification Board, is a psychologist licensed under Iowa Code chapter 154B, or is a psychiatrist licensed under Iowa Code chapter 148; or
- Is a board-certified assistant behavior analyst who performs duties, identified by and based on the standards of the Behavior Analyst Certification Board, under the supervision of a board-certified behavior analyst.

2. Is approved as a member of the provider network by the department.

"Autism support fund" or *"fund"* means the autism support fund created in Iowa Code section 225D.2.

"Autism support program" or *"program"* means the program created in Iowa Code section 225D.2 to provide funding for applied behavioral analysis and care coordination for eligible individuals with a diagnosis of autism.

"Clinically relevant" means medically necessary and resulting in the development, maintenance, or restoration, to the maximum extent practicable, of the functioning of an individual.

"Department" means the department of human services.

"Diagnostic assessment of autism" means medically necessary assessment, evaluations, or tests performed by a licensed child psychiatrist, developmental pediatrician, or clinical psychologist.

"Eligible individual" means a child less than 14 years of age who has been diagnosed with autism based on a diagnostic assessment of autism, is not otherwise eligible for coverage for applied behavioral analysis treatment under the medical assistance program, Iowa Code section 514C.28, or private insurance coverage, and whose household income does not exceed 500 percent of the federal poverty level.

"Federal poverty level" means the most recently revised poverty income guidelines published by the United States Department of Health and Human Services.

"Household income" means household income, reported on the tax return on which the eligible individual is claimed as a dependent, as determined using the modified adjusted gross income methodology pursuant to Section 2002 of the federal Patient Protection and Affordable Care Act, Pub. L. No. 111-148. If the eligible individual's parents live together and file separate tax returns, the income reported on both parents' tax returns must be combined.

"Household size" means the total number of personal and dependent exemptions claimed on the tax return on which the eligible individual is claimed as a dependent plus any child under the age of 19 living in the household who is claimed for tax purposes by a noncustodial parent through a release of claim to exemption by the custodial parent.

"Integrated health home" means the same as defined in 441—subrule 78.53(1).

"Maximum amount of treatment" means a maximum of 24 months of applied behavioral analysis funded by the autism support program. Months of service are not required to be consecutive.

"Maximum annual benefit" means a maximum annual benefit amount of $36,000 per year for autism support program services for an eligible individual. For the purposes of this program, the annual benefit is calculated by using as a starting date the date the first service is reimbursed by the program and an ending date 12 months from the starting date. Expenditures included in the calculation of the maximum annual benefit include reimbursements to autism service providers for provision of applied behavioral analysis and reimbursements to integrated health homes for costs of care coordination. Cost-sharing paid by the eligible individual is not included in the calculation of the individual's annual benefit.

"Medical assistance" or *"Medicaid"* means assistance provided under the medical assistance program pursuant to Iowa Code chapter 249A and Title XIX of the Social Security Act.

"Month of service" means any month in which an individual receives at least one billable unit of applied behavioral analysis service funded by the autism support program.

"Provider network" means a network of autism service providers approved by the department to provide services to eligible individuals through the autism support program.

"Regional autism assistance program" or *"RAP"* means the regional autism assistance program created in Iowa Code section 256.35.

"Treatment plan" means a plan for the treatment of autism developed by a licensed physician or licensed psychologist pursuant to a comprehensive evaluation or reevaluation performed in consultation with the patient and the patient's representative.

[**ARC 1329C**, IAB 2/19/14, effective 4/1/14; **ARC 2816C**, IAB 11/23/16, effective 1/1/17; **ARC 3057C**, IAB 5/10/17, effective 7/1/17]

441—22.2(225D) Eligibility and application requirements. To be determined eligible for funding for services through the autism support program, an individual must meet the following requirements:

22.2(1) An individual shall submit an application to the department using a standardized application form available through the administrator's and the department's Web sites, members of the provider network, the regional autism assistance program, and advocacy organizations.

22.2(2) An applicant for autism program services shall be less than the age of 14 at the time of application for the program. Proof of age must be provided at the time of application. An individual who reaches the age of 14 prior to receipt of the maximum benefits of the program may continue to receive services from the program in accordance with the individual's treatment plan, up to a maximum of 24 months of applied behavioral analysis treatment.

22.2(3) An individual shall have a diagnosis of autism based on a diagnostic assessment of autism dated 24 months or less from the date of application for the program.

22.2(4) An individual shall be determined ineligible for coverage of applied behavioral analysis services under the medical assistance program, Iowa Code section 514C.28, or private insurance coverage. Proof of insurance coverage and noneligibility for coverage for applied behavioral analysis shall be provided at the time of application and shall include a written denial of coverage or a benefits summary indicating that the applied behavioral analysis treatment is not a covered benefit for which the applicant is eligible under the Medicaid program, Iowa Code section 514C.28, or private insurance coverage.

22.2(5) An individual shall have a household income equal to or less than 500 percent of the federal poverty level. Information needed to determine household income using modified adjusted gross income methodology shall be identified on the program application. Household size will be determined according to the standards in this chapter. The information shall be provided at the time of application.

22.2(6) The department shall provide to the parent or guardian a written notice of decision determining initial eligibility or denial within 30 calendar days of receipt of the application.

22.2(7) The department shall refer an applicant determined to be an eligible individual to care coordination services. The referral will occur within 5 business days of determination of eligibility for the program. Care coordination services will be provided by the University of Iowa regional autism assistance program (RAP) or an integrated health home. Eligible individuals who reside in counties where integrated health homes for children with a serious emotional disturbance are operational may choose to receive care coordination through the University of Iowa RAP program or an integrated health home that serves residents of the eligible individual's county of residence. Care coordination is not required as a condition of receiving services through the autism support program.

22.2(8) The department shall provide information to an applicant determined to be an eligible individual regarding all available administrators. The eligible individual may choose any available administrator.

22.2(9) The administrator shall maintain a list of individuals determined eligible for the program but unable to access services due to lack of available providers and shall work to connect eligible individuals on the list to network providers.

22.2(10) The department shall stop processing applications at the point where available funds are fully obligated for eligible individuals and additional eligible individuals would cause expenditures in excess of the funds available to the program. The department shall maintain a waiting list of individuals denied access to the program due to lack of available funds. If additional funds become available, the department shall contact individuals on the list in order of the earliest date and time of the receipt of the original application. The applicant shall be allowed 30 calendar days to submit an updated application and any required information needed to determine eligibility. If the applicant does not submit required information, the applicant will be denied eligibility and removed from the waiting list maintained for individuals denied access to the program due to lack of funding. The age of the applicant at the time of the most recent application will be used when determining eligibility for the program.

[**ARC 1329C**, IAB 2/19/14, effective 4/1/14; **ARC 2816C**, IAB 11/23/16, effective 1/1/17]

441—22.3(225D) Cost-sharing requirements and graduated schedule of cost sharing.

22.3(1) An individual with a household income equal to or greater than 200 percent of the federal poverty level, up to a maximum of 500 percent of the federal poverty level, shall be subject to cost-sharing requirements. Cost sharing shall be implemented incrementally up to a maximum of 15 percent of the costs of the services provided through the program for an individual with a household income equal to 500 percent of the federal poverty level. The following is a chart of the cost-sharing requirements:

Family income as a % of FPL	% of cost sharing of service costs	Family income as a % of FPL	% of cost sharing of service costs
200–209%	0.5%	350–359%	8.0%
210–219%	1.0%	360–369%	8.5%
220–229%	1.5%	370–379%	9.0%
230–239%	2.0%	380–389%	9.5%
240–249%	2.5%	390–399%	10.0%
250–259%	3.0%	400–409%	10.5%
260–269%	3.5%	410–419%	11.0%
270–279%	4.0%	420–429%	11.5%
280–289%	4.5%	430–439%	12.0%
290–299%	5.0%	440–449%	12.5%
300–309%	5.5%	450–459%	13.0%
310–319%	6.0%	460–469%	13.5%
320–329%	6.5%	470–479%	14.0%
330–339%	7.0%	480–489%	14.5%
340–349%	7.5%	490–500%	15.0%

22.3(2) An individual may request an exemption from cost sharing due to financial hardship. To qualify for an exemption, an individual shall submit written documentation to the department that the individual or the individual's family does not have the financial means to fulfill cost-sharing requirements.

22.3(3) Criteria to determine financial hardship include, but are not limited to, a change in income, change in employment of the parent or guardian, additional medical expenditures, other family members' health conditions, or other conditions which may affect the ability to fulfill cost-sharing requirements. The department shall provide a written determination regarding eligibility for exemption from cost-sharing requirements. Eligibility for exemption from cost sharing expires at the end of the financial eligibility period.

[**ARC 1329C**, IAB 2/19/14, effective 4/1/14; **ARC 2816C**, IAB 11/23/16, effective 1/1/17]

441—22.4(225D) Review of financial eligibility, cost-sharing requirements, exemption from cost sharing, and disenrollment in the program.

22.4(1) An eligible individual's continued financial eligibility for the program, cost-sharing requirements, and exemption from cost sharing shall be determined on an annual basis.

22.4(2) The administrator shall request needed information from the eligible individual's parent or guardian for redetermination of financial eligibility, cost-sharing requirements, and exemption from cost sharing at least 30 days prior to the expiration of the eligible individual's eligibility period. The notice requesting information needed for renewal of eligibility shall include the ending date of eligibility for services.

22.4(3) The department shall provide a written notice of decision determining ongoing eligibility or denial within 15 calendar days of receipt of the continued financial eligibility documentation.

22.4(4) If the signed application and verification of continuing eligibility are not received by the department by the last working day of the renewal month, the individual's eligibility for the program shall be terminated.

22.4(5) Reasons for disenrollment in the autism support program include:

a. Death of the eligible individual.

b. The family no longer meets one or more of the eligibility criteria outlined in rule 441—22.2(225D).

c. The parent or legal guardian has failed to provide information required for redetermination of eligibility.

d. The eligible individual has failed to access authorized services for a period of three consecutive months and has not made arrangements with the autism service provider or administrator to access authorized services.

e. No funds are appropriated for the autism support program.

[**ARC 1329C**, IAB 2/19/14, effective 4/1/14; **ARC 2816C**, IAB 11/23/16, effective 1/1/17]

441—22.5(225D) Initial service authorization and renewal of service authorization.

22.5(1) All services reimbursed through the program shall be prior-authorized by the administrator.

22.5(2) An autism service provider shall submit an initial treatment plan to the administrator specifying a plan of treatment for a period of no more than six months. The initial treatment plan shall specify the amount of units of applied behavioral analysis services requested for the eligible individual and include a baseline standardized assessment score.

22.5(3) Family engagement and participation are required for participation in the autism support program. Treatment plans shall identify specific activities and responsibilities of parents or guardians in the treatment plan.

22.5(4) The treatment plan shall reflect the autism service provider's engagement with the school in which the eligible individual is enrolled. Treatment plans shall identify specific actions taken by the autism service provider to engage the eligible individual's school and the results of such actions.

22.5(5) The treatment plan may include services provided by staff with a minimum of a bachelor's degree in a human services or education field, working under the supervision of an autism service provider who is board-certified as a behavior analyst. The treatment plan shall identify which services

shall be provided directly by the board-certified behavior analyst and which services shall be provided by staff under the supervision of a board-certified behavior analyst.

22.5(6) For renewal or modification of service authorizations, the autism service provider shall submit an updated plan of treatment with a request for the number of units of applied behavioral analysis the provider believes is medically necessary to address the eligible individual's ongoing treatment needs. The autism service provider shall also provide evidence of the eligible individual's progress on identified treatment goals. The administrator shall consider the eligible individual's updated standardized assessment score along with other clinical information when reviewing requests for renewal or modification of service authorizations. Ongoing service authorization requests shall not exceed six months in duration.

22.5(7) The administrator shall provide approval, request for modification, or denial within five business days of receipt of all service authorization requests.

[**ARC 1329C**, IAB 2/19/14, effective 4/1/14; **ARC 2816C**, IAB 11/23/16, effective 1/1/17]

441—22.6(225D) Provider network. The administrator shall establish and maintain a network of department-approved autism service providers so that applied behavioral analysis services are available to eligible individuals statewide to the maximum extent possible.

22.6(1) A provider shall be approved to participate in the autism support program provider network if the provider meets one of the following standards in paragraph 22.6(1)*"a," "b"* or *"c"*:

a. The autism service provider is certified as a behavior analyst by the Behavior Analyst Certification Board; or

b. The autism service provider is a psychologist licensed under Iowa Code chapter 154B; or

c. The autism service provider is a psychiatrist licensed under Iowa Code chapter 148; and

d. A provider shall be deemed eligible to participate in the autism support program provider network if the autism service provider meets the standards in paragraph 22.6(1)*"a,""b"* or *"c"* and the provider is approved to provide applied behavioral analysis services through Medicaid.

22.6(2) The administrator's provider network shall accept the rate established by the department through the department's contract with the administrator as payment in full for the services rendered and will not charge eligible individuals any additional fees for services rendered, except for those eligible individuals who are required to pay a portion of the cost of services due to cost-sharing requirements.

22.6(3) The department is responsible for calculating the cost-sharing amount according to standards established in this chapter.

22.6(4) The autism service provider is responsible for collecting the cost-sharing amount from the eligible individual and will only be reimbursed by the administrator for the balance of the service fee minus the amount of cost sharing.

[**ARC 1329C**, IAB 2/19/14, effective 4/1/14; **ARC 2816C**, IAB 11/23/16, effective 1/1/17]

441—22.7(225D) Financial management of the program.

22.7(1) The department shall:

a. Not take new applications for the program that would cause expenditures of the program to exceed the budgeted amount.

b. Limit expenditure of program funds to services for those individuals determined to be eligible individuals and for related administrative costs.

c. Allocate available funds for eligible individuals' services in a manner that allows for funding for all eligible individuals' services authorized by the administrator without exceeding the department's funding limits.

22.7(2) The administrator shall:

a. Limit annual expenditures for each eligible individual to the amount identified in Iowa Code section 225D.2(2)*"a."*

b. Limit length of service through the program to the amount identified in Iowa Code section 225D.2(2)*"b."*

c. Limit payment for applied behavioral analysis services to an hourly or equivalent quarter-hour unit rate that is equal to the contracted rate currently paid by Medicaid for applied behavioral analysis services.

d. Limit payment for integrated health home services to an amount consistent with the monthly per-member per-month amount paid by Medicaid to approved providers of integrated health home services for children with a serious emotional disturbance.

e. Not provide financial compensation to the University of Iowa regional autism assistance program for care coordination services.

[**ARC 1329C**, IAB 2/19/14, effective 4/1/14; **ARC 2816C**, IAB 11/23/16, effective 1/1/17]

441—22.8(225D) Appeal. Notice of adverse action and right to appeal shall be given in accordance with 441—Chapter 7.

[**ARC 1329C**, IAB 2/19/14, effective 4/1/14]

These rules are intended to implement Iowa Code chapter 225D.

[Filed ARC 1329C (Notice ARC 1184C, IAB 11/13/13), IAB 2/19/14, effective 4/1/14]

[Filed ARC 2816C (Notice ARC 2680C, IAB 8/17/16), IAB 11/23/16, effective 1/1/17]

[Filed ARC 3057C (Notice ARC 2971C, IAB 3/15/17), IAB 5/10/17, effective 7/1/17]

CHAPTER 24
ACCREDITATION OF PROVIDERS OF SERVICES TO PERSONS WITH MENTAL ILLNESS, INTELLECTUAL DISABILITIES, OR DEVELOPMENTAL DISABILITIES

PREAMBLE

The mental health and disability services commission has adopted this set of standards to be met by all providers of services to people with mental illness, intellectual disabilities, or developmental disabilities. These standards apply to providers that are not required to be licensed by the department of inspections and appeals. These providers include community mental health centers, mental health services providers, case management providers, supported community living providers, and crisis response providers in accordance with Iowa Code chapter 225C.

The standards serve as the foundation of a performance-based review of those organizations for which the department holds accreditation responsibility, as set forth in Iowa Code chapters 225C and 230A. The mission of accreditation is to assure individuals using the services and the general public of organizational accountability for meeting best practices performance levels, for efficient and effective management, and for the provision of quality services that result in quality outcomes for individuals using the services.

The department's intent is to establish standards that are based on the principles of quality improvement and are designed to facilitate the provision of excellent quality services that lead to positive outcomes. The intent of these standards is to make organizations providing services responsible for effecting efficient and effective management and operational systems that enhance the involvement of individuals using the services and to establish a best practices level of performance by which to measure provider organizations.

[**ARC 1660C**, IAB 10/15/14, effective 12/1/14]

DIVISION I
SERVICES FOR INDIVIDUALS WITH DISABILITIES

PREAMBLE

This set of standards in this division has been established to be met by all providers of case management, day treatment, intensive psychiatric rehabilitation, supported community living, partial hospitalization, outpatient counseling and emergency services.

[**ARC 1660C**, IAB 10/15/14, effective 12/1/14]

441—24.1(225C) Definitions.

"Accreditation" means the decision made by the commission that the organization has met the applicable standards.

"Advanced registered nurse practitioner" means a nurse who has current licensure as a registered nurse in Iowa, or licensure in another state that is recognized in Iowa pursuant to Iowa Code chapter 152E, and who is also registered as certified in psychiatric mental health specialties pursuant to board of nursing rules in 655—Chapter 7.

"Advisory board" means the board that reviews and makes recommendations to the organization on the program being accredited. The advisory board shall meet at least three times a year and shall have at least three members, at least 51 percent of whom are not providers. The advisory board shall include representatives who have disabilities or family members of persons with disabilities. The advisory board's duties include review and recommendation of policies, development and review of the organizational plan for the program being accredited, review and recommendation of the budget for the program being accredited, and review and recommendation of the performance improvement program of the program being accredited.

"Anticipated discharge plan" means the statement of the condition or circumstances by which the individual using the service would no longer need each of the specific services accredited under this chapter.

"Appropriate" means the degree to which the services or supports or activities provided or undertaken by the organization are suitable and desirable for the needs, situation, or problems of the individual using the service.

"Assessment" means the review of the current functioning of the individual using the service in regard to the individual's situation, needs, strengths, abilities, desires and goals.

"Benchmarks" means the processes of an organization that lead to implementation of the indicators.

"Chronic mental illness" means the condition present in people aged 18 and over who have a persistent mental or emotional disorder that seriously impairs their functioning relative to such primary aspects of daily living as personal relations, living arrangements, or employment. People with chronic mental illness typically meet at least one of the following criteria:

1. They have undergone psychiatric treatment more intensive than outpatient care more than once in a lifetime (e.g., emergency services, alternative home care, partial hospitalization or inpatient hospitalization).
2. They have experienced at least one episode of continuous, structured, supportive residential care other than hospitalization.

In addition, people with chronic mental illness typically meet at least two of the following criteria on a continuing or intermittent basis for at least two years:

1. They are unemployed, employed in a sheltered setting, or have markedly limited skills and a poor work history.
2. They require financial assistance for out-of-hospital maintenance and may be unable to procure this assistance without help.
3. They show severe inability to establish or maintain a personal social support system.
4. They require help in basic living skills.
5. They exhibit inappropriate social behavior that results in demand for intervention by the mental health or judicial system.

In atypical instances, a person who varies from these criteria could still be considered to be a person with chronic mental illness.

"Commission" means the mental health and disability services commission (MH/DS commission) as established and defined in Iowa Code section 225C.5.

"Community" means a natural setting where people live, learn, work, and socialize.

"Community mental health center" means an organization providing mental health services that is established pursuant to Iowa Code chapters 225C and 230A.

"Crisis intervention plan" means a personalized, individualized plan developed with the individual using the service that identifies potential personal psychiatric, environmental, and medical emergencies. This plan shall also include those life situations identified as problematic and the identified strategies and natural supports developed with the individual using the service to enable the individual to self-manage, alleviate, or end the crisis. This plan shall also include how the individual can access emergency services that may be needed.

"Deemed status" means acceptance by the commission of accreditation or licensure of a program or service by another accrediting body in lieu of accreditation based on review and evaluation by the division.

"Department" means the Iowa department of human services.

"Developmental disability" means a severe, chronic disability that:

1. Is attributable to a mental or physical impairment or combination of mental and physical impairments;
2. Is manifested before the age of 22;
3. Is likely to continue indefinitely;
4. Results in substantial functional limitations in three or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, and economic self-sufficiency; and

5. Reflects the person's need for a combination and sequence of special, interdisciplinary, or generic services, individualized supports, or other forms of assistance that are of lifelong or extended duration and are individually planned and coordinated.

A person from birth to the age of nine, inclusive, who has a substantial developmental delay or specific congenital or acquired condition may be considered to have a developmental disability without meeting three or more of the criteria described above if the person, without services and supports, has a high probability of meeting those criteria later in life.

"Direct services" means services providing therapy, habilitation, or rehabilitation activities or support services such as transportation.

"Division" means the division of behavioral, developmental, and protective services for families, adults, and children of the department of human services.

"Doctor of medicine or osteopathic medicine" means a person who is licensed in the state of Iowa under Iowa Code chapter 148 as a physician and surgeon or under Iowa Code chapter 150A as an osteopathic physician and surgeon.

"Functional assessment" means the analysis of daily living skills. The functional assessment also takes into consideration the strengths, stated needs, and level and kind of disability of the individual using the service.

"Goal achieving" means to gain the required skills and supports to obtain the goal of choice. For purposes of this chapter, the definition and explanation are taken from the Psychiatric Rehabilitation Practitioner Tools, as developed by the Boston Center for Psychiatric Rehabilitation.

"Goal keeping" means assisting the individual using the service in maintaining successful and satisfying role performance to prevent the emergence of symptoms associated with role deterioration. For purposes of this chapter, the definition and explanation are taken from the Psychiatric Rehabilitation Practitioner Tools, as developed by the Boston Center for Psychiatric Rehabilitation.

"Incident," for the purposes of this chapter, means an occurrence involving the individual using the service that:

1. Results in a physical injury to or by the individual that requires a physician's treatment or admission to a hospital, or
2. Results in someone's death, or
3. Requires emergency mental health treatment for the individual, or
4. Requires the intervention of law enforcement, or
5. Results from any prescription medication error, or
6. Is reportable to protective services.

"Indicators" means conditions that will exist when the activity is done competently and benchmarks are achieved. Indicators also provide a means to assess the activity's effect on outcomes of services.

"Informed consent" refers to time-limited, voluntary consent. The individual using the service or the individual's legal guardian may withdraw consent at any time without risk of punitive action. "Informed consent" includes a description of the treatment and specific procedures to be followed, the intended outcome or anticipated benefits, the rationale for use, the risks of use and nonuse, and the less restrictive alternatives considered. The individual using the service or the legal guardian has the opportunity to ask questions and have them satisfactorily answered.

"Intellectual disability" means a diagnosis of intellectual disability (intellectual developmental disorder), global developmental delay, or unspecified intellectual disability (intellectual developmental disorder) under these rules which shall be made only when the onset of the person's condition was during the developmental period and shall be based on an assessment of the person's intellectual functioning and level of adaptive skills. A licensed psychologist or psychiatrist who is professionally trained to administer the tests required to assess intellectual functioning and to evaluate a person's adaptive skills shall make the diagnosis. A diagnosis of intellectual disability shall be made in accordance with the criteria provided in the current version of the Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association.

"Intensive psychiatric rehabilitation practitioner" means a person who has at least 60 contact hours of training in intensive psychiatric rehabilitation and either:

1. Is certified as a psychiatric rehabilitation practitioner by the United States Psychiatric Rehabilitation Association; or

2. Holds a bachelor's degree with 30 semester hours or equivalent quarter hours in a human services field (including, but not limited to, psychology, social work, mental health counseling, marriage and family therapy, nursing, education, occupational therapy, and recreational therapy) and has at least one year of experience in the delivery of services to the population groups that the person is hired to serve.

"Leadership" means the governing board, the chief administrative officer or executive director, managers, supervisors, and clinical leaders who participate in developing and implementing organizational policies, plans and systems.

"Marital and family therapist" means a person who is licensed under Iowa Code chapter 154D in the application of counseling techniques in the assessment and resolution of emotional conditions. This includes the alteration and establishment of attitudes and patterns of interaction relative to marriage, family life, and interpersonal relationships.

"Mental health counselor" means a person who is licensed under Iowa Code chapter 154D in counseling services involving assessment, referral, consultation, and the application of counseling, human development principles, learning theory, group dynamics, and the etiology of maladjustment and dysfunctional behavior to individuals, families, and groups.

"Mental health professional" means a person who meets all of the following conditions:

1. Holds at least a master's degree in a mental health field including, but not limited to, psychology, counseling and guidance, psychiatric nursing and social work; or is a doctor of medicine or osteopathic medicine; and

2. Holds a current Iowa license when required by the Iowa professional licensure laws (such as a psychiatrist, a psychologist, a marital and family therapist, a mental health counselor, an advanced registered nurse practitioner, a psychiatric nurse, or a social worker); and

3. Has at least two years of postdegree experience supervised by a mental health professional in assessing mental health problems, mental illness, and service needs and in providing mental health services.

"Mental health service provider" means an organization whose services are established to specifically address mental health services to individuals or the administration of facilities in which these services are provided. Organizations included are:

1. Those contracting with a county board of supervisors to provide mental health services in lieu of that county's affiliation with a community mental health center (Iowa Code chapter 230A).

2. Those that may contract with a county board of supervisors for special services to the general public or special segments of the general public and that are not accredited by any other accrediting body.

These standards do not apply to individual practitioners or partnerships of practitioners covered under Iowa's professional licensure laws.

"Natural supports" means those services and supports an individual using the service identifies as wanted or needed that are provided at no cost by family, friends, neighbors, and others in the community, or by organizations or entities that serve the general public.

"New organization" means an entity that has never been accredited under 441—Chapter 24 or an accredited entity under 441—Chapter 24 that makes a significant change in its ownership, structure, management, or service delivery.

"Organization" means:

1. A governmental entity or an entity that meets Iowa Code requirements for a business organization as a for-profit or not-for-profit business. These entities include, but are not limited to, a business corporation under Iowa Code chapter 490 or a nonprofit corporation under Iowa Code chapter 504 that provides a service accredited pursuant to the rules in this chapter.

2. A county, consortium of counties, or the department of human services that provides or subcontracts for the provision of case management.

3. A division or unit of a larger entity, such as a unit within a hospital or parent organization.

"Organization" does not include: an individual for whom a license to engage in a profession is required under Iowa Code section 147.2, any person providing a service if the person is not organized as a corporation or other business entity recognized under the Iowa Code, or an entity that provides only financial, administrative, or employment services and that does not directly provide the services accredited under this chapter.

"Outcome" means the result of the performance or nonperformance of a function or process or activity.

"Policies" means the principles and statements of intent of the organization.

"Procedures" means the steps taken to implement the policies of the organization.

"Program" means a set of related resources and services directed to the accomplishment of a fixed set of goals for the population of a specified geographic area or for special target populations.

"Psychiatric crisis intervention plan" means a personalized, individualized plan developed with the individual using the service that identifies potential personal psychiatric emergencies. This plan shall also include those life situations identified as problematic and the identified strategies and natural supports developed with the individual using the service to enable the individual to self-manage, alleviate, or end the crisis. This plan shall also include how the individual can access emergency services that may be needed.

"Psychiatric nurse" means a person who meets the requirements of a certified psychiatric nurse, is eligible for certification by the American Nursing Association, and is licensed by the state of Iowa to practice nursing as defined in Iowa Code chapter 152.

"Psychiatrist" means a doctor of medicine or osteopathic medicine who is certified by the American Board of Psychiatry and Neurology or who is eligible for certification and who is fully licensed to practice medicine in the state of Iowa.

"Psychologist" means a person who:

1. Is licensed to practice psychology in the state of Iowa or meets the requirements of eligibility for a license to practice psychology in the state of Iowa as defined in Iowa Code chapter 154B; or

2. Is certified by the Iowa department of education as a school psychologist or is eligible for certification by the Iowa department of education.

"Qualified case managers and supervisors" means people who have the following qualifications:

1. A bachelor's degree with 30 semester hours or equivalent quarter hours in a human services field (including, but not limited to, psychology, social work, mental health counseling, marriage and family therapy, nursing, education, occupational therapy, and recreational therapy) and at least one year of experience in the delivery of services to the population groups that the person is hired as a case manager or case management supervisor to serve; or

2. An Iowa license to practice as a registered nurse and at least three years of experience in the delivery of services to the population group the person is hired as a case manager or case management supervisor to serve.

People employed as case management supervisors on or before August 1, 1993, who do not meet these requirements shall be considered to meet these requirements as long as they are continuously employed by the same case management provider.

"Readiness assessment" means a process of involving the individual using the service in clarifying motivational readiness to participate in the recovery process. For purposes of this chapter, the definition and explanation are taken from the Psychiatric Rehabilitation Practitioner Tools, as developed by the Boston Center for Psychiatric Rehabilitation.

"Readiness development" means services designed to develop or increase an individual's interest, motivation, and resolve to engage in the rehabilitation services process, as a means of enhancing independent functioning and quality of life. For purposes of this chapter, the definition and explanation are taken from the Psychiatric Rehabilitation Practitioner Tools, as developed by the Boston Center for Psychiatric Rehabilitation.

"Registered nurse" means a person who is licensed to practice nursing in the state of Iowa as defined in Iowa Code chapter 152.

"Rehabilitation services" means services designed to restore, improve, or maximize the individual's optimal level of functioning, self-care, self-responsibility, independence and quality of life and to minimize impairments, disabilities and dysfunction caused by a serious and persistent mental or emotional disability.

"Rights restriction" means limitations not imposed on the general public in the areas of communication, mobility, finances, medical or mental health treatment, intimacy, privacy, type of work, religion, place of residence, and people with whom the individual using the service may share a residence.

"Serious emotional disturbance" means a diagnosable mental, behavioral, or emotional disorder that (1) is of sufficient duration to meet diagnostic criteria for the disorder specified by the current version of the Diagnostic and Statistical Manual of Mental Disorders (DSM) published by the American Psychiatric Association; and (2) has resulted in a functional impairment that substantially interferes with or limits a consumer's role or functioning in family, school, or community activities. "Serious emotional disturbance" shall not include neurodevelopmental disorders, substance-related disorders, or conditions or problems classified in the current version of the DSM as "other conditions that may be a focus of clinical attention," unless those conditions co-occur with another diagnosable serious emotional disturbance.

"Service plan" means an individualized goal-oriented plan of services written in language understandable by the individual using the service and developed collaboratively by the individual and the organization.

"Staff" means people paid by the organization to perform duties and responsibilities defined in the organization's policies and procedures.

[**ARC 1660C**, IAB 10/15/14, effective 12/1/14; **ARC 2164C**, IAB 9/30/15, effective 10/1/15]

441—24.2(225C) Standards for policy and procedures.

24.2(1) *Performance benchmark.* The organization has written policy direction for the organization and each service being accredited.

24.2(2) *Performance indicators.*

a. The organization has a policies and procedures manual with policy guidelines and administrative procedures for all organizational activities and services specific to its organization that addresses the standards in effect at the time of review.

b. The policies and procedures cover each benchmark and indicator in this chapter.

c. The policies and procedures manual is made available to all staff.

441—24.3(225C) Standards for organizational activities.

24.3(1) *Performance improvement system.*

a. *Performance benchmark.* The organization has a systematic, organizationwide, planned approach to designing, measuring, evaluating, and improving the level of its performance.

b. *Performance indicators.* The organization:

(1) Annually measures and assesses organizational activities and services accredited in this chapter.

(2) Gathers information from individuals using the services, from staff, and from family members.

(3) Implements an internal review of individual records for those services accredited under this chapter. For outpatient psychotherapy and counseling services, the organization:

1. Reviews the individual's involvement in and with treatment.

2. Ensures that treatment activities are documented and are relevant to the diagnosis or presenting problem.

(4) Reviews the organization's response to incidents reported under subrule 24.4(5) for necessity, appropriateness, effectiveness and prevention. This review includes analysis of incident data at least annually to identify any patterns of risk to the health and safety of consumers.

(5) Reviews the organization's response to any situation that poses a danger or threat to staff or to individuals using the services for necessity, appropriateness, effectiveness, and prevention.

(6) Identifies areas in need of improvement.

(7) Has a plan to address the areas in need of improvement. Where applicable, the organization establishes a plan to resolve the problem of patients missing appointments.

(8) Implements the plan and documents the results.

24.3(2) *Leadership.*

a. Performance benchmark. Organization leaders provide the framework for the planning, designing, directing, coordination, provision and improvement of services that are responsive to the individuals using the services and the community served by the organization.

b. Performance indicators.

(1) There are clearly articulated mission and values statements that are reflected in the long-range organizational plans and in organization policies.

(2) The annual and long-range budgeting process involves appropriate governing and managing levels of leadership and reflects the organization's mission and values. An independent auditor or other person as provided by law performs an annual financial audit.

(3) Individuals using the services or family members of individuals using the services are represented on the organization's governing board or on an advisory board.

(4) The organization's decision-making process, including policy decisions affecting the organization, reflects involvement of the various levels of leadership and responsiveness to staff.

(5) Organization leaders solicit input from leaders of the various community groups representing individuals served by the organization in designing responsive service delivery systems.

(6) Organization leaders develop and implement a service system appropriate to the needs of the individuals served by the organization.

(7) Organization leaders make educational information, resources, and service consultation available to community groups.

24.3(3) *Management information system.*

a. Performance benchmark. Information is obtained, managed, and used in an efficient and effective method to document, enhance, and improve organizational performance and service delivery.

b. Performance indicators.

(1) The organization has a system in place to maintain current individual-specific information documenting the provision and outcomes of services and treatments provided.

(2) The organization has a system in place to maintain the confidentiality and security of information that identifies specific individuals using the services, including mail, correspondence, and electronic files.

24.3(4) *Human resources.*

a. Performance benchmark. The organization provides qualified staff to support the organization's mission and facilitate the provision of quality services.

b. Performance indicators. The organization:

(1) Has a job description in the personnel file of each staff member that clearly defines responsibilities and qualifications.

(2) Has a process to verify qualifications of staff, including degrees, licenses, medication management training, and certification as required by the position, within 90 days of the staff person's employment. For staff hired after July 1, 2006, personnel files contain evidence that verification of professional licenses and college degrees at the bachelor's level or higher, as required by the position, was obtained from the primary source.

(3) Evaluates staff annually.

(4) Includes a plan for staff development for each staff member in the annual evaluation.

(5) Provides training and education to all staff relevant to their positions.

(6) Provides for approved training on child and dependent adult abuse reporter requirements to all organization staff who are mandatory abuse reporters. The organization documents in personnel records training on child and dependent adult abuse reporter requirements.

(7) Has staff members sign a document indicating that they are aware of the organization's policy on confidentiality and maintains these documents in the personnel files.

(8) Provides an initial orientation to new staff and documents this orientation in the employee's personnel file.

(9) Has mechanisms in place that afford staff the right to express concerns about a particular care issue or to file a grievance concerning a specific employment situation.

(10) Completes criminal and abuse record checks and evaluations as required in Iowa Code section 135C.33(5) before employment for any employee who meets with individuals using the services in the individuals' homes.

(11) Establishes and implements a code of ethics for all staff addressing confidentiality, individual rights, and professional and legal issues in providing services and documents in the personnel records that the code of ethics in effect at the time of review has been reviewed with each staff member.

24.3(5) *Organizational environment.*

a. Performance benchmark. The organization provides services in an organizational environment that is safe and supportive for the individuals being served and the staff providing services.

b. Performance indicators.

(1) The environment enhances the self-image of the individual using the service and preserves the individual's dignity, privacy, and self-development.

(2) The environment is safe and accessible and meets all applicable local, state, and federal regulations.

(3) The processes that service and maintain the environment and the effectiveness of the environment are reviewed within the organization's monitoring and improvement system.

(4) The organization establishes intervention procedures for behavior that presents significant risk of harm to the individual using the service or others. The interventions also ensure that the individual's rights are protected and that due process is afforded.

(5) The organization meets state and federal regulations in the way it implements the safe storage, provision, administration, and disposal of medication when used within the service.

(6) All toys and other materials used by children are clean and safe.

441—24.4(225C) Standards for services. Providers for the services set forth in subrules 24.4(9) through 24.4(13) shall meet the standards in subrules 24.4(1) through 24.4(8) in addition to the standards for the specific service. Providers of outpatient psychotherapy and counseling services shall also meet standards in subrules 24.4(1), 24.4(2), 24.4(4), 24.4(6), 24.4(7), and 24.4(8). Providers of emergency services or evaluation services shall meet the benchmark for the services they provide.

24.4(1) *Social history.*

a. Performance benchmark. The organization completes a social history for each individual served.

b. Performance indicators.

(1) The organization collects and documents relevant historical information and organizes the information in one distinct document in a narrative format.

(2) The social history includes:

1. Relevant information regarding the onset of disability.
2. Family, physical, psychosocial, behavioral, cultural, environmental, and legal history.
3. Developmental history for children.
4. Any history of substance abuse, domestic violence, or physical, emotional, or sexual abuse.

(3) Staff review and update the social history at least annually.

24.4(2) *Assessment.*

a. Performance benchmark. The organization develops a written assessment for each individual served. The assessment is the basis for the services provided to the individuals.

b. Performance indicators.

(1) The assessment includes information about the individual's current situation, diagnosis, needs, problems, wants, abilities and desired results, gathered with the individual's involvement.

(2) Staff solicit collateral provider information as appropriate to the individual situation in order to compile a comprehensive and full assessment.

(3) Staff develop and complete the assessment in a narrative format.

(4) Staff base decisions regarding the level, type and immediacy of services to be provided, or the need for further assessment or evaluation, upon the analysis of the information gathered in the assessment.

(5) Staff complete an annual reassessment for each individual using the service and document the reassessment in a written format.

(6) Documentation supporting the diagnosis is contained in the individual's record. A diagnosis of mental retardation is supported by a psychological evaluation conducted by a qualified professional. A diagnosis of developmental disability is supported by professional documentation. A determination of chronic mental illness is supported by a psychiatric or psychological evaluation conducted by a qualified professional.

24.4(3) *Individual service plan.*

a. Performance benchmark. Individualized, planned, and appropriate services are guided by an individual-specific service plan developed in collaboration with the individual using the service, staff, and significantly involved others as appropriate. Services are planned for and directed to where the individuals live, learn, work, and socialize.

b. Performance indicators.

(1) The service plan is based on the current assessment.

(2) The service plan identifies observable or measurable individual goals and action steps to meet the goals.

(3) The service plan includes interventions and supports needed to meet those goals with incremental action steps, as appropriate.

(4) The service plan includes the staff, people, or organizations responsible for carrying out the interventions or supports.

(5) Services defined in the service plan are appropriate to the severity level of problems and specific needs or disabilities.

(6) The plan reflects desired individual outcomes.

(7) Activities identified in the service plan encourage the ability and right of the individual using the service to make choices, to experience a sense of achievement, and to modify or continue participation in the treatment process.

(8) Staff monitor the service plan with review occurring regularly. At least annually, staff assess and revise the service plan to determine achievement, continued need, or change in goals or intervention methods. The review includes the individual using the service, with the involvement of significant others as appropriate.

(9) Staff develop a separate, individualized, anticipated discharge plan as part of the service plan that is specific to each service the individual receives.

(10) The service plan includes documentation of any rights restrictions, why there is a need for the restriction, and a plan to restore those rights or a reason why a plan is not necessary or appropriate.

24.4(4) *Documentation of service provision.*

a. Performance benchmark. Individualized and appropriate intervention services and treatments are provided in ways that support the needs, desires, and goals identified in the service plan, and that respect the rights and choices of the individual using the service.

b. Performance indicators.

(1) Staff document in the narrative the individual's participation in the treatment process.

(2) Responsible staff document the individual's progress toward goals, the provision of staff intervention, and the individual's response to those interventions.

(3) Documentation of service provision is in a written, legible, narrative format in accordance with organizational policies and procedures.

24.4(5) *Incident reports.*

a. Performance benchmark. The organization completes an incident report when organization staff first become aware that an incident has occurred.

b. Performance indicators.

(1) The organization documents the following information:

1. The name of the individual served who was involved in the incident.
2. The date and time the incident occurred.
3. A description of the incident.
4. The names of all organization staff and others who were present or responded at the time of the incident. (For confidentiality reasons, other individuals who receive services should be identified by initials or some other accepted means.)
5. The action the organization staff took to handle the situation.
6. The resolution of or follow-up to the incident.

(2) The staff who were directly involved at the time of the incident or who first became aware of the incident prepare and sign the incident report before forwarding it to the supervisor.

(3) Staff file a copy of the completed incident report in a centralized location and make a notation in the individual's file.

(4) Staff send a copy of the incident report to the individual's Medicaid targeted case manager or county case worker who is involved in funding the service and notify the individual's legal guardian within 72 hours of the incident.

24.4(6) *Confidentiality and legal status.*

a. Performance benchmark. Staff release medical and mental health information only when properly authorized.

b. Performance indicators.

(1) The organization obtains voluntary written authorization from the individual using the service, the individual's legal guardian, or other people authorized by law before releasing personal identifying information, medical records, mental health records, or any other confidential information.

(2) Staff complete voluntary written authorization forms in accordance with existing federal and state laws, rules, and regulations and maintain them in each individual file.

(3) Documentation regarding restrictions on the individual, such as guardianship, power of attorney, conservatorship, mental health commitments, or other court orders, is placed in the individual's record, if applicable.

24.4(7) *Service systems.*

a. Performance benchmark. The organization develops a clear description of each of the services offered. The organization develops an admission and discharge system of services. Staff coordinate services with other settings and providers.

b. Performance indicators.

(1) The organization has established and documented the necessary admission information to determine each individual's eligibility for participation in the service.

(2) Staff include verification in each individual's file that a service description was provided to the individual using the service and, when appropriate, to family or significant others.

(3) Continuity of services occurs through coordination among the staff and professionals providing services. Coordination of services through linkages with other settings and providers has occurred, as appropriate.

(4) Staff include a written discharge summary in each individual record at the time of discharge.

24.4(8) *Respect for individual rights.*

a. Performance benchmark. Each individual using the service is recognized and respected in the provision of services, in accordance with basic human, civil, and statutory rights.

b. Performance indicators.

(1) Staff provide services in ways that respect and enhance the individual's sense of autonomy, privacy, dignity, self-esteem, and involvement in the individual's own treatment. Staff take language barriers, cultural differences, and cognitive deficits into consideration and make provisions to facilitate meaningful individual participation.

(2) Staff inform individuals using the service and, when appropriate, family and significant others of their rights, choices, and responsibilities.

(3) The organization has a procedure established to protect the individuals using the service during any activities, procedure or research that requires informed consent.

(4) The organization verifies that individuals using the service and their guardians are informed of the process to express questions, concerns, complaints, or grievances about any aspect of the individual's service, including the appeal process.

(5) The organization provides the individuals and their guardians the right to appeal the application of policies, procedures, or any staff action that affects the individual using the service. The organization has established written appeal procedures and a method to ensure that the procedures and appeal process are available to individuals using the service.

(6) All individuals using the service, their legal representatives, and other people authorized by law have access to the records of the individual using the service in accordance with state and federal laws and regulations.

24.4(9) *Case management services.* "Case management services" means those services established pursuant to Iowa Code section 225C.20.

a. Performance benchmark. Case management services link individuals using the service to service agencies and support systems responsible for providing the necessary direct service activities and coordinate and monitor those services.

b. Performance indicators.

(1) Staff clearly define the need for case management and document it annually.

(2) At a minimum, the team is composed of the individual using the service, the case manager, and providers or natural supports relevant to the individual's service needs. The team may also include family members, at the discretion of the individual using the service.

(3) The team works with the individual using the service to establish the service plan that guides and coordinates the delivery of the services.

(4) The case manager advocates for the individual using the service.

(5) The case manager coordinates and monitors the services provided to the individual using the service.

(6) Documentation of contacts includes the date, the name of the individual using the service, the name of the case manager, and the place of service.

(7) The case manager holds individual face-to-face meetings at least quarterly with the individual using the service.

(8) Case managers do not provide direct services. Individuals using the service are linked to appropriate resources, which provide necessary direct services and natural supports.

(9) Individuals using the service participate in developing an individualized crisis intervention plan that includes natural supports and self-help methods.

(10) Documentation shows that individuals using the service are informed about their choice of providers as provided in the county management plan.

(11) Within an accredited case management program, the average caseload is no more than 45 individuals per each full-time case manager. The average caseload of children with serious emotional disturbance is no more than 15 children per full-time case manager.

(12) The case manager communicates with the team and then documents in the individual's file a quarterly review of the individual's progress toward achieving the goals.

24.4(10) *Day treatment services.* "Day treatment" means an individualized service emphasizing mental health treatment and intensive psychosocial rehabilitation activities designed to increase the individual's ability to function independently or facilitate transition from residential placement. Staff use individual and group treatment and rehabilitation services based on individual needs and identified behavioral or mental health issues.

a. Performance benchmark. Individuals using the service who are experiencing a significantly reduced ability to function in the community are stabilized and improved by the receipt of psychosocial rehabilitation, mental health treatment services, and in-home support services, and the need for residential or inpatient placement is alleviated.

b. Performance indicators.

(1) Individuals using the service participate with the organizational staff in identifying the problem areas to be addressed and the goals to be achieved that are based on the individual's need for services.

(2) Individuals using the service receive individualized services designed to focus on those identified mental health or behavioral issues that are causing significant impairment in their day-to-day functioning.

(3) Individuals who receive intensive outpatient and day treatment services receive a comprehensive and integrated schedule of recognized individual and group treatment and rehabilitation services.

(4) Individuals using the service and staff review their progress in resolving problems and achieving goals on a frequent and regular basis.

(5) Individuals using the service receive services appropriate to defined needs and current risk factors.

(6) Individuals using the service receive services from staff who are appropriately qualified and trained to provide the range and intensity of services required by the individual's specific problems or disabilities. A mental health professional provides or directly supervises the provision of treatment services.

(7) Individuals using the service participate in discharge planning that focuses on coordinating and integrating individual, family, and community and organization resources.

(8) Family members of individuals using the service are involved in the planning and provision of services, as appropriate and as desired by the individual.

(9) Individuals using the service participate in developing a detailed psychiatric crisis intervention plan that includes natural supports and self-help methods.

24.4(11) *Intensive psychiatric rehabilitation services.* "Intensive psychiatric rehabilitation services" means services designed to restore, improve, or maximize level of functioning, self-care, responsibility, independence, and quality of life; to minimize impairments, disabilities, and disadvantages of people who have a disabling mental illness; and to prevent or reduce the need for services in a hospital or residential setting. Services focus on improving personal capabilities while reducing the harmful effects of psychiatric disability, resulting in an individual's recovering the ability to perform a valued role in society.

a. Performance benchmark. Individuals using the service who are experiencing a significantly reduced ability to function in the community due to a disability are stabilized and experience role recovery by the receipt of intensive psychiatric rehabilitation services.

b. Performance indicators.

(1) Individuals using the service receive services from staff who meet the definition of intensive psychiatric rehabilitation practitioner. The intensive psychiatric rehabilitation supervisor has at least a bachelor's degree in a human services field and 60 hours of training in intensive psychiatric rehabilitation.

(2) Individuals using the service receive four to ten hours per week of recognized psychiatric rehabilitation services. All services are provided for an identified period.

(3) Whenever possible, intensive psychiatric rehabilitative services are provided in natural settings where individuals using the service live, learn, work, and socialize.

(4) Significantly involved others participate in the planning and provision of services as appropriate and as desired by the individual using the service.

(5) Individuals using the service participate in developing a detailed psychiatric crisis intervention plan that includes natural supports and self-help methods.

(6) A readiness assessment is initially completed with staff to assist the individual in choosing a valued role and environment. The readiness assessment culminates in a score that documents the individual's motivational readiness.

(7) During the readiness development phase, staff document monthly in the individual's file changes in the individual's motivational readiness to choose valued roles and environments.

(8) During the goal-choosing phase, staff and the individual identify personal criteria, describe alternative environments, and choose the goal. These activities are documented in the individual's file.

(9) During the goal-achieving phase, the functional assessment and resource assessment are completed. Skill programming or skill teaching takes place. These activities are documented in the individual's file.

(10) During goal keeping, individuals using the service participate in discharge planning that focuses on coordinating and integrating individual, family, community, and organization resources for successful community tenure and the anticipated end of psychiatric rehabilitation services. Staff document increases in skill acquisition and skill competency.

(11) Staff document any positive changes in environmental status, such as moving to a more independent living arrangement, enrolling in an education program, getting a job, or joining a community group.

(12) On an ongoing basis and at discharge, staff or the individual using the service documents the level of individual satisfaction with intensive psychiatric rehabilitation services in each individual's file.

24.4(12) *Supported community living services.* "Supported community living services" means those services provided to individuals with a mental illness, mental retardation, or developmental disability to enable them to develop supports and learn skills that will allow them to live, learn, work and socialize in the community. Services are individualized, need- and abilities-focused, and organized according to the following components: outreach to appropriate support or treatment services; assistance and referral in meeting basic human needs; assistance in housing and living arrangements; crisis intervention and assistance; social and vocational assistance; the provision of or arrangement for personal, environmental, family, and community supports; facilitation of the individual's identification and development of natural support systems; support, assistance, and education to the individual's family and to the community; protection and advocacy; and service coordination.

These services are to be provided by organizational staff or through linkages with other resources and are intended to be provided in the individual's home or other natural community environment where the skills are learned or used. Supported community living is not part of an organized mental health support or treatment group, drop-in center, or clubhouse. Skill training groups may be one of the activities in the service plan and part of supported community living. Skill training groups cannot stand alone as a supported community living service.

a. Performance benchmark. Individuals using the service live, learn, work, and socialize in the community.

b. Performance indicators.

(1) Individuals receive services within their home and community setting where the skills are learned or used.

(2) At intake, the individuals using the service participate in a functional assessment to assist in defining areas of service need and establishing a service plan. Staff summarize the findings of the functional assessment in a narrative that describes the individual's current level of functioning in the areas of living, learning, working, and socialization. Staff review functional assessments on a regular basis to determine progress.

(3) Individuals using the service receive skill training and support services directed to enabling them to regain or attain higher levels of functioning or to maximize functioning in the current goal areas.

(4) Services are delivered on an individualized basis in the place where the individual using the service lives or works.

(5) Documentation that steps have been taken to encourage the use of natural supports and develop new ones is in the individual file.

(6) Individuals using the service participate in developing a detailed individualized crisis intervention plan that includes natural supports and self-help methods.

24.4(13) *Partial hospitalization services.* "Partial hospitalization services" means an active treatment program providing intensive group and individual clinical services within a structured therapeutic environment for individuals who are exhibiting psychiatric symptoms of sufficient severity to cause significant impairment in day-to-day functioning. Short-term outpatient crisis stabilization and rehabilitation services are provided to avert hospitalization or to transition from an acute care setting.

Services are supervised and managed by a mental health professional, and psychiatric consultation is routinely available. Clinical services are provided by a mental health professional.

a. Performance benchmark. Individuals who are experiencing serious impairment in day-to-day functioning due to severe psychiatric distress are enabled to remain in their community living situation through the receipt of therapeutically intensive milieu services.

b. Performance indicators.

(1) Individuals using the service and staff mutually develop an individualized service plan that focuses on the behavioral and mental health issues and problems identified at admission. Goals are based on the individual's need for services.

(2) Individuals using the service receive clinical services that are provided and supervised by mental health professionals. A licensed and qualified psychiatrist provides psychiatric consultation and medication services.

(3) Individuals using the service receive a comprehensive schedule of active, planned, and integrated psychotherapeutic and rehabilitation services provided by qualified professional staff.

(4) Individuals using the service receive group and individual treatment services that are designed to increase their ability to function independently.

(5) Individuals using the service are involved in the development of an anticipated discharge plan that includes linkages to family, provider, and community resources and services.

(6) Individuals using the service have sufficient staff available to ensure their safety, to be responsive to crisis or individual need, and to provide active treatment services.

(7) Individuals using the service receive services commensurate with current identified risk and need factors.

(8) Support systems identified by individuals using the service are involved in the planning and provision of services and treatments as appropriate and desired by the individual using the service.

(9) Individuals using the service participate in developing a detailed psychiatric crisis intervention plan that includes natural supports and self-help methods.

24.4(14) *Outpatient psychotherapy and counseling services.* "Outpatient psychotherapy and counseling services" means a dynamic process in which the therapist uses professional skills, knowledge and training to enable individuals using the service to realize and mobilize their strengths and abilities, take charge of their lives, and resolve their issues and problems. Psychotherapy services may be individual, group, or family, and are provided by a person meeting the criteria of a mental health professional or by a person with a master's degree or an intern working on a master's degree in a mental health field who is directly supervised by a mental health professional.

a. Performance benchmark. Individuals using the service realize and mobilize their own strengths and abilities to take control of their lives in the areas where they live, learn, work, and socialize.

b. Performance indicators.

(1) Individuals using the service are prepared for their role as partners in the therapeutic process at intake where they define their situations and evaluate those factors that affect their situations.

(2) Individuals using the service establish desired problem resolution at intake during the initial assessment.

(3) Psychiatric services other than psychopharmacological services are available from the organization as needed by the individual using the service.

(4) Psychopharmacological services are available from the organization as needed.

(5) Staff document mutually agreed-upon treatment goals during or after each session. A distinct service plan document is not required.

(6) Staff document mutually agreed-upon supports and interventions during or after each session. A distinct service plan document is not required.

(7) Staff document in the progress notes the individual's status at each visit and the reasons for continuing or discontinuing services. A distinct discharge summary document is not required.

(8) Any assignment of activities to occur between sessions is documented in the following session's documentation.

(9) Individuals using the service who have a chronic mental illness participate in developing a detailed psychiatric crisis intervention plan that includes natural supports and self-help methods.

(10) The record documents that the organization follows up on individuals who miss appointments.

24.4(15) *Emergency services.* "Emergency services" means crisis services that provide a focused assessment and rapid stabilization of acute symptoms of mental illness or emotional distress and are available and accessible, by telephone or face-to-face, on a 24-hour basis. The clinical assessment and psychotherapeutic services are provided by a person who has training in emergency services and who is a mental health professional or has access to a mental health professional, at least by telephone.

Services may be provided by a person who holds a master's degree in a mental health field including, but not limited to, psychology, counseling and guidance, psychiatric nursing, psychiatric rehabilitation, or social work; or a person who holds a bachelor's degree in a human service discipline with five years' experience providing mental health services or human services; or a psychiatric nurse who has three years of clinical experience in mental health. A comprehensive social history is not required for this treatment.

a. Performance benchmark. Individuals using the service receive emergency services when needed that provide a focused assessment and rapid stabilization of acute symptoms of mental illness or emotional distress.

b. Performance indicators.

(1) Individuals using the service can access 24-hour emergency services by telephone or in person.

(2) Information about how to access emergency services is publicized to facilitate availability of services to individuals using the service, family members, and the public.

(3) Individuals using the service receive assessments and services from either a mental health professional or from personnel who meet the requirements above and are supervised by a mental health professional. Psychiatric consultation is available, if needed.

(4) Individuals using the service receive intervention commensurate with current identified risk factors.

(5) Significantly involved others are involved as necessary and appropriate to the situation and as desired by the individual using the service.

(6) Individuals using the service are involved in the development of postemergency service planning and resource identification and coordination.

(7) Staff document contacts in a narrative format and maintain them in a central location that will allow timely response to the problems presented by the individual using the service.

(8) Timely coordination of contacts with relevant professionals is made.

24.4(16) *Evaluation services.* "Evaluation services" means screening, diagnosis and assessment of individual and family functioning needs, abilities, and disabilities, and determining current status and functioning in the areas of living, learning, working, and socializing.

a. Performance benchmark. Individuals using the service receive comprehensive evaluation services that include screening, diagnosis, and assessment of individual or family functioning, needs and disabilities.

b. Performance indicators.

(1) Evaluations include screening, diagnosis, and assessment of individual or family functioning, needs, abilities, and disabilities.

(2) Evaluations consider the emotional, behavioral, cognitive, psychosocial, and physical information as appropriate and necessary.

(3) Evaluations includes recommendations for services and need for further evaluations.

(4) Mental health evaluations are completed by a person who meets the criteria of a mental health professional, or a person with a master's degree who is license-eligible and supervised by a mental health professional, or an intern of a master's or doctorate program who is supervised by a mental health professional.

441—24.5(225C) Accreditation. The commission shall make all decisions involving issuance, denial, or revocation of accreditation. This accreditation shall delineate all categories of service the organization

is accredited to provide. Although an organization may have more than one facility or service site, the commission shall issue only one accreditation notice to the organization, except as provided in paragraph 24.5(5)*"f."*

24.5(1) *Organizations eligible for accreditation.* The commission accredits the following organizations:

a. Case management providers.

b. Community mental health centers.

c. Supported community living providers.

d. Mental health service providers.

24.5(2) *Application and renewal procedures.* An applicant for accreditation shall submit Form 470-3005, Application for Accreditation, to the Division of Behavioral, Developmental, and Protective Services, Department of Human Services, Fifth Floor, Hoover State Office Building, 1305 East Walnut, Des Moines, Iowa 50319-0114.

a. The application shall be signed by the organization's chief executive officer and the chairperson of the governing body and shall include the following information:

(1) The name and address of the applicant organization.

(2) The name and address of the chief executive officer of the applicant organization.

(3) The type of organization and specific services for which the organization is applying for accreditation.

(4) The targeted population groups for which services are to be provided, as applicable.

(5) The number of individuals in each of the targeted population groups to be served, as applicable.

(6) Other information related to the standards as requested by division staff.

b. Organizations that have received an initial 270-day accreditation and have not provided services by the end of the 270 days shall have their accreditation lapse for that specific service. This lapse of accreditation shall not be considered a denial. New applications may be submitted that include the waiting list of individuals to be served along with specific timelines of when the services will begin.

c. An organization in good standing may apply for an add-on service.

24.5(3) *Application review.* Upon receipt of an application, Form 470-3005, the division shall review the materials submitted to determine whether the application is complete and request any additional material as needed. Survey reviews shall commence only after the organization has submitted all application material.

a. For a new organization, staff may initially conduct a desk audit or on-site visit to review the organization's mission, policies, procedures, staff credentials, and program descriptions.

b. The division shall review organizational services and activities as determined by the accreditation category. This review may include audits of case records, administrative procedures, clinical practices, personnel records, performance improvement systems and documentation, and interviews with staff, individuals, boards of directors, or others deemed appropriate, consistent with the confidentiality safeguards of state and federal laws.

c. A team shall make an on-site visit to the organization. The division shall not be required to provide advance notice to the provider of the on-site visit for accreditation.

d. The on-site team shall consist of designated members of the division staff. At the division's discretion, the team may include provider staff of other providers, individuals, and others deemed appropriate.

e. The team shall survey the organization and the services indicated on the accreditation application in order to verify information contained in the application and ensure compliance with all applicable laws, rules, and regulations. At the time of a one-year recertification visit, the team shall review the services that did not receive three-year accreditation.

f. The team shall review case records and personnel records to see how the organization implements each of the indicators in the standards. If the documentation is not found in the records, the organization shall show, at the time the division staff is on site, documentation of how the indicator was accomplished.

g. When an organization subcontracts with agencies to provide services, on-site reviews shall be done at each subcontracting agency to determine if each agency meets all the requirements in this chapter. The accreditation is issued to the organization.

h. At the end of the survey, the team leader shall lend an exit review. Before the close of the on-site review, the organization must provide the team leader any documentation that demonstrates how the organization has met these standards for services.

i. The accreditation team leader shall send a written report of the findings to the organization within 30 working days after completion of the accreditation survey.

j. Organizations required to develop a corrective action and improvement plan pursuant to subrule 24.5(4)*"a"* shall submit the plan to the division within 30 working days after the receipt of a report issued as a result of the division's survey review. The action plan shall include specific problem areas cited, corrective actions to be implemented by the organization, dates by which each corrective measure shall be completed, and quality assurance and improvement activities to measure and ensure continued compliance.

k. Quality assurance staff shall review and approve the corrective action and improvement plan before making an accreditation recommendation to the commission.

l. The division shall offer technical assistance to organizations applying for first-time accreditation. Following accreditation, any organization may request technical assistance from the division to bring into conformity those areas found in noncompliance with this chapter's requirements. If multiple deficiencies are noted during a survey, the commission may also require that technical assistance be provided to an organization, as staff time permits, to assist in implementation of an organization's corrective action plan. Renewal applicants may be provided technical assistance as needed, if staff time permits.

24.5(4) *Performance outcome determinations.* There are three major areas addressed in these standards: policies and procedures, organizational activities, and services, as set forth in rules 441—24.2(225C), 24.3(225C), and 24.4(225C). Each rule contains standards, with a performance benchmark and performance indicators for each standard. Each of the applicable standards for the three areas (policy and procedures, organizational activities, and services) shall be reviewed.

a. Quality assurance staff shall determine a performance compliance level based on the number of indicators found to be in compliance.

(1) For service indicators, if 25 percent or more of the files reviewed do not comply with the requirements for a performance indicator, then that indicator is considered out of compliance and corrective action is required.

(2) Corrective action is required when any indicator under policies and procedures or organizational activities is not met.

b. In the overall rating, the performance rating for policy and procedures shall count as 15 percent of the total, organizational activities as 15 percent of the total, and services as 70 percent of the total.

(1) Each of the three indicators for policy and procedures has a value of 5 out of a possible score of 15.

(2) Each of the 34 indicators for organizational activities has a value of .44 out of a possible score of 15.

(3) Each service has a separate weighting according to the total number of indicators applicable for that service, with a possible score of 70, as follows:

Service	Number of indicators	Value of each indicator
Case management	51	1.37
Day treatment	48	1.46
Intensive psychiatric rehabilitation	51	1.37
Supported community living	45	1.55
Partial hospitalization	48	1.46
Outpatient psychotherapy and counseling	35	2.00
Emergency	8	8.75
Evaluation	4	17.50

c. Quality assurance staff shall determine a separate score for each service to be accredited. When an organization offers more than one service under this chapter, there shall be one accreditation award for all the services based upon the lowest score of the services surveyed.

24.5(5) *Accreditation decisions.* The division shall prepare all documents with a final recommendation regarding accreditation to be presented at the commission meeting. The division shall mail to all commission members summary reports of the on-site service review or desk review and a final recommendation concerning accreditation on each application to be processed at the next commission meeting.

If the commission approves accreditation, Form 470-3006, Notice of Action-Approval, shall be issued which states the duration of the accreditation and the services that the organization is accredited to provide. If the commission denies or revokes accreditation, Form 470-3008, Notice of Action-Denial, shall be issued which states the reasons for the denial.

a. *Initial 270-day accreditation.* This type of accreditation may be granted to a new organization. The commission shall base the accreditation decision on a report by the division that:

(1) The organization has an approved policies and procedures manual that includes job descriptions.

(2) Staff assigned to the positions meet the qualifications in the standards and the policies and procedures of the organization.

b. *Three-year accreditation.* An organization or service is eligible for this type of accreditation if it has achieved an 80 percent or higher performance compliance level. The organization may be required to develop and submit a plan of corrective action and improvement that may be monitored either by written report or an on-site review.

c. *One-year accreditation.* An organization is eligible for this type of accreditation when multiple and substantial deficiencies exist in specific areas causing compliance levels with performance benchmarks and indicators to fall between 70 percent and 79 percent, or when previously required corrective action plans have not been implemented or completed. The organization must submit a corrective action plan to correct and improve specific deficiencies and overall levels of functioning. Quality assurance staff shall monitor this plan through on-site reviews, written reports and the provision of technical assistance.

d. *Probational 180-day accreditation.* An organization is eligible for probational 180-day accreditation instead of denial when the overall compliance level is from 60 to 69 percent, and pervasive and serious deficiencies exist; or when corrective action plans previously required as a result of a one-year accreditation have not been implemented or completed. The commission may downgrade organizations with a one-year or three-year accreditation to the probational 180-day accreditation when one or more complaints are founded.

All deficiencies must be corrected by the time of the follow-up on-site survey at the conclusion of the provisional period. After this survey, the organization shall meet the standards for accreditation for a one-year accreditation, or the commission shall deny accreditation.

e. *Add-on service accreditation.* When the on-site review of the add-on service results in a score comparable to the overall organization's score at the time of the most recent accreditation, the organization shall have the add-on accreditation date coincide with the overall accreditation date of the organization. If the add-on service on-site review results in a lower score and lower accreditation

decision, division staff shall conduct another on-site review for that add-on service when the add-on service accreditation expires.

f. *Special terms.*

(1) When an organization subcontracts with more than one agency, the length of accreditation shall be determined individually.

(2) The accreditation period for services that have deemed status according to rule 24.6(225C) shall coincide with the period awarded by the national accrediting body or the certification for home-and community-based services.

(3) New or add-on services that meet the requirements for accreditation shall receive an initial 270-day accreditation for that individual service. The term of accreditation shall be determined individually. At the time of recertification of the new add-on service, recommendation may be made to coincide with the term of accreditation for the other services of that organization that are accredited by the commission.

(4) An organization must notify the division when there are changes in its ownership, structure, management, or service delivery.

g. *Extensions.* The division may grant an extension to the period of accreditation if there has been a delay in the accreditation process that is beyond the control of the organization, the division, or the commission; or the organization has requested an extension to permit the organization to prepare and obtain approval of a corrective action plan. The division shall establish the length of the extension on a case-by-case basis.

h. *Denial of accreditation.* An emergency commission meeting may be called to consider denial or revocation of accreditation.

(1) Accreditation shall be denied when there are pervasive and serious deficiencies that put individuals at immediate risk or when the overall compliance level falls to 59 percent or below. Under such circumstances no corrective action report shall be required.

(2) When one or more complaints are received, quality assurance staff shall complete an investigation and submit a report to the commission. If any of the complaints are substantiated and the commission determines that there is a pervasive or serious deficiency, the commission may deny accreditation.

(3) An organization whose accreditation has been denied or revoked shall not be approved for any service for at least six months from the notice of decision denying or revoking accreditation.

(4) If the organization disagrees with any action or failure to act in regard to the notice of decision to deny accreditation to the organization, the organization has the right to appeal in accordance with 441—Chapter 7.

24.5(6) *Nonassignability.* Accreditation shall not be assignable to any other organization or provider. Any person or other legal entity acquiring an accredited facility for the purpose of operating a service shall make an application as provided in subrule 24.5(2) for a new certificate of accreditation. Similarly, any organization having acquired accreditation and desiring to alter the service philosophy or transfer operations to different premises must notify the division in writing 30 calendar days before taking action in order for the division to review the change.

24.5(7) *Discontinuation.*

a. *Discontinued organization.* A discontinued organization is one that has terminated all of the services for which it has been accredited. Accreditation is not transferable between organizations.

(1) An organization shall notify the division in writing of any sale, change in business status, closure, or transfer of ownership of the business at least 30 calendar days before the action.

(2) The organization shall be responsible for the referral and placement of individuals using the services, as appropriate, and for the preservation of all records.

b. *Discontinued service.* An organization shall notify the division in writing of the discontinuation of an accredited or certified service at least 30 calendar days before the service is discontinued.

(1) Notice of discontinuation of a service shall not be initiated during the 30 days before the start of a survey. Once a survey has begun, all services shall be considered in determining the organization's accreditation score.

(2) The organization shall be responsible for the referral and placement of individuals using the services, as appropriate, and for the preservation of all records.

441—24.6(225C) Deemed status. The commission shall grant deemed status to organizations accredited by a recognized national, not-for-profit, accrediting body when the commission determines the accreditation is for similar services. The commission may also grant deemed status for supported community living services to organizations that are certified under the Medicaid home- and community-based services (HCBS) mental retardation waiver.

24.6(1) *National accrediting bodies.*

a. The national accrediting bodies currently recognized as meeting division criteria for possible deeming are:

1. Joint Commission on Accreditation of Healthcare Organizations (JCAHO).
2. The Commission on Accreditation of Rehabilitation Facilities (CARF).
3. The Council on Quality and Leadership in Supports for People with Disabilities (The Council).
4. Council on Accreditation of Services for Families and Children (COA).

b. The accreditation credentials of these national bodies must specify the type of organization, programs, and services that these bodies accredit and include targeted population groups, if appropriate.

c. Deemed status means that the division is accepting an outside body's review, assessment, and accreditation of an organization's functioning and services. Therefore, the accrediting body doing the review must be assessing categories of organizations and types of programs and services corresponding to those described under this chapter. An organization that has deemed status must adhere to and be accountable for the rules in this chapter.

d. When an organization that is nationally accredited requests deemed status for services not covered by the national body's standards but covered under this chapter, the division shall accredit those services. Division staff shall provide technical assistance to organizations with deemed status as time permits.

24.6(2) *Application for deemed status.*

a. To apply for deemed status, the organization shall submit Form 470-3332, Application and Letter of Agreement, and copies of the latest survey report and accreditation certificate, documentation of specific programming policies and procedures for populations being served, and credentials for staff providing services to populations served.

b. The division shall not accept an application for deemed status once the division has begun an on-site visit. The organization shall complete the accreditation process.

24.6(3) *Requirements for deemed status.* To be eligible for deemed status, the organization shall:

a. Be currently accredited by a recognized national accrediting body for services as defined in subrule 24.6(1); or

b. Be currently accredited for supported community living under the Medicaid HCBS mental retardation waiver pursuant to 441—subrule 77.37(14). If individuals with mental illness are served, the organization must submit verification of the training and credentials of the staff to show that its staff can meet the needs of the individuals served.

c. Require the supported community living staff to have the same supervisor as the HCBS/MR program.

d. Require staff for the program being deemed to have the training and credentials needed to meet the needs of the person served.

e. Require staff to meet the incident reporting requirements in subrule 24.4(5).

24.6(4) *Granting of deemed status.* When the commission grants deemed status, the accreditation period shall coincide with the period awarded by the national accrediting body or the certification for home- and community-based services. However, under no circumstances shall the commission award accreditation for longer than three years.

24.6(5) *Reservations.* When deemed status is granted, the commission and the division reserve rights to the following:

a. To have division staff conduct on-site reviews for those organizations applying for deemed status which the division has not previously accredited.

b. To have division staff do joint site visits with the accrediting body, attend exit conferences, or conduct focused follow-behind visits as determined to be appropriate in consultation with the national accrediting organization and the provider organization.

c. To be informed of and to investigate all complaints that fall under this chapter's jurisdiction according to the process in rule 441—24.7(225C). The division shall report findings to the national accrediting body.

d. To review and act upon deemed status when:

(1) Complaints have been founded, or

(2) The organization's national accreditation status expires without renewal, or

(3) The national accrediting body downgrades or withdraws the organization's status.

24.6(6) *Continuation of deemed status.*

a. The organization shall send a copy of Form 470-3332, Application and Letter of Agreement, along with a copy of the application for renewal to the national accrediting body at the same time as application is made to a national accrediting body.

b. HCBS staff shall furnish to the division copies of the letter notifying a provider of a forthcoming recertification for organizations deemed for supported community living under the HCBS mental retardation waiver.

c. Following the on-site review by a national accrediting body, the organization shall send the division a copy of the cover sheet and the national accrediting body report within 30 calendar days from the date that the organization receives the documents. If a corrective action plan is required, the organization shall send the division a copy of all correspondence and documentation related to the corrective action.

d. HCBS staff shall furnish the division with copies of HCBS certification reports and any corrective action required by HCBS within 30 calendar days after HCBS staff complete the report or the organization completes required corrective action.

441—24.7(225C) Complaint process. The division shall receive and record complaints by individuals using the services, employees, any interested people, and the public relating to or alleging violations of applicable requirements of the Iowa Code or administrative rules.

24.7(1) *Submittal of complaint.* The complaint may be delivered personally or by mail to the Division of Behavioral, Developmental, and Protective Services, Department of Human Services, Hoover State Office Building, Fifth Floor, 1305 East Walnut, Des Moines, Iowa 50319-0114, or by telephone (515)281-5874.

a. The division shall assist individuals in making a complaint as needed or requested.

b. The information received should specifically state the basis of the complaint. The division shall keep the name of the complainant confidential to the extent allowed by law.

24.7(2) *Review of complaint.* Upon receipt of a complaint, the division shall make a preliminary desk review of the complaint to determine an appropriate response. That response may include notifying the person who submitted the complaint that there is no basis for a review, referring the complaint to another investigative body, or making a determination to do a full investigation.

24.7(3) *Investigation of complaint.* If the division concludes that the complaint is reasonable, has merit, and is based on a violation of rules in this chapter, it may make an investigation of the organization. The division may investigate complaints by an office audit or by an on-site investigation. The division shall give priority for on-site investigations to instances when individuals using the service are in immediate jeopardy.

a. If a decision is made to conduct an on-site investigation, the on-site review does not require advance notice to the organization. The division shall notify the chief executive officer and board chairperson of the organization involved before or at the commencement of the on-site investigation that the division has received a complaint.

b. The division shall give the organization an opportunity to informally present a position regarding allegations in the complaint. The organization may submit the position in writing within five working days following the on-site visit or present it in a personal conference with division staff.

c. The division shall submit a written report by certified mail to the chief administrative officer of the organization and the chairperson of the board of directors within 20 working days after completion of the investigation.

d. The report shall indicate whether the complaint was or was not substantiated, the basis for the substantiation or nonsubstantiation, the specific rules violated, and a recommendation for corrective action with time lines specified in the report.

e. The date of delivery shown by the certified mail stub shall constitute the date of official notice.

24.7(4) *Review by commission.* When individuals receiving services are in immediate jeopardy, the commission may call an emergency meeting to make a decision on possible revocation or denial of accreditation.

a. To the extent allowed by Iowa Code section 21.5, the commission may review the complaint and investigation report in a closed meeting. The action taken by the commission shall be voted upon in the reconvened public meeting and entered into the official record of commission minutes.

b. If the complaint is substantiated, the commission make take actions deemed appropriate, which may include shortening the term of accreditation, requiring a corrective action plan, or suspending or revoking an organization's accreditation, depending on the severity of the substantiated complaint.

c. The division shall inform the complainant and the organization by certified mail of the findings and actions taken by the commission. The date of delivery shown by the certified mail stub shall constitute the date of official notice.

24.7(5) *Corrective action plan.* When the commission acts to suspend or revoke accreditation, there will be no corrective action plan. In other instances, if the complaint is substantiated, the organization shall submit a corrective action plan to the division within 20 calendar days after receiving the commission's decision. This plan must respond to violations cited and commission requirements and include time lines, internal monitoring systems, and performance improvement planning.

Failure of the organization to respond within 20 calendar days with an acceptable corrective action plan that addresses the organization's plan of correction following a substantiated investigation or complaint may of itself constitute the basis for revocation or suspension of accreditation. The commission shall determine the appropriate action based on the information submitted. The division shall notify the organization of any action the commission takes.

441—24.8(225C) Appeal procedure. An appeal may be filed using the procedure identified in 441—Chapter 7. Notice of an appeal shall be sent to Appeals Section, Department of Human Services, Hoover State Office Building, Fifth Floor, 1305 East Walnut, Des Moines, Iowa 50319-0114, within 30 calendar days of the written decision from the commission.

441—24.9(225C) Exceptions to policy. Requests for exceptions to the policies in this chapter shall follow the policies and procedures in the department's general rule on exceptions to policy at 441—1.8(17A,217).

These rules are intended to implement Iowa Code chapter 225C.

441—24.10 to **24.19** Reserved.

DIVISION II
CRISIS RESPONSE SERVICES

PREAMBLE

The department of human services in consultation with the mental health and disability services commission has established this set of standards to be met by all providers of crisis response services.

[**ARC 1660C**, IAB 10/15/14, effective 12/1/14]

441—24.20(225C) Definitions.

"Action plan" means a written plan developed for discharge in collaboration with the individual receiving crisis response services to identify the problem, prevention strategies, and management tools for future crises.

"Crisis assessment" means a face-to-face clinical interview to ascertain an individual's current and previous level of functioning, potential for dangerousness, physical health, and psychiatric and medical condition. The crisis assessment becomes part of the individual's action plan.

"Crisis incident" means an occurrence leading to physical injury or death, or an occurrence resulting from a prescription medication error, or an occurrence triggering a report of child or dependent adult abuse.

"Crisis response services" means short-term individualized crisis stabilization services which follow a crisis screening or assessment and which are designed to restore the individual to a prior functional level.

"Crisis response staff" means a person trained to provide crisis response services in accordance with rule 441—24.24(225C).

"Crisis screening" means a process to determine what crisis response service is appropriate to effectively resolve the presenting crisis.

"Crisis stabilization community-based services" or *"CSCBS"* means short-term services designed to de-escalate a crisis situation and stabilize an individual following a mental health crisis and provided where the individual lives, works or recreates.

"Crisis stabilization residential services" or *"CSRS"* means a short-term alternative living arrangement designed to de-escalate a crisis situation and stabilize an individual following a mental health crisis and is provided in organization-arranged settings of no more than 16 beds.

"Department" means the department of human services.

"Dispatch" means the function within crisis line operations to coordinate access to crisis care.

"Face-to-face" means services provided in person or utilizing telehealth in conformance with the federal Health Insurance Portability and Accountability Act (HIPAA) privacy rules.

"Family support peer specialist" means the same as defined in rule 441—25.1(331).

"Informed consent" means the same as defined in rule 441—24.1(225C).

"Mental health crisis" means a behavioral, emotional, or psychiatric situation which results in a high level of stress or anxiety for the individual or persons providing care for the individual and which cannot be resolved without intervention.

"Mental health professional" means the same as defined in Iowa Code section 228.1.

"Mobile response" means a mental health service which provides on-site, face-to-face mental health crisis services for an individual experiencing a mental health crisis. Crisis response staff providing mobile response have the capacity to intervene wherever the crisis is occurring, including but not limited to the individual's place of residence, an emergency room, police station, outpatient mental health setting, school, recovery center or any other location where the individual lives, works, attends school, or socializes.

"Peer support services" means a service provided by a peer support specialist, including but not limited to education and information, individual advocacy, family support groups, crisis response, and respite to assist individuals in achieving stability in the community.

"Peer support specialist" means the same as defined in rule 441—25.1(331).

"Physical health" means any chronic or acute health factors that need to be addressed during crisis delivery services.

"Qualified prescriber" means a practitioner or other staff following the instruction of a practitioner as defined in Iowa Code section 155A.3 and a physician assistant or advanced registered nurse practitioner operating under the prescribing authority granted in Iowa Code section 147.107.

"Restraint" means the application of physical force or the use of a chemical agent or mechanical device for the purpose of restraining the free movement of an individual's body to protect the individual, or others, from immediate harm.

"Rights restriction" means limitations not imposed on the general public in the areas of communications, mobility, finances, medical or mental health treatment, intimacy, privacy, type of work, religion, and place of residence.

"Self-administered medication" means the process where a trained staff member observes an individual inject, inhale, ingest or, by any other means, take medication following the instructions of a qualified prescriber.

"Stabilization plan" means a written short-term strategy used to stabilize a crisis and developed by a mental health professional, in collaboration with the crisis response staff and with the involvement and consent of the individual or the individual's representative.

"Staff-administered medication" means the direct application of a prescription drug, whether by injection, inhalation, ingestion, or any other means, to the body of an individual by a qualified prescriber or authorized staff following instructions of a qualified prescriber.

"Telehealth" is the use of electronic information and telecommunications technologies to support long-distance clinical health care, patient and professional health-related education, public health and health administration. Technologies include videoconferencing, the Internet, store-and-forward imaging, streaming media, and terrestrial and wireless communications.

"Treatment summary" means a written summarization of the treatment and action plan at the point of an individual's discharge or transition to another service.

"Twenty-four-hour crisis line" means a crisis line providing information and referral, counseling, crisis service coordination, and linkages to crisis screening and mental health services 24 hours a day.

"Twenty-four-hour crisis response" means services are available 24 hours a day, 365 days a year, providing access to crisis screening and assessment and linkage to mental health services.

"Twenty-three-hour observation and holding" means a level of care provided for up to 23 hours in a secure and protected, medically staffed, psychiatrically supervised treatment environment.

"Warm line" means a telephone line staffed by individuals with lived experience who provide nonjudgmental, nondirective support to an individual who is experiencing a personal crisis.

[**ARC 1660C**, IAB 10/15/14, effective 12/1/14]

441—24.21(225C) Standards for crisis response services. An organization may be accredited to provide any one or all of the identified crisis response services. An organization seeking crisis response service accreditation shall comply with the general standards within this division and additional standards for each specific service.

[**ARC 1660C**, IAB 10/15/14, effective 12/1/14]

441—24.22(225C) Standards for policies and procedures. Policies and procedures manuals contain policy guidelines and administrative procedures for all activities and services and address the standards in rule 441—24.2(225C).

[**ARC 1660C**, IAB 10/15/14, effective 12/1/14]

441—24.23(225C) Standards for organizational activities.

24.23(1) The organization shall meet the standards in subrules 24.3(1) through 24.3(5).

24.23(2) The organization shall describe the staffing structure that details how staff are utilized to provide the specific crisis stabilization services in rules 441—24.32(225C) through 441—24.39(225C).

[**ARC 1660C**, IAB 10/15/14, effective 12/1/14; **ARC 3057C**, IAB 5/10/17, effective 7/1/17]

441—24.24(225C) Standards for crisis response staff. All crisis response staff shall meet the qualifications described in this rule. Additional staff requirements are described in each service.

24.24(1) *Performance benchmark.* Qualified crisis response staff provide crisis response services.

24.24(2) *Performance indicators.*

a. One or more of the following qualifications are met:

(1) A mental health professional as defined in Iowa Code section 228.1.

(2) A bachelor's degree with 30 semester hours or equivalent in a human services field (including, but not limited to, psychology, social work, nursing, education) and a minimum of one year of experience in behavioral or mental health services.

(3) A law enforcement officer with a minimum of two years of experience in the law enforcement officer's field.

(4) An emergency medical technician (EMT) with a minimum of two years of experience in the EMT's field.

(5) A peer support specialist with a minimum of one year of experience in behavioral or mental health services.

(6) A family support peer specialist with a minimum of one year of experience in behavioral or mental health services.

(7) A registered nurse with a minimum of one year of experience in behavioral or mental health services.

(8) A bachelor's degree in a non-human services-related field, associate's degree, or high school diploma (or equivalency) with a minimum of two years of experience in behavioral or mental health services, and 30 hours of crisis and mental health in-service training (in addition to the required 30 hours of department-approved training).

b. Documentation in staff records to verify satisfactory completion of department-approved training including:

(1) A minimum of 30 hours of department-approved crisis intervention and training.

(2) A posttraining assessment of competency is completed.

[**ARC 1660C**, IAB 10/15/14, effective 12/1/14; **ARC 3057C**, IAB 5/10/17, effective 7/1/17]

441—24.25(225C) Standards for services.

24.25(1) *Standard for eligibility.* An eligible recipient is an individual experiencing a mental health crisis or emergency where a mental health crisis screening is needed to determine the appropriate level of care.

24.25(2) *Confidentiality and legal status.* Standards in subrule 24.4(6) are met.

24.25(3) *Service systems.* Standards in subparagraphs 24.4(7)*"b"*(1) to (3) are met.

24.25(4) *Respect for individual rights.* Standards in subrule 24.4(8) are met.

[**ARC 1660C**, IAB 10/15/14, effective 12/1/14]

441—24.26(225C) Accreditation. The administrator for the division of mental health and disability services shall determine whether to grant, deny or revoke the accreditation of the centers and services as determined in Iowa Code section 225C.6(1)*"c."*

24.26(1) The organization shall meet the standards of subrule 24.5(1), with the addition of crisis response service organizations.

24.26(2) The organization shall meet the standards in subrules 24.5(2) and 24.5(3).

24.26(3) Performance outcome determinations are as follows:

a. Quality assurance staff shall determine a performance compliance level based on the number of indicators found to be in compliance.

(1) For service indicators, if 25 percent or more of the files reviewed do not comply with the requirements for a performance indicator, that indicator is considered out of compliance and corrective action is required.

(2) Corrective action is required when any indicator under policies and procedures or activities is not met.

b. In the overall rating, the performance rating for policies and procedures shall count as 15 percent of the total, activities as 15 percent of the total, and services as 70 percent of the total.

(1) Each of the three indicators for policies and procedures has a value of 5.0 out of a possible score of 15.

(2) Each of the 34 indicators for activities has a value of .44 out of a possible score of 15.

(3) Each service has a separate weighting according to the total number of indicators applicable for that service, with a possible score of 70, as follows:

c. Quality assurance staff shall determine a separate score for each service to be accredited. When an organization offers more than one service under this chapter, there shall be one accreditation award for all the services based upon the lowest score of the services surveyed.

Service	Number of Indicators	Value of Each Indicator
24-hour crisis response	19	3.9
Crisis evaluation	20	3.5
24-hour crisis line	23	3.0
Warm line	20	3.5
Mobile response	18	3.9
23-hour observation and holding	44	1.6
Crisis stabilization, community-based	39	1.8
Crisis stabilization, residential	50	1.4

24.26(4) The organization shall meet the standards in subrules 24.5(5) to 24.5(7).
[**ARC 1660C**, IAB 10/15/14, effective 12/1/14]

441—24.27(225C) Deemed status. The department shall grant deemed status to organizations accredited by a recognized national, not-for-profit, accrediting body when the department determines the accreditation is for similar services. The organization shall fulfill the standards described in subrules 24.6(1) to 24.6(6). The national accrediting bodies currently recognized as meeting division criteria for possible deeming are:

1. The Joint Commission on Accreditation of Healthcare Organizations (JCAHO).
2. The Commission on Accreditation of Rehabilitation Facilities (CARF).
3. The Council on Quality and Leadership in Supports for People with Disabilities (The Council).
4. The Council on Accreditation of Services for Families and Children (COA).
5. The American Association of Suicidology (AAS).
6. Contact USA.

[**ARC 1660C**, IAB 10/15/14, effective 12/1/14]

441—24.28(225C) Complaint process. The department shall receive and record complaints by individuals using services, employees, any interested people, and the public relating to or alleging violations of applicable requirements of the Iowa Code or administrative rules in accordance with the standards described in rule 441—24.7(225C).
[**ARC 1660C**, IAB 10/15/14, effective 12/1/14]

441—24.29(225C) Appeal procedure. The department shall receive appeals according to the process in rule 441—24.8(225C).
[**ARC 1660C**, IAB 10/15/14, effective 12/1/14]

441—24.30(225C) Exceptions to policy. The department shall receive exceptions to policy meeting the standards in rule 441—24.9(225C).
[**ARC 1660C**, IAB 10/15/14, effective 12/1/14]

441—24.31(225C) Standards for individual crisis response services. Crisis response services provided to children and youth include coordination with parents, guardians, family members, natural supports, and service providers and with other systems such as education, juvenile justice and child welfare.

Crisis response services for individuals who have co-occurring or multi-occurring diagnoses focus on the integration and coordination of treatment services, and supports necessary to stabilize the individual, without regard to which condition is primary. Crisis response services are not to be denied due to the presence of a co-occurring substance abuse condition or developmental or neurodevelopmental disability.
[**ARC 1660C**, IAB 10/15/14, effective 12/1/14]

441—24.32(225C) Crisis evaluation. Crisis evaluation consists of two components: crisis screening and crisis assessment.

24.32(1) *Crisis screening.* The purpose of crisis screening is to determine the presenting problem and appropriate level of care.

a. *Performance benchmark.* Crisis screening includes a brief assessment of suicide lethality, substance use, alcohol use and safety needs. Crisis screening can be provided through contact with crisis response staff and through communication with the individual.

b. *Performance indicators.*

(1) Crisis response staff are trained in crisis screening.

(2) A uniform process for crisis screening and referrals is outlined in policies and procedures.

(3) Crisis screening records are kept in individual files.

24.32(2) *Crisis assessment.* The purpose of crisis assessment is to determine the precipitating factors of the crisis, the individual and family functioning needs, and the diagnosis if present and to initiate a stabilization plan and discharge plan. A licensed mental health professional conducts a crisis assessment within 24 hours of an individual's admission to a crisis response service.

a. *Assessment requirements.* The crisis assessment includes:

(1) Action plan.

(2) Active symptoms of psychosis.

(3) Alcohol use.

(4) Coping ability.

(5) History of trauma.

(6) Impulsivity or absence of protective factors.

(7) Intensity and duration of depression.

(8) Lethality assessment.

(9) Level of external support available to the individual.

(10) Medical history.

(11) Physical health.

(12) Prescription medication.

(13) Crisis details.

(14) Stress indicators and level of stress.

(15) Substance use.

b. *Performance benchmark.* Individuals receive comprehensive assessment by a mental health professional to determine the appropriate level of care.

c. *Performance indicators.*

(1) Written policies and procedures describe a uniform process for assessment, referrals and record documentation.

(2) Mental health professionals as defined in Iowa Code section 228.1(6) will complete assessments.

(3) Information collected is sufficient to determine the appropriate level of care.

(4) Assessment results are explained to the individual and family or guardian when appropriate.

(5) The individual's strengths, preferences and needs are included in an action plan. The family or guardian may receive a copy of an action plan with a signed release.

[**ARC 1660C**, IAB 10/15/14, effective 12/1/14]

441—24.33(225C) Twenty-four-hour crisis response. The purpose of 24-hour crisis response is to provide access to crisis screening and assessment to de-escalate and stabilize the crisis. When the assessment indicates, a stabilization plan is developed to support the individual's return to a prior level of functioning. Twenty-four-hour crisis response staff link the individual to appropriate services. Crisis response staff provide service to individuals of any age.

24.33(1) *Performance benchmark.* Individuals in crisis have the ability to access crisis response services, including, but not limited to, crisis screening, crisis assessment and stabilization in the least restrictive level of care appropriate.

24.33(2) *Performance indicators.*

a. Information on how to access 24-hour crisis response is publicized to facilitate availability of services to individuals using the service, family members and the public.

b. Individuals accessing the service receive crisis screening and crisis response services from appropriate crisis response staff.

c. Crisis screening is available and accessible face-to-face, using telephone or Web-based options, 24 hours a day, 365 days a year.

d. A mental health professional is available for crisis assessment and consultation 24 hours a day, 365 days a year. The mental health professional has access to a qualified prescriber for consultation.

e. The staffing pattern and schedule is documented.

f. The integration and coordination of care is documented in the individual's record.

g. The discharge, action and follow-up plans are documented in the individual's record, and copies of the plans are provided to the individual. The family or guardian may receive a copy with a signed release.

[**ARC 1660C**, IAB 10/15/14, effective 12/1/14]

441—24.34(225C) Twenty-four-hour crisis line. A 24-hour crisis line provides counseling, crisis service coordination, information and referral, linkage to services and crisis screening. Crisis line staff are qualified to provide crisis stabilization services pursuant to subrule 24.24(2).

24.34(1) *Performance benchmark.* Crisis screening, counseling, crisis service coordination and referrals are provided to individuals in crisis.

24.34(2) *Performance indicators.*

a. The crisis line service is available 24 hours a day, 365 days a year.

b. Policies are in place regarding how the crisis line is answered live, when to utilize the hold feature, the use of queue systems and triage of calls.

c. Policies and procedures govern the use of technology, including telephonic and Internet capability in the service delivery structure, quality assurance, data integrity and confidentiality.

d. Procedures are in place for ensuring the quality of the crisis line, including monitoring calls and corrective action plans.

e. The crisis line is an integrated component of the crisis response service system; the crisis line is answered in an organization setting by trained crisis response staff.

f. Policies define collaborative efforts and triage procedure between the mobile outreach teams, law enforcement and emergency services.

g. Policies are in place to ensure follow-up contacts are provided within 24 hours of a crisis call for all risk cases. The crisis line integrates follow-up into all crisis service contacts.

h. The crisis line utilizes standardized call center software with the capability to track:

(1) Date and time of answered call, topic of call, crisis screening provided, referral made, hold time, and demographics of call.

(2) Number of contacts, including terminated and lost calls.

i. Policies and procedures describe a uniform process of crisis screening and training for crisis line staff.

j. Training includes crisis screening tools, lethality assessment, crisis counseling, cultural competence, crisis service coordination, and information and referral.

k. Twenty-four-hour access to a mental health professional is required.

[**ARC 1660C**, IAB 10/15/14, effective 12/1/14]

441—24.35(225C) Warm line. A peer-operated warm line is a service individuals can access to talk with someone with lived experience with mental, behavioral health and trauma issues. The line provides a resource for individuals experiencing emotional distress.

24.35(1) *Performance benchmark.* A warm line provides nonjudgmental listening, nondirective assistance, information, referral, and triage when appropriate.

24.35(2) *Performance indicators.*

a. Policies are in place regarding how the warm line is answered live, placing callers on hold and when appropriate to use a queue system.

b. Policies and procedures are in place for standard collection of demographics, the presented reason for calling and outcome of call.

c. Policies and procedures are in place for crisis screening and when to triage a caller to a higher level of service.

d. Data collection includes call answer times, duration of calls, and number of calls dropped, lost or terminated.

e. Policies and procedures describe the staffing pattern and schedule.

f. Warm-line staff can receive calls remotely through telephones or computers or within an organization.

g. Staff qualifications and training for peer support specialists and family support peer specialists are required.

h. Twenty-four-hour access to a mental health professional is required.

[**ARC 1660C**, IAB 10/15/14, effective 12/1/14]

441—24.36(225C) Mobile response. Crisis response staff provide on-site, in-person intervention for individuals experiencing a mental health crisis. The mobile response staff provide crisis response services in the individual's home or at locations in the community. Staff work in pairs to ensure staff safety and the safety of the individual served. A single staff member may respond if another person who meets one of the criteria listed in paragraph 24.24(2)*"a"* will be available on site. Twenty-four-hour access to a mental health professional is required.

24.36(1) *Performance benchmark.* Mobile response services are delivered to individuals in crisis in a timely manner.

24.36(2) *Performance indicators.*

a. Mobile response staff are dispatched immediately after crisis screening has determined the appropriate level of care. If the mobile response staff already are responding to another call, staff explain to the caller that there may be a delay in receiving a mobile response and offer an alternative response.

b. Mobile response staff have face-to-face contact with the individual in crisis within 60 minutes from dispatch. If the mobile response staff are responding to another request, there may be a delay in receiving mobile response and an alternative response should be provided.

c. Data is collected to track and trend response time from initial dispatch, the time to respond to dispatch when a team is already in response; diversion from or admission to hospitals, correctional facilities and other crisis response services. The data for each fiscal year is reported to the department within 60 days of the close of the fiscal year.

d. When an action plan is developed, a copy is sent within 24 hours, with the individual's signed consent, to service providers, the individual and others as appropriate.

e. The following information is documented in the individual's service record:

(1) Triage and referral information.

(2) Reduction in the level of risk present in the crisis situation.

(3) Coordination with other mental health resources.

(4) Names and affiliation of all individuals participating in the mobile response.

f. A follow-up appointment with the individual's preferred provider will be made, and mobile response staff will follow up with the individual and document contact or attempt to contact on a periodic basis until the appointment takes place.

[**ARC 1660C**, IAB 10/15/14, effective 12/1/14]

441—24.37(225C) Twenty-three-hour crisis observation and holding. Twenty-three-hour crisis observation and holding services may be a stand-alone service or embedded within a crisis stabilization residential service. Twenty-three-hour crisis observation and holding services are designed for individuals who need short-term crisis intervention in a safe environment less restrictive than hospitalization. This level of service is appropriate for individuals who require protection or when an individual's ability to cope in the community is severely compromised and it is expected the crisis can

be resolved in 23 hours. Twenty-three-hour crisis observation and holding services include, but are not limited to, treatment, medication administration, meeting with extended family or significant others, and referral to appropriate services. Twenty-three-hour crisis observation and holding chairs can be utilized.

24.37(1) *Admission criteria.* The services may be provided if any of the following admission criteria are met:

a. There are indications the symptoms can be stabilized and an alternative treatment can be initiated within a 23-hour period.

b. The presenting crisis cannot be safely evaluated or managed in a less restrictive setting, or no such setting is available.

c. The individual does not meet inpatient criteria, and it is determined a period of observation assists in the stabilization and prevention of symptom exacerbation.

d. Further evaluation is necessary to determine the individual's service needs.

e. There is an indication of actual or potential danger to self or others as evidenced by a current threat or ideation.

f. There is a loss of impulse control leading to life-threatening behavior and other psychiatric symptoms requiring stabilization in a structured, monitored setting.

g. The individual is experiencing a crisis demonstrated by an abrupt or substantial change in normal life functioning brought on by a specific cause, sudden event or severe stressor.

24.37(2) *Staffing requirements.*

a. A designated medical director or administrator is responsible for the management and operation of the organization or facility.

b. Registered nurse practitioners and physician assistants have at least two years of mental health experience.

c. At least one mental health professional is available for consultation 24 hours a day, 365 days a year.

d. A mental health professional as defined in Iowa Code section 228.1(6) provides mental health services appropriate to the individual's needs.

e. Crisis response staff are on duty 24 hours a day.

f. A registered nurse is available on site 24 hours a day.

24.37(3) *Twenty-three-hour observation and holding safety.*

a. *Performance benchmark.* An incident report is created when staff are notified an incident has occurred.

b. *Performance indicators.*

(1) The incident report documents:

1. The name of the individual or individuals who were involved in the incident.
2. Date and time of occurrence of the incident.
3. A description of the incident.
4. Names and signatures of all staff present at the time of the incident.
5. The action taken by the staff.
6. The resolution or follow-up to the incident.

(2) A copy of the incident report is kept in a centralized file and a copy is given to the individual, the mental health and disability services region, and the individual's parent or guardian when appropriate.

24.37(4) *Service requirements.*

a. *Performance benchmark.* A treatment summary is provided to the individual and the individual's treatment team when applicable.

b. *Performance indicators.* The minimum treatment summary requirements include:

(1) Action plan.

(2) Crisis assessment, including challenges and strengths.

(3) Course and progress of the individual with regard to each identified challenge.

(4) Evaluation of the individual's mental status to inform ongoing placement and support decisions.

(5) Recommendations and arrangements for further service needs.

(6) Signature of the mental health professional.

(7) Treatment interventions.

c. Performance benchmark. The individual using this service is provided a safe, secure observation and holding service in a location meeting the needs of the individual and in the least restrictive setting.

d. Performance indicators.

(1) Individuals give informed consent.

(2) Treatment providers, family members and other natural supports as appropriate are contacted within 23 hours of the individual's admission.

(3) Written policies and procedures cover medication administration, storage and documentation.

(4) Individual records include, but are not limited to, a treatment summary and verification of individual choice.

(5) The 23-hour crisis observation and holding facility is a welcoming and comfortable environment conducive to recovery.

(6) The 23-hour crisis observation and holding is primarily used as a diversion from hospital level of care.

(7) Communication attempts and contact with the individual's team will be documented.

(8) A follow-up appointment with the individual's preferred provider will be made, and crisis response staff will follow up with the individual and document contact or attempt to contact on a periodic basis until the appointment takes place.

(9) There are written policies and procedures of how to document and track discharge locations.

(10) The actual number of individuals served within the 23-hour period is documented. Individual treatment records contain reasons why individuals stay beyond the 23-hour period.

(11) Readmission data and length of time between admissions are tracked for data trend reports.

e. Performance benchmark. Policies and procedures address the additional safety standards for 23-hour crisis and observation services.

f. Performance indicators.

(1) Service compliance is documented regarding state fire marshal rules and fire ordinances and applicable local health, fire, occupancy code, and safety regulations.

(2) Based on standards used for public facilities, all food and drink is clean, wholesome, free from spoilage, and stored and served in a manner safe for human consumption.

(3) Doors must not be locked from the inside. The use of door locks is as approved by the fire marshal and professional staff.

(4) Twenty-three-hour observation and holding services have an emergency preparedness plan to describe the process for an individual to continue receiving services during a disaster including, but not limited to, cases of severe weather or fire.

g. Performance benchmark. Policies and procedures address the cleanliness of the 23-hour observation and holding service.

h. Performance indicators.

(1) Services provide a safe, clean, well-ventilated, properly heated environment in good repair and free from vermin.

(2) An individual's resting or sleeping area includes:

1. A sturdily constructed bed or comfortable chair.
2. A sanitized mattress protected with a clean mattress pad, or sanitized chair.
3. Curtains or blinds are on bedroom windows.
4. Available clean linen.
5. Doors or partitions for privacy.
6. Right to privacy is respected.

(3) Bathrooms include items necessary for personal hygiene and personal privacy.

1. A safe supply of hot and cold running water which is potable.
2. Clean towels, electric hand dryers or paper towel dispensers, and an available supply of toilet paper and soap.
3. Natural or mechanical ventilation capable of removing odors.

4. Tubs or showers have slip-proof surfaces.

5. Partitions with doors which provide privacy if a bathroom has multiple toilet stools.

6. Toilets, wash basins, and other plumbing or sanitary facilities are maintained in good operating condition.

7. Privacy in bathrooms for male and female individuals.

i. *Performance benchmark.* Personal rights are acknowledged.

j. *Performance indicator.* The following are allowed:

(1) Areas in which an individual may be alone when appropriate.

(2) Areas for private conversations with others.

(3) Secure space for personal belongings.

(4) Personal clothing is allowed in accordance with organization policy.

k. *Performance benchmark.* Policies and procedures address health and safety standards.

l. *Performance indicators.*

(1) An emergency preparedness plan is designed to provide effective utilization of available resources during a disaster event including, but not limited to, cases of severe weather or fire.

(2) Services comply with rule 441—24.39(225C).

(3) There are written policies on safety.

(4) Seclusion is not used.

(5) Mechanical or chemical restraints are not used at any time.

(6) The smokefree air Act, Iowa Code chapter 142D, is followed.

[**ARC 1660C**, IAB 10/15/14, effective 12/1/14]

441—24.38(225C) Crisis stabilization community-based services (CSCBS). The goal of CSCBS is to stabilize the individual within the community. CSCBS is designed as a voluntary service for individuals in need of a safe, secure location that is less intensive and restrictive than an inpatient hospital. Individuals receive CSCBS services including, but not limited to, psychiatric services, medication, counseling, referrals, peer support and linkage to ongoing services. The duration for CSCBS is expected to be less than five days.

24.38(1) *Eligibility.* To be eligible, an individual must:

a. Be determined appropriate for the service by mental health assessment; and

b. Be determined not to need inpatient acute hospital psychiatric services.

24.38(2) *Staffing requirements.*

a. A designated director or administrator is responsible for the management and operation of the CSCBS.

b. At least one licensed nurse practitioner, physician assistant, or psychiatrist is available for consultation 24 hours a day, 365 days a year.

c. Mental health professionals with expertise appropriate to the individual's needs provide services.

d. Contact between the individual and a mental health professional occurs at least one time a day.

e. Additional services are provided by crisis response staff at a minimum of one hour per day, including, but not limited to, skill building, peer support or family support peer services. The goal of CSCBS is to stabilize the individual within the community. CSCBS is designed for voluntary services for individuals in need of a safe, secure location that is less intensive and restrictive than an inpatient hospital.

f. Crisis response staff must be awake and attentive 24 hours a day.

24.38(3) *Performance benchmark.* The individual using CSCBS is provided safe, secure and structured crisis stabilization services in the least restrictive location meeting the needs of the individual. The CSCBS can be for youth aged 18 and under or adults aged 18 and older.

24.38(4) *Performance indicators.*

a. The individual can provide consent for treatment providers, family members and other natural supports to be contacted within 24 hours of admission.

b. Daily crisis stabilization services include, at minimum, daily contact with a mental health professional and one hour of additional crisis stabilization services from crisis response staff.

c. The numbers of days an individual receives crisis stabilization services are documented. The documentation records specific reasons for the delivery of services beyond five days.

d. Individual records are maintained to document the following:

(1) Daily contact with a mental health professional.

(2) Additional services provided including, but not limited to, skill building, peer support or family support peer services.

(3) Medication record.

e. Individual choice is verified including, but not limited to, treatment participation and discharge plan options.

f. Readmission data is tracked, including an analysis of data trends looking at effectiveness, and appropriate corrective action taken. The information is documented in the performance improvement system files.

24.38(5) *Crisis stabilization incident reporting.*

a. *Performance benchmark.* An incident report is filed when staff are notified an incident has occurred.

b. *Performance indicators.*

(1) The incident report documents:

1. The name of the individual involved in the incident.
2. Date and time the incident occurred.
3. A description of the incident.
4. Names and signatures of all staff present at the time of the incident.
5. The action the staff took to handle the situation.
6. The resolution or follow-up to the incident.

(2) A copy of the incident report is kept in a centralized file and a copy given to the individual, the mental health and disability services region, and the parent or guardian when appropriate.

24.38(6) *Service requirements.*

a. *Stabilization plan.* The individual in crisis is involved collaboratively in all aspects of crisis stabilization services including, but not limited to, admission, treatment planning, intervention, and discharge. The involvement of family members and others is encouraged.

Within 24 hours of an individual's admission to crisis stabilization services, a written short-term stabilization plan is developed, with the involvement and consent of the individual, and is reviewed frequently to assess the need for the individual's continued placement in CSCBS. At a minimum, this plan includes:

(1) Criteria for discharge, including referrals and linkages to appropriate services and coordination with other systems.

(2) Description of any physical disability and any accommodations necessary to provide the same or equal services and benefits as those afforded nondisabled individuals.

(3) Evidence of input by the individual, including the individual's signature.

(4) Goal statement. Goals are consistent with the individual's needs and projected duration of service delivery and include objectives which build on strengths and are stated in terms allowing measurement of progress.

(5) Rights restrictions.

(6) Names of all other persons participating in the development of the plan.

(7) Specification of treatment responsibilities and methods.

b. *Performance benchmark.* A stabilization plan is completed within 24 hours of the individual's admittance.

c. *Performance indicators.*

(1) Individual records include a written short-term stabilization plan developed with the involvement and consent of the individual within 24 hours of admittance and reviewed frequently to assess the need for continued placement in CSCBS.

(2) Individual records indicate a crisis stabilization plan is completed within the 24-hour time frame.

(3) Reasons for crisis stabilization plans not meeting the criteria are documented.

(4) A follow-up appointment with the individual's preferred provider will be made, and crisis response staff will follow up with the individual and document contact or attempt to contact on a periodic basis until the appointment takes place.

24.38(7) *Treatment summary.* Prior to the individual's discharge from CSCBS, a treatment summary is completed. A copy of the summary is provided to the individual and shared with the individual's treatment team of providers, if applicable.

a. *Contents.* At a minimum, the treatment summary includes:

(1) Course and progress of the individual with regard to each identified problem.

(2) Documented note of a mental health professional contact one time daily.

(3) Evolution of the mental status to inform ongoing placement and support decisions.

(4) Final assessment, including general observations and significant findings of the individual's condition initially while services were being provided and at discharge.

(5) Recommendations and arrangements for further service needs.

(6) Signature of the mental health professional.

(7) Stabilization plan.

(8) Reasons for termination of service.

(9) Treatment interventions.

b. *Performance benchmark.* A treatment summary is completed during the length of stay in CSCBS.

c. *Performance indicators.*

(1) Records include a written treatment summary developed with the involvement of the individual. A copy of the summary is provided upon discharge.

(2) Incidents in which a treatment plan was not completed within the length of stay and any corrective action necessary to alleviate this issue are documented.

24.38(8) *Health and safety.*

a. *Performance benchmark.* Emergency preparedness policies and procedures include health and safety measures.

b. *Performance indicators.*

(1) Emergency preparedness plans are designed to provide effective utilization of available resources for care to continue during a disaster event including, but not limited to, cases of severe weather or fire.

(2) Crisis services comply with rule 441—24.39(225C).

[**ARC 1660C**, IAB 10/15/14, effective 12/1/14]

441—24.39(225C) Crisis stabilization residential services (CSRS). Crisis stabilization residential services are short-term services provided in facility-based settings of no more than 16 beds. The goal of CSRS is to stabilize and reintegrate the individual back into the community. Crisis stabilization residential services are designed for voluntary individuals who are in need of a safe, secure environment less intensive and restrictive than an inpatient hospital. Crisis stabilization residential services have the capacity to serve more than two individuals at a time. Crisis stabilization residential services can be for youth aged 18 and younger or adults aged 18 and older. Youth and adults cannot be housed in the same facility setting. Facilities licensed by the department of inspections and appeals for other services would have to comply with the provisions of Iowa Administrative Code rule 481—57.50(135C) for operating another business or activity in the facility.

24.39(1) *Eligibility.* To be eligible, an individual must:

a. Be an adult aged 18 or older or a youth aged 18 or under.

b. Be determined appropriate for the service by a mental health assessment; and

c. Be determined to not need inpatient acute hospital psychiatric services.

24.39(2) *Staffing requirements.*

a. A designated director or administrator is responsible for the management and operation of the CSRS of no more than 16 beds.

b. At least one licensed mental health professional is available for consultation 24 hours a day, 365 days a year.

c. Crisis stabilization residential services are provided by a mental health professional with expertise appropriate to the individual's needs.

d. Each individual has contact with a mental health professional at least one time a day.

e. Each individual has a minimum of one hour per day of additional services provided by crisis response staff including, but not limited to, skill building, peer support or family support peer services; or other therapeutic programming.

f. Awake and attentive staffing 24 hours a day, 365 days a year is provided.

24.39(3) *Performance benchmark.* The individual is provided safe, secure and structured crisis stabilization services in the least restrictive location meeting the individual's needs.

24.39(4) *Performance indicators.*

a. Individual's consent is documented, and treatment providers, family members and other natural supports are contacted within 24 hours of admission.

b. A comprehensive mental health assessment is completed within 24 hours of admission.

c. Daily crisis stabilization includes, at minimum, daily contact with a mental health professional and one hour of additional crisis stabilization service.

d. The length of stay is expected to be less than five days.

e. The number of days an individual receives crisis stabilization services is documented. The documentation records specific reasons for lengths of stay beyond five days.

f. Records include:

(1) Stabilization plan.

(2) Medication record.

(3) Treatment summary.

(4) Daily contact with a mental health professional.

g. Additional services provided include, but are not limited to, skill building, peer support or family support peer services.

h. Individual choice is verified including, but not limited to, treatment participation and discharge plan options.

i. Data of readmission is tracked including an analysis of data trends, looking at effectiveness, and appropriate corrective action. The information is documented in the performance improvement system.

j. Documentation tracks that the youth's education needs are met with educational services received in the CSRS, and an action plan is in place to return the youth to school upon discharge.

24.39(5) *Crisis stabilization incident reporting.*

a. *Performance benchmark.* An incident report is completed when staff are notified an incident has occurred.

b. *Performance indicators.*

(1) The incident report documents:

1. The name of the individual who was involved in the incident.
2. Date and time of occurrence of the incident.
3. A description of the incident.
4. Names and signatures of all staff present at the time of the incident.
5. The action staff took to handle the situation.
6. The resolution or follow-up to the incident.

(2) A copy of the incident report is maintained in a centralized file and a copy given to the individual, the mental health and disability services region, and the parent or guardian when appropriate.

24.39(6) *Service requirements.*

a. *Stabilization plan.* The individual is involved collaboratively in all aspects of crisis stabilization services including, but not limited to, admission, treatment planning, intervention, and discharge. The involvement of family members and others is encouraged.

Within 24 hours of admission to CSRS, a written short-term stabilization plan is developed, with the involvement and consent of the individual, and reviewed frequently to assess the need for continued placement in CSRS. At a minimum, this plan includes:

(1) Criteria for discharge, including referrals and linkages to appropriate services and coordination with other systems.

(2) Description of any physical disability and accommodations necessary to provide the same or equal services and benefits as those afforded nondisabled individuals.

(3) Evidence of input by the individual, including the individual's signature.

(4) Goal statement.

(5) Goals consistent with needs and projected length of stay.

(6) Objectives that are built on strengths and allow measurement of progress.

(7) Rights restrictions.

(8) Signatures of all participating in the development of the plan.

(9) Specification of treatment responsibilities and methods.

b. *Performance benchmark.* A stabilization plan is completed within 24 hours of admittance.

c. *Performance indicators.*

(1) Records include a written short-term stabilization plan developed with the involvement and consent of the individual within 24 hours of admission and is reviewed frequently to assess the need for continued placement in CSRS.

(2) Records indicating a stabilization plan has been completed within the 24-hour time frame are maintained.

(3) Reasons the stabilization plan does not meet the criteria is documented.

(4) A follow-up appointment with the individual's preferred provider will be made, and crisis response staff will follow up with the individual and document contact or attempt to contact on a periodic basis until the appointment takes place.

24.39(7) *Treatment summary.* Prior to discharge, a treatment summary is provided and a copy shared with the individual and treatment team as appropriate.

a. *Contents.* At a minimum, this treatment summary includes:

(1) Course and progress regarding each identified problem.

(2) Documentation of daily contact with a mental health professional.

(3) Impact on placement and support decisions.

(4) Assessment.

(5) Action plan.

(6) Stabilization plan.

(7) Treatment interventions.

(8) Reasons for termination of service.

(9) Signature of the mental health professional.

b. *Performance benchmark.* A treatment summary is completed during the individual's length of stay in CSRS.

c. *Performance indicators.*

(1) Records include a written treatment summary developed with the involvement and consent of the individual.

(2) An individual receives a copy of the treatment summary upon discharge.

(3) Corrective action steps are documented when treatment plans are not completed within the length of stay.

24.39(8) *Health and safety.*

a. *Performance benchmarks.*

(1) Emergency preparedness policies and procedures include health and safety measures.

(2) Crisis stabilization services meet all applicable local, state and federal regulations.

(3) Medication administration and documentation standards in rule 441—24.40(225C) are documented.

b. *Performance indicators.*

(1) Health and fire safety inspections.

1. Documentation includes Iowa fire marshal rules and fire ordinances, local health, fire, occupancy code, and safety regulations.

2. Standards for public facilities guide food and beverage safety, nutrition standards, and safe storage of all consumable products.

3. Crisis stabilization residential services comply with rule 441—24.40(225C).

(2) Emergency preparedness. Emergency preparedness policies are designed to provide effective utilization of available resources for continuation during a disaster event, including, but not limited to, cases of severe weather or fire.

(3) The facility is safe, clean, well-ventilated, and a properly heated environment in good repair and free from vermin.

(4) Bedrooms include:

1. A sturdily constructed bed.

2. A sanitized mattress protected with a clean mattress pad.

3. A designated space in proximity to the sleeping area for personal possessions including clothing.

4. Curtains or window blinds on bedroom windows.

5. Available clean linens.

(5) Sleeping areas include:

1. Doors for privacy.

2. Partitioning and placement of furniture to provide privacy.

3. Rooms accommodate no more than two per room. Single room dimensions are at least 80 square feet not including closets. Dual occupancy rooms are at least 120 square feet not including closets.

4. Personal belongings and personal touches in the rooms are defined within CSRS policy.

5. Respect by staff for an individual's right to privacy.

(6) Personal hygiene and privacy tools are provided:

1. A safe supply of hot and cold running water which is potable.

2. Clean towels, electric hand dryers or paper towel dispensers, and an available supply of toilet paper and soap.

3. Natural or mechanical ventilation capable of removing odors.

4. Tubs or showers with slip-proof surfaces.

5. Partitions with doors which provide privacy if a bathroom has multiple toilet stools.

6. Toilets, wash basins, and other plumbing or sanitary facilities are in good operating condition.

7. Privacy in bathrooms for male and female individuals.

(7) Federal laws regarding smoking on property are recognized and followed.

(8) The following is provided:

1. Areas in which an individual may be alone when appropriate.

2. Areas for private conversations with others.

3. A secure space for personal belongings.

c. *Housekeeping.* Maintenance of living quarters and day-to-day housekeeping activities are clearly defined in writing and a part of the orientation. Staff assistance and equipment are provided as needed.

d. *Clothing.*

(1) Personal clothing is allowed in accordance with CSRS policy.

(2) Clothing may be washed with provided laundry mechanisms.

e. *Religion/culture.* Rights to religion and culture include:

(1) The opportunity to participate in religious activities and services in accordance with the individual's faith or of a minor individual's parent(s) or guardian.

(2) Arrange for transportation to religious activities when appropriate per CSRS policy.

f. *Smoking.* The smokefree air Act, Iowa Code chapter 142D, is included in the CSRS policy.

[**ARC 1660C**, IAB 10/15/14, effective 12/1/14]

441—24.40(225C) Medication—administration, storage and documentation. This rule sets forth medication requirements for 23-hour crisis observation and holding, crisis stabilization community-based services, and crisis stabilization residential services.

24.40(1) *Performance benchmark.* Policies and procedures ensure prescription and over-the-counter drugs are administered or self-administered safely and properly in accordance with federal, state and local laws and regulations. Medication is administered by a qualified prescriber or an individual following the instructions of a qualified prescriber. Medication storage is maintained in accordance with the security requirements of federal, state and local laws. Case records include written policies and procedures regarding use of medication.

24.40(2) *Performance indicators.*

a. Administration of medication.

(1) Medication administration dose schedules and standardization of abbreviations are documented.

(2) Throughout the CSRS specific methods for control and accountability of medication products are established.

(3) Prescription and over-the-counter drugs are administered or self-administered safely and properly in accordance with federal, state and local laws and regulations.

(4) Medications are prescribed by a qualified prescriber under Iowa law.

(5) Prescription drugs are not administered or self-administered without a written order signed by a qualified prescriber.

b. Staff-administered medication.

(1) Only qualified and authorized staff administers medication, and a current, accurate list of staff is maintained.

(2) Qualified prescribers instruct how medications are administered and documented. The type and amount of medication, time and date of medication administered, and the name of staff administering the medication are transcribed in the medication record.

c. Self-administered medication.

(1) Policies and procedures document which staff have completed department-approved training on self-administration of prescription medication.

(2) Self-administration of prescription and over-the-counter medications are permitted only when the medication label is clear and complete.

d. Medication storage. Medication storage policies under the care and control of the administration include:

(1) All medication is maintained in locked storage, and controlled substances are maintained in a locked box within locked storage.

(2) Medications requiring refrigeration are kept in a refrigerator separated from food and other edible items.

(3) Disinfectants and medication for external use are stored separately from internal and injectable medications.

(4) Each medication is stored in original containers and labeled with the name.

(5) All potent poisonous or caustic medications are clearly labeled; stored separately from other medication, in a specific well-illuminated cabinet, closet, or storeroom; and made accessible only to authorized staff.

(6) Medication provided is dispensed from a licensed pharmacy in the state of Iowa in accordance with the Iowa Code. It can also be provided by a qualified prescriber from a licensed pharmacy in another state according to the laws of the state.

(7) Prescription medications prescribed for one individual are not administered or allowed in the possession of another.

e. Medication labeling. All prescribed medications are clearly labeled with the full name; prescriber's name; prescription number; name and strength of the medication; dosage; directions for use; date of issue; and name, address and telephone number of the pharmacy or prescriber issuing the medication. Medications are packaged and labeled according to state and federal guidelines.

f. *Monthly inspection.* The staff member in charge of medication provides monthly inspection of all storage units.

g. *Damaged labels.* Medication containers having soiled, damaged, illegible, or makeshift labels are returned to the issuing pharmacist, pharmacy, or qualified prescriber for relabeling or disposal.

h. *Unused medications.* Unused prescription drugs are destroyed by staff with a witness present, when an individual leaves the crisis service without medication. A notation is documented in the record. When an individual is discharged or leaves the crisis service, medications currently being administered are sent in their original containers with the individual or with a designated person, with the approval of the qualified prescriber.

i. *Medication brought by individual.* If the prescribed and over-the-counter medication the individual brings to the CSRS is not used, the medication is packaged, sealed and stored. The sealed packages of medications are returned to the individual or family at the time of discharge.

j. *Medication documentation.*

(1) Written policies and procedures are in place for the review, approval, and implementation of ethical, safe, human and efficient behavioral intervention procedures.

(2) Written policies and procedures are in place to inform the individual and the individual's legal guardian, when appropriate, about prohibitions on the use of medication as a restraint.

(3) Documentation is required in case records on adverse drug reactions when medications are administered and self-administered.

(4) All medication orders are documented in the case records and document the name of the medication, dose, route of administration, frequency of administration, name of the qualified prescriber prescribing the medication, and name of the staff administering or dispensing the medication.

(5) Medication records are documented by authorized staff administering the medication.

k. *Medication rights and responsibilities.*

(1) Medication is not used as a restraint. The use of psychopharmacological medication in excess of the standard plan of care is prohibited. Using medication as a restraint includes:

1. Drugs or medications used to control behavior or restrict freedom of movement.
2. Drugs or medications used in excessive amounts or in excessive frequency.
3. Neuroleptics, anxiolytics, antihistamines, and atypical neuroleptics, or other medication used for calming, rather than for the medication's indicated treatment.

(2) Drugs or medications used for standard treatment of the individual's medical or psychiatric condition are not considered to be used as a restraint.

These rules are intended to implement Iowa Code section 331.397 and 2014 Iowa Acts, House File 2379.

[**ARC 1660C**, IAB 10/15/14, effective 12/1/14]

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[1] Effective date of definitions of "Administrator," "Division" and "Persons with mental retardation" delayed 70 days by the Administrative Rules Review Committee at its meeting held April 10, 1995.

CHAPTER 58
EMERGENCY ASSISTANCE

DIVISION I
IOWA DISASTER AID INDIVIDUAL ASSISTANCE GRANT PROGRAM

PREAMBLE

This division implements a state program of financial assistance to meet disaster-related expenses, food-related costs, or serious needs of individuals or families who are adversely affected by a state-declared disaster emergency. The program is intended to meet needs that cannot be met by other means of financial assistance.

441—58.1(29C) Definitions.

"Bona fide residence" or *"bona fide address,"* as set forth in Iowa Code section 321.1(6C), means the pre-disaster street or highway address of an individual's dwelling or dwelling unit. The bona fide residence of a homeless person is a primary nighttime residence meeting one of the criteria listed in Iowa Code section 48A.2(2).

"Department" means the Iowa department of human services.

"Dwelling" or *"dwelling unit"* means the structure in which a household resides. "Dwelling" or "dwelling unit" includes permanent structures, mobile homes, manufactured homes, modular homes, fifth-wheel travel trailers, travel trailers, and motor homes in which a household resides.

"Emergency management coordinator" means the person appointed by the local emergency management commission pursuant to Iowa Code sections 29C.9 and 29C.10 to be responsible for development of the countywide emergency operations plan and for coordination and assistance to government officials when an emergency or disaster occurs.

"Fifth-wheel travel trailer," as set forth in Iowa Code section 321.1(36C)(c), means a type of travel trailer which is towed by a pickup by a connecting device known as a fifth wheel. However, this type of travel trailer may have an overall length which shall not exceed 45 feet. If the vehicle is used in this state as a place of human habitation for more than 90 consecutive days in one location, the vehicle shall be classed as a manufactured or mobile home regardless of the size limitations provided in this definition.

"Home" means the pre-disaster dwelling or dwelling unit for a household.

"Household" means all adults and children who lived in the pre-disaster residence who request assistance, as well as any persons, such as infants, spouses, or part-time residents, who were not present at the time of the disaster but who are expected to return during the assistance period.

"Manufactured home" or *"modular home,"* as set forth in Iowa Code section 321.1(36B), is a factory-built structure constructed under authority of 42 U.S.C. §5403, which is required by federal law to display a seal from the United States Department of Housing and Urban Development, and was constructed on or after June 15, 1976.

"Manufactured or mobile home," as set forth in Iowa Code section 321.1(36C)(a), means any vehicle without motive power used or so manufactured or constructed as to permit its being used as a conveyance upon the public streets and highways and so designed, constructed, or reconstructed as will permit the vehicle to be used as a place for human habitation by one or more persons.

"Motor home," as set forth in Iowa Code section 321.1(36C)(d), means a motor vehicle designed as an integral unit to be used as a conveyance upon the public streets and highways and for use as a temporary or recreational dwelling and having at least four, two of which shall be systems specified in paragraph "1," "4," or "5" of this definition, of the following permanently installed systems which meet American National Standards Institute and National Fire Protection Association standards in effect on the date of manufacture:

1. Cooking facilities.
2. Ice box or mechanical refrigerator.
3. Potable water supply including plumbing and a sink with faucet either self-contained or with connections for an external source, or both.

4. Self-contained toilet or a toilet connected to a plumbing system with connection for external water disposal, or both.

5. Heating or air conditioning system or both, separate from the vehicle engine or the vehicle engine electrical system.

6. A 110- to 115-volt alternating current electrical system separate from the vehicle engine electrical system either with its own power supply or with a connection for an external source, or both, or a liquefied petroleum system and supply. If the vehicle is used in this state as a place of human habitation for more than 90 consecutive days in one location, the vehicle shall be classed as a manufactured or mobile home regardless of the size limitations provided in this definition.

"Necessary expense" means the cost associated with acquiring an item or items, obtaining a service, or paying for any other activity that meets a serious need.

"Owner" means one or more persons, jointly or severally, in whom is vested all or part of the legal title to property or all or part of the beneficial ownership and a right to present use and enjoyment of the property. "Owner" includes a mortgagee in possession.

"Rent" means an amount paid to the landlord under the rental agreement.

"Safe, sanitary, and secure" means free from disaster-related health hazards.

"Serious need" means the item or service is essential to the household to prevent, mitigate, or overcome a disaster-related hardship, injury, or adverse condition.

"Tenant" means a person or persons entitled under a rental agreement to occupy a dwelling or dwelling unit to the exclusion of others.

"Travel trailer," as set forth in Iowa Code section 321.1(36C)(b), means a vehicle without motive power used, manufactured, or constructed to permit its use as a conveyance upon the public streets and highways and designed to permit its use as a place of human habitation by one or more persons. The vehicle may be up to 8 feet, 6 inches in width and its overall length shall not exceed 45 feet. The vehicle shall be customarily or ordinarily used for vacation or recreational purposes and not used as a place of permanent habitation. If the vehicle is used in this state as a place of human habitation for more than 90 consecutive days in one location, the vehicle shall be classed as a manufactured or mobile home regardless of the size limitations provided in this definition.

[**ARC 1353C**, IAB 3/5/14, effective 5/1/14; **ARC 3058C**, IAB 5/10/17, effective 7/1/17]

441—58.2(29C) Program implementation.

58.2(1) *Disaster declaration.* The Iowa individual assistance grant program (IIAGP) shall be implemented when the governor issues a declaration of a state of disaster emergency that authorizes individual assistance. The program shall be in effect only in those counties named in the declaration. Assistance shall be provided for a period not to exceed 120 days from the date of declaration.

58.2(2) *Voucher system.* The IIAGP will be implemented through a reimbursement or voucher system.

58.2(3) *Program extensions.*

a. The program may be extended beyond 120 days through an extension of the governor's disaster proclamation; or

b. The program may be extended in 30-day intervals requested by the applicant household through the contracted entity and approved by the department.

[**ARC 9128B**, IAB 10/6/10, effective 10/1/10; **ARC 9312B**, IAB 12/29/10, effective 3/1/11; **ARC 1353C**, IAB 3/5/14, effective 5/1/14; **ARC 3058C**, IAB 5/10/17, effective 7/1/17]

441—58.3(29C) Application for assistance. To request assistance for disaster-related expenses, the household shall complete Form 470-4448, Individual Disaster Assistance Application, and submit it within 45 days of the disaster declaration to the contracted administrative entity along with: (1) receipts for the claimed expenses or (2) a request to participate in a voucher system.

58.3(1) Application forms are available from an approved administrative entity, as well as the Internet Web site of the department at www.dhs.iowa.gov.

58.3(2) The application shall include:

a. A declaration of the household's annual income, accompanied by:

(1) A current pay stub, W-2 form, or income tax return, or

(2) Documentation of current enrollment in an assistance program administered by the department, the Special Supplemental Nutrition Program for Women, Infants and Children (WIC), or other subsidy program.

b. An authorization to release confidential information to personnel involved in administering the program.

c. A certification of the accuracy of the information provided.

d. An assurance that the household had no insurance coverage for claimed items.

e. A commitment to refund any part of a grant awarded that is duplicated by insurance or by any other assistance program, such as but not limited to local community development groups and charities, the Small Business Administration, or the Federal Emergency Management Administration.

f. A short, handwritten narrative of how the disaster event caused the claimed loss.

g. A copy of a picture identification document for each adult applicant.

h. When vehicle damage is claimed, current copies of the vehicle registration and liability insurance card.

[**ARC 9128B**, IAB 10/6/10, effective 10/1/10; **ARC 9312B**, IAB 12/29/10, effective 3/1/11; **ARC 1353C**, IAB 3/5/14, effective 5/1/14]

441—58.4(29C) Eligibility criteria. To be eligible for assistance, an applicant household must meet all of the following conditions:

58.4(1) The household's bona fide residence was located in the area identified in the disaster declaration during the designated incident period and the household verifies occupancy at that residence.

58.4(2) Household members are citizens of the United States or are legally residing in the United States.

58.4(3) The household's self-declared annual income is at or less than 200 percent of the federal poverty level for a household of that size.

a. Poverty guidelines are updated annually.

b. All income available to the household is counted, including wages, child support, interest from investments or bank accounts, social security benefits, and retirement income. Proof of income is required.

58.4(4) The household has disaster-related expenses or serious needs that are not covered by insurance or that are less than the deductible amount. This program will not reimburse the amount of the insurance deductible when the claim exceeds the deductible amount.

58.4(5) The household has not previously received assistance from this program or another program for the same loss.

58.4(6) Household eligibility for home repair assistance for a dwelling or dwelling unit damaged due to a proclaimed disaster is only available for a household that owns and occupies the dwelling or dwelling unit being repaired.

[**ARC 1353C**, IAB 3/5/14, effective 5/1/14; **ARC 3058C**, IAB 5/10/17, effective 7/1/17]

441—58.5(29C) Eligible categories of assistance. The maximum assistance available to a household in a single disaster is $5,000. Assistance is available under the program for the following disaster-related expenses:

58.5(1) Personal property and food assistance may be issued for damage to personal property or loss of food, including the following items, based on the item's condition:

a. Kitchen items, excluding large appliances up to a maximum of $560, including:

(1) Small appliances, e.g., toaster, blender, microwave, and

(2) Furnishings (e.g., tables, chairs).

b. Large kitchen appliances or laundry appliances, up to a maximum of $700 per appliance and a maximum per household not to exceed $2,800, if the appliances are owned by the household and not a landlord.

c. Food, up to a maximum of $50 for one person plus $25 for each additional person in the household.

d. Personal hygiene items, up to a maximum of $30 per person and $150 per household.

e. Bedroom furnishings, up to $500 per person.

f. Clothing, up to a maximum of $145 per person.

g. Living area furnishings, such as: couch, chair, end tables, and television, up to a maximum of $1,000.

h. Other items, including:

(1) Dehumidifier, up to a maximum of $250.

(2) One window air conditioner, up to a maximum of $250.

i. Vehicle repair, up to a maximum of $500.

58.5(2) Home repair assistance may be issued for home repair for an owner-occupied dwelling or dwelling unit as needed to make the dwelling or dwelling unit safe, sanitary, and secure, up to a maximum of $5,000.

a. Assistance will be denied if preexisting conditions are the cause of the damage.

b. Assistance may be authorized for:

(1) The repair of structural components, such as the foundation and roof.

(2) The repair of floors, walls, ceilings, doors, windows, and carpeting of essential interior living space that was occupied at the time of the disaster.

(3) Debris removal, including trees, up to a maximum of $1,000.

c. Repairs to rental dwellings or dwelling units or landlord-owned equipment are excluded under this program.

d. Bathroom, up to a maximum of $1,500, including toilet, sink, and tub/shower.

e. Sump pump (in a flood event only), up to a maximum of $200 installed.

f. Electrical or mechanical repairs, up to a maximum of $2,000.

g. Water heater, up to a maximum of $1,500 installed.

h. Heating systems, up to a maximum of $2,100 installed.

i. Air-conditioning systems, up to a maximum of $2,100 installed.

j. Water well repair for dwellings or dwelling units with no other source of water available, up to a maximum of $2,000.

k. Water softener repair, up to a maximum of $500.

58.5(3) Temporary housing assistance may be issued to a household, up to a limit of $65 per day, for lodging at a licensed establishment, such as a hotel or motel. The household's home must be considered to be destroyed, uninhabitable, inaccessible, or unavailable to the household. Temporary housing assistance may also be granted for deposits for a new dwelling. Total temporary housing assistance may not exceed $2,500.

58.5(4) Replacement, repair, or provision of other items of necessity may be approved by the department on a case-by-case basis, up to a maximum of $5,000.

[**ARC 9312B**, IAB 12/29/10, effective 3/1/11; **ARC 1353C**, IAB 3/5/14, effective 5/1/14; **ARC 3058C**, IAB 5/10/17, effective 7/1/17]

441—58.6(29C) Eligibility determination and payment.

58.6(1) The contracted entity or designee shall confirm that the bona fide address provided on the application is a valid address and is reasonably believed to be in the disaster-affected area. The department or contracted entity reserves the right to view the damaged property prior to providing any assistance pursuant to IIAGP.

58.6(2) Designated staff in the department shall:

a. Monitor applicants' names and addresses as reports are submitted by the administrative entity.

b. Monitor, review, and provide timely submission of invoices by the administrative entity for payment and shall process appeals.

58.6(3) For applications with a voucher or reimbursement request, the department or its designee shall:

a. Determine eligibility and the amount of payment within the rules of the program.

b. Notify the applicant household of the eligibility decision.

c. Authorize vouchers to an eligible household to purchase needed goods and services.

d. Pay vendors for goods and services purchased with vouchers.

[**ARC 9128B**, IAB 10/6/10, effective 10/1/10; **ARC 9312B**, IAB 12/29/10, effective 3/1/11; **ARC 1353C**, IAB 3/5/14, effective 5/1/14; **ARC 3058C**, IAB 5/10/17, effective 7/1/17]

441—58.7(29C) Contested cases.

58.7(1) *Reconsideration.*

a. The household may request reconsideration of decisions regarding eligibility and the amount of assistance awarded.

b. To request reconsideration, the household shall submit a written request to the DHS Division of Field Operations—Emergency Assistance, 1305 East Walnut Street, Des Moines, Iowa 50319-0114, within 15 days of the date of the letter notifying the household of the department's decision.

c. The department shall review any additional evidence or documentation submitted and issue a reconsideration decision within 15 days of receipt of the request.

58.7(2) *Appeal.* The household may appeal the department's reconsideration decision according to procedures in 441—Chapter 7.

a. Appeals must be submitted in writing, either on Form 470-0487 or 470-0487(S), Appeal and Request for Hearing, or in any form that provides comparable information, to the DHS Appeals Section, 1305 East Walnut Street, Des Moines, Iowa 50319-0114, within 15 days of the date of the reconsideration decision.

b. A written appeal is filed on the date the envelope sent to the department is postmarked or, when the postmarked envelope is not available, on the date the appeal is stamped received by the agency.

[**ARC 9312B**, IAB 12/29/10, effective 3/1/11; **ARC 1353C**, IAB 3/5/14, effective 5/1/14; **ARC 3058C**, IAB 5/10/17, effective 7/1/17]

441—58.8(29C) Discontinuance of program.

58.8(1) *Deferral to federal assistance.* Upon declaration of a disaster by the President of the United States under the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. Sections 5121 to 5206, the Iowa individual assistance grant program administered under this chapter shall be discontinued in the geographic area included in the presidential declaration. Upon issuance of the presidential declaration:

a. No more applications shall be accepted.

b. Any applications that are in process but are not yet approved shall be denied.

c. Persons seeking assistance under this program shall be advised to apply for federal disaster assistance.

58.8(2) *Exhaustion of funds.* The program shall be discontinued when funds available for the program have been exhausted. To ensure equitable treatment, applications for assistance shall be approved on a first-come, first-served basis until all funds have been depleted. "First-come, first-served" is determined by the date the application is approved for payment.

a. *Partial payment.* Because funds are limited, applications may be approved for less than the amount requested. Payment cannot be approved beyond the amount of funds available.

b. *Reserved funds.* A portion of allocated funds shall be reserved for final appeal decisions reversing the department's denial that are received after funds for the program have been awarded.

c. *Untimely applications.* Applications received after the program is discontinued shall be denied.

These rules are intended to implement Iowa Code chapter 29C.

441—58.9 to **58.20** Reserved.

DIVISION II
IOWA DISASTER CASE MANAGEMENT

441—58.21(29C) Purpose. The purpose of these rules is to guide the provision of the Iowa disaster case management (IDCM) program during the time of emergency disaster for individual assistance when a disaster is proclaimed by the governor of the state of Iowa.

[**ARC 3058C**, IAB 5/10/17, effective 7/1/17]

441—58.22(29C) Definitions.

"Contracted entity" means an entity chosen by the department as the contracted administrator for the IDCM program.

"Emergency management coordinator" means the person appointed by the local emergency management commission pursuant to Iowa Code sections 29C.9 and 29C.10 to be responsible for development of the countywide emergency operations plan and for coordination and assistance to government officials when an emergency or disaster occurs.

"Household" means all adults and children who lived in the pre-disaster residence who request assistance, as well as any persons, such as infants, spouses, or part-time residents, who were not present at the time of the disaster but who are expected to return during the assistance period.

"Necessary services" means the guidance and advice in obtaining a service, or assistance in obtaining resources from various providers for any other activity that addresses a serious need.

[**ARC 3058C**, IAB 5/10/17, effective 7/1/17]

441—58.23(29C) Program implementation.

58.23(1) *Disaster proclamation.* The Iowa disaster case management (IDCM) program shall be implemented when the governor issues a proclamation of a state of emergency disaster that authorizes individual assistance.

a. The program shall be in effect only in those counties named in the proclamation. Assistance for a state-only proclamation shall be provided for a period of up to 180 days from the date of proclamation.

b. A request for an additional 90-day extension to the period of performance will be considered when adequate justification is presented to the department.

c. The program shall commence on the day following proclamation of a disaster by the governor and remain in effect through 180 days even if the disaster becomes a presidentially proclaimed disaster that authorizes individual assistance.

d. The period of performance for presidentially proclaimed disaster is 24 months from the date of the presidential proclamation.

e. The reporting of the numbers of contacts, cases opened, cases pending, cases closed, and other required reports requested by the department shall be submitted weekly on a day determined by the department.

f. Audits of disaster case files, as well as cost management and expenditures, may be randomly performed by the department without notice.

58.23(2) *Contracting.* The administrative entity currently under contract for the Iowa disaster aid individual assistance grant program (IIAGP) shall receive an amended contract to specify administration of the IDCM program.

a. Future contract renewals shall be inclusive with the IIAGP and as amended to include the IDCM program.

b. If a local contracted entity is under contract with the state to provide other services or is implementing a state or federal program and the contract contains a sufficient surety bond or other adequate financial responsibility provision, the department shall accept the existing surety bond or financial responsibility provisions in lieu of applying a new or additional surety bond or financial responsibility requirement.

c. The contracted entity shall coordinate activities with emergency management coordinators and voluntary organizations active in the disaster while the program is active. The contracted entity may subcontract with other entities to provide disaster case management with the approval of the department.

[**ARC 3058C**, IAB 5/10/17, effective 7/1/17]

441—58.24(29C) Eligibility criteria. To be eligible for assistance, an applicant household must meet all of the following conditions:

58.24(1) The household's residence was located in the area identified in the disaster proclamation during the designated incident period and the household verifies occupancy at that residence.

58.24(2) Household members are citizens of the United States or are legally residing in the United States.

58.24(3) The household has disaster-related needs that represent a burden that the family is unable to resolve.
[**ARC 3058C**, IAB 5/10/17, effective 7/1/17]

441—58.25(29C) Services. Disaster case management is a time-limited resource and process that involves a partnership between a case manager and a household impacted by a disaster (also known as a client) to develop and carry out a disaster recovery plan. This partnership provides the client with a single point of contact to facilitate access to a broad range of resources, promoting sustainable assistance for individuals and a household's recovery. These services are client-focused and provided in a manner consistent with standards for trauma-informed practice in human services.
[**ARC 3058C**, IAB 5/10/17, effective 7/1/17]

441—58.26(29C) Disaster-caused unmet needs. A disaster-caused unmet need is an unresourced item, support, or assistance that has been assessed by a representative from a local, state, tribal, federal agency, voluntary, or faith-based organization and that is needed for the client to recover from the disaster. Unmet disaster-caused needs may also include basic and immediate needs, such as food, clothing, shelter, or first aid, and long-term needs, such as financial, physical, emotional or spiritual well-being.
[**ARC 3058C**, IAB 5/10/17, effective 7/1/17]

441—58.27(29C) Resources. Applicable resources may include, but not be limited to, insurance payments, state assistance, voluntary/faith-based and local community assistance, federal disaster assistance, small business administration loans, and personal resources.
[**ARC 3058C**, IAB 5/10/17, effective 7/1/17]

441—58.28(29C) Standards and policies.

58.28(1) *Access.* The contracted entity shall provide clients with ease of access to disaster case management services.

58.28(2) *Confidentiality and duplications of benefits.*

a. The contracted entity shall have policies and procedures to meet requirements regarding maintaining confidentiality set forth by the department.

b. The contracted entity shall develop memorandums of agreement, memorandums of understanding, and release of information that will allow coordinated case advocacy and services and prevent the duplication of benefits.

58.28(3) *Engagement.* The case manager shall create a sustainable, trusting partnership with the client.

58.28(4) *Screening.* The case manager shall perform screening to determine eligibility and disaster-related unmet needs.

58.28(5) *Intake and assessment.* The case manager shall perform intake and assessment procedures to triage disaster-related needs of eligible households.

a. A case manager shall conduct an assessment specifically seeking targeted information to identify a client's disaster-related needs.

b. An assessment should focus on planning for recovery and meeting recovery goals.

c. An assessment should be conducted in person, when feasible, and should follow all standards for confidentiality and engagement.

58.28(6) *Recovery planning.*

a. A recovery plan should outline tasks for both the client and case manager based on an assessment and documentation of needed services.

b. The plan should identify priority needs and connect the client with resources, establish benchmarks and goals to measure progress toward recovery, and outline a case closure procedure.

c. The plan should be a joint effort between the case manager and the client.

d. The case manager should explain the available options, the resource and recovery alternatives, and the support services offered by the case manager.

58.28(7) *Action and advocacy.* The case manager's role in recovery includes: providing, referring or arranging for needed services and resources; verifying unmet needs, completing documentation and checking duplication of benefits; and actively advocating for the client through presentation, participation in recovery groups and interface with government and nongovernment resource providers.

58.28(8) *Monitoring.* Monitoring the services allows the case manager to keep documents up to date, to determine if the chosen resources are providing the services needed, and to evaluate whether adjustments are needed.

58.28(9) *Closure.*

a. Closure procedures should be outlined in the recovery plan and the roles and responsibilities of the client and case manager clearly defined.

b. Case closure acknowledges the recovery goals achieved, recognizes the progress made toward unmet goals, and identifies needed resources to continue progress.

[**ARC 3058C**, IAB 5/10/17, effective 7/1/17]

441—58.29(29C) Planning and training. Training shall adhere to the disaster case management criteria, as prescribed by the federal Administration for Children and Families, and follow the disaster case management guidelines as designed by the Iowa disaster human resource council or the approved rules of the department. The department shall request from the executive council of the state of Iowa funds to perform training in disaster case management as requested and required to prepare for disaster response.

[**ARC 3058C**, IAB 5/10/17, effective 7/1/17]

441—58.30(29C) Payment for services.

58.30(1) The department will negotiate payment with the contracted entity when the contract is established. Payment will be based on the contracted entity's actual direct and indirect costs.

58.30(2) The department will accept the contracted entity's federally approved indirect cost rates as required by the federal Office of Management and Budget (OMB).

58.30(3) The local administrative entity may draw down grant funding to pay valid claims on at least a weekly basis.

58.30(4) Exhaustion of funds. The program shall be discontinued when the funds available for the program have been exhausted. The department will notify the contracted entity of the total available funds for the IDCM program once funds have been approved by the executive council. To ensure equitable treatment, assistance shall be approved on a first-come, first-served basis until all funds have been exhausted.

[**ARC 3058C**, IAB 5/10/17, effective 7/1/17]

441—58.31(29C) Contested cases.

58.31(1) *Reconsideration.*

a. The household may request reconsideration of decisions regarding eligibility.

b. To request reconsideration, the household shall submit a written request to the DHS Division of Field Operations—Emergency Assistance, 1305 East Walnut Street, Des Moines, Iowa 50319-0114, within 15 days of the date of the letter notifying the household of the contracted entity's decision.

c. The department shall review any additional evidence or documentation submitted and issue a reconsideration decision within 15 days of receipt of the request.

58.31(2) *Appeal.* The household may appeal the department's reconsideration decision according to procedures in 441—Chapter 7.

a. Appeals must be submitted in writing, either on Form 470-0487 or 470-0487(S), Appeal and Request for Hearing, or in any form that provides comparable information, to the DHS Appeals Section, 1305 East Walnut Street, Des Moines, Iowa 50319-0114, within 15 days of the date of the reconsideration decision.

b. A written appeal is filed on the date the envelope sent to the department is postmarked or, when the postmarked envelope is not available, on the date the appeal is stamped received by the agency.
[**ARC 3058C**, IAB 5/10/17, effective 7/1/17]

These rules are intended to implement Iowa Code sections 234.6 and 29C.20B.

441—58.32 to **58.40** Reserved.

DIVISION III
TEMPORARY MEASURES RELATED TO DISASTERS
Rescinded IAB 5/10/17, effective 7/1/17

441—58.41 to **58.50** Reserved.

DIVISION IV
IOWANS HELPING IOWANS UNMET NEEDS DISASTER ASSISTANCE PROGRAM
Rescinded IAB 5/10/17, effective 7/1/17

441—58.51 to **58.60** Reserved.

DIVISION V
TICKET TO HOPE PROGRAM
Rescinded IAB 5/10/17, effective 7/1/17

441—58.61 to **58.68** Reserved.

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[Filed ARC 3058C (Notice ARC 2898C, IAB 1/18/17), IAB 5/10/17, effective 7/1/17]

CHILD ADVOCACY BOARD[489]

[Prior to 3/23/88, see Foster Care Review Board, State[445];
transferred to Inspections and Appeals Department "umbrella" pursuant to 1986 Iowa Acts, chapter 1245, section 549]
[Former Foster Care Review Board[489] renamed Child Advocacy Board[489] by 2002 Iowa Acts, chapter 1162]

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CHAPTER 1
PURPOSE AND FUNCTION

[Prior to 3/23/88, see Foster Care Review Board[445] Ch 1]

489—1.1(237) Purpose. The child advocacy board is established by Iowa Code section 237.16 to carry out all duties described in Iowa Code section 237.18. The board is charged with the responsibility of establishing a foster care registry, establishing local review boards to review cases of children in foster care, establishing a training program for board members, establishing procedures and protocols for administering the court appointed special advocate program, receiving and administering funds received for the state board's programs and annually reporting findings and making recommendations to the governor, general assembly, the supreme court, the chief judge of each judicial district, the department, and child-placing agencies.

1.1(1) *Location.* The child advocacy board is located in the Lucas State Office Building, 321 East 12th Street, Des Moines, Iowa 50319-0083; telephone (515)281-7621. Office hours are 8 a.m. to 4:30 p.m., Monday through Friday, except on state holidays. The child advocacy board is created within the department of inspections and appeals.

1.1(2) *Definitions.* The following definitions apply to the rules of the child advocacy board.

"Case permanency plan" means the same as defined in Iowa Code section 232.2(4), except the plan shall also include all of the following:

1. The efforts to place the child with a relative.
2. The rationale for an out-of-state placement, and the efforts to prevent such placement, if the child has been placed out of state.
3. Time frames to meet the stated permanency goal and short-term objectives.

"Child receiving foster care" means a child defined in Iowa Code section 234.1 who is described by any of the following circumstances:

1. The child's foster care placement is the financial responsibility of the state pursuant to Iowa Code section 234.35.
2. The child is under the guardianship of the department.
3. The child has been involuntarily hospitalized for mental illness pursuant to Iowa Code chapter 229.
4. The child is at risk of being placed outside the child's home, the department or court is providing or planning to provide services to the child, and the department or court has requested the involvement of the state or local board.

"Court appointed special advocate" means the same as defined in Iowa Code section 232.2.

"Department" means the department of human services.

"Family" means the social unit consisting of the child and the biological or adoptive parent, stepparent, brother, sister, stepbrother, stepsister, and grandparent of the child.

"Local board" means a local citizen foster care review board created pursuant to Iowa Code section 237.19.

"Person or court responsible for the child" means the department, including but not limited to the department of human services, agency, or individual who is the guardian of a child by court order issued by the juvenile or district court and has the responsibility of the care of the child, or the court having jurisdiction over the child.

"State board" means the child advocacy board created pursuant to Iowa Code section 237.16.

[**ARC 3054C**, IAB 5/10/17, effective 6/14/17]

This rule is intended to implement Iowa Code sections 17A.3, 237.15, and 237.16.

[Filed emergency 5/30/85—published 6/19/85, effective 5/30/85]
[Filed emergency 7/1/86—published 7/16/86, effective 7/1/86]
[Filed 3/3/88, Notice 1/27/88—published 3/23/88, effective 4/27/88]
[Filed 9/2/88, Notice 6/15/88—published 9/21/88, effective 10/26/88]
[Filed ARC 3054C (Notice ARC 2974C, IAB 3/15/17), IAB 5/10/17, effective 6/14/17]

CHAPTER 2
RULES AND OPERATION FOR THE STATE BOARD

[Prior to 3/23/88, see Foster Care Review Board[445] Ch 2]

489—2.1(237) Membership and term.

2.1(1) *Membership and terms.* The child advocacy board is created within the department of inspections and appeals. The state board consists of nine members appointed by the governor, subject to confirmation by the senate and directly responsible to the governor. One member shall be an active court appointed special advocate volunteer, one member shall be an active member of a local citizen foster care review board, and one member shall be a judicial branch employee or judicial officer appointed from nominees submitted by the judicial branch. The appointment is for a term of four years that begins and ends as provided in Iowa Code section 69.19. Vacancies on the state board shall be filled in the same manner as original appointments are made. An employee of the department of human services or of the department of inspections and appeals, an employee of a child-placing agency, an employee of an agency with which the department of human services contracts for services for children under foster care, a foster parent providing foster care, or an employee of the district court is not eligible to serve on the state board. However, the judicial branch employee or judicial officer appointed from nominees submitted by the judicial branch in accordance with Iowa Code section 237.16(1) shall be eligible to serve on the state board.

2.1(2) *Officers.* The members of the state board shall annually select a chairperson, vice chairperson, and other officers the members deem necessary. The members may be entitled to receive reimbursement for actual and necessary expenses incurred in the performance of their duties, subject to available funding. Each member of the state board may also be eligible to receive compensation as provided in Iowa Code section 7E.6.

2.1(3) *Meetings.* The state board shall meet at least twice a year. Notice of a meeting is published at least seven days in advance of the meeting and will be mailed to interested persons upon request. The notice shall contain the specific date, time and place of the meeting. The agenda will be made available to any interested person not less than seven days in advance of the meeting. All meetings will be open to the public, pursuant to Iowa Code chapter 21, unless a closed session is voted by a quorum. The operation of the state board meetings will be governed by the following rules of procedure.

a. A quorum shall consist of a majority of the members. When a quorum is present, a position is carried by an affirmative vote of a majority of the members present.

b. Minutes of state board meetings are prepared and are available at the board office for inspection during office hours. Copies may be obtained without charge by contacting the office.

c. At each meeting the state board shall set the time, date and place of the next meeting.

(1) Notice of the meeting shall be given pursuant to Iowa Code chapter 21.

(2) When the chairperson of the state board determines that a special or electronic meeting is required, the meeting shall be held in accordance with Iowa Code section 21.4 or 21.8.

(3) Persons wishing to appear before the state board shall submit the request to the state board office not less than ten days prior to the meeting. Presentations may be made at the discretion of the chairperson and only upon matters appearing on the agenda. Persons wishing to submit written material should do so at least ten days in advance of the scheduled meeting to ensure that state board members have adequate time to receive and evaluate the material.

(4) Cameras and recording devices may be used at open meetings provided they do not obstruct the meeting. The presiding officer may request a person using such a device to discontinue its use when it is obstructing the meeting. If a person fails to comply with this request, the presiding officer shall order that person excluded from the meeting.

(5) The presiding officer may exclude any person from the meeting for repeated behavior that disrupts or obstructs the meeting.

(6) Cases not covered by these rules shall be governed by Robert's Rules of Order.

2.1(4) *Powers and duties.* The powers and duties of the state board are enumerated in Iowa Code section 237.18.

This rule is intended to implement Iowa Code sections 17A.3, 237.16, and 237.18.

[**ARC 3055C**, IAB 5/10/17, effective 6/14/17]

489—2.2(237) Administrator. The state board appoints an administrator for the child advocacy board. The administrator is responsible for the ongoing administration of the state and local boards' activities and of the court appointed special advocate program. The administrator:

1. Applies for and administers funds necessary for operations of the child advocacy board and the foster care review board and the court appointed special advocate program.
2. Employs, discharges, trains, and supervises foster care review board and court appointed special advocate program employees.
3. Develops and implements policies and procedures needed to implement requirements of federal law and regulations and state law and administrative rules.
4. Develops and recommends administrative rules for promulgation by the state board as needed to govern the operation of the state board, the foster care review board program and the court appointed special advocate program.
5. Ensures training is provided for state and local board members, court appointed special advocates and coaches and any other volunteers supporting the state board's programs.
6. Ensures that relationships are developed and maintained between the local board and judges, juvenile court referees, local departments, juvenile court services, and advocacy groups.
7. Coordinates efforts to ensure community awareness of state and local boards and the court appointed special advocate program.
8. Works closely with allied agencies and associations to ensure that efforts relating to state and local boards and the court appointed special advocate program are coordinated and consistent.
9. Develops a management information system and procedures which provide feedback to local agencies serving the children to be reviewed, schedules for review, and recommendations following reviews and which provide reports of court appointed special advocate observations, findings, and recommendations to the court and parties to the child's case to which the advocate is assigned.
10. Designs forms and specifies the means by which foster care agencies may transmit case information to local boards.

This rule is intended to implement Iowa Code sections 17A.3 and 237.18(5).

[**ARC 3055C**, IAB 5/10/17, effective 6/14/17]

489—2.3(237) Foster care registry. The state board shall establish a registry of the placements of all children receiving foster care. The department shall notify the state board of each placement within five working days of the department's notification of the placement. The notification to the state board shall include information identifying the child receiving foster care and placement information for that child.

Within 30 days of the placement or 2 days after the dispositional hearing, the agency responsible for the placement shall submit the case permanency plan to the state board. All subsequent revisions of the case permanency plan shall be submitted when the revisions are developed.

This rule is intended to implement Iowa Code sections 17A.3 and 237.17.

[**ARC 3055C**, IAB 5/10/17, effective 6/14/17]

489—2.4(237) Confidentiality of records—penalty. The state and local boards, court appointed special advocates and coaches and child advocacy employees shall adhere to the confidentiality requirements established in Iowa Code section 237.21.

This rule is intended to implement Iowa Code sections 17A.3 and 237.21.

[**ARC 3055C**, IAB 5/10/17, effective 6/14/17]

[Filed emergency 5/30/85—published 6/19/85, effective 5/30/85]
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CHAPTER 91
WATERFOWL AND COOT HUNTING SEASONS
[Prior to 12/31/86, Conservation Commission[290] Ch 107]

571—91.1(481A) Duck hunting.

91.1(1) *Zone boundaries.* The north duck hunting zone is that part of Iowa north of a line beginning on the South Dakota-Iowa border at Interstate 29, southeast along Interstate 29 to State Highway 175, east to State Highway 37, southeast to State Highway 183, northeast to State Highway 141, east to U.S. Highway 30, and along U.S. Highway 30 to the Iowa-Illinois border. The Missouri River duck hunting zone is that part of Iowa west of Interstate 29 and south to the Iowa-Missouri border. The south duck hunting zone is the remainder of the state.

91.1(2) *Season dates - north zone.* Special September teal season: September 2 through September 10. For all ducks: September 23 through October 1 and October 14 through December 3.

91.1(3) *Season dates - south zone.* Special September teal season: September 2 through September 10. For all ducks: September 30 through October 4 and October 21 through December 14.

91.1(4) *Season dates - Missouri River zone.* Special September teal season: September 2 through September 17. For all ducks: October 7 and October 8 and October 21 through December 17.

91.1(5) *Bag limit.* Special September teal season: The daily bag limit is 6 teal of any species. For all ducks: The daily bag limit of ducks is 6, and may include no more than 4 mallards (no more than 2 of which may be females), 2 black ducks, 3 wood ducks, 1 pintail, 1 mottled duck, 2 canvasback, 2 redheads, and 3 scaup. The daily bag limit of mergansers is 5, only 2 of which may be hooded mergansers.

91.1(6) *Possession limit.* For the special September teal season and for all ducks: Possession limit is three times the daily bag limit.

91.1(7) *Shooting hours.* For the special September teal season: Shooting hours are sunrise to sunset each day. For all ducks: Shooting hours are one-half hour before sunrise to sunset each day.

[**ARC 8106B**, IAB 9/9/09, effective 8/18/09; **ARC 9055B**, IAB 9/8/10, effective 8/16/10; **ARC 9720B**, IAB 9/7/11, effective 8/19/11; **ARC 0307C**, IAB 9/5/12, effective 8/15/12; **ARC 1003C**, IAB 9/4/13, effective 8/15/13; **ARC 1614C**, IAB 9/3/14, effective 8/15/14; **ARC 2129C**, IAB 9/2/15, effective 8/13/15; **ARC 2526C**, IAB 5/11/16, effective 6/15/16; **ARC 3060C**, IAB 5/10/17, effective 6/14/17]

571—91.2(481A) Coots (split season). Same as duck season dates and shooting hours.

91.2(1) *Bag and possession limits.* Daily bag limit is 15 and possession limit is three times the daily bag limit.

91.2(2) Reserved.

[**ARC 1003C**, IAB 9/4/13, effective 8/15/13]

571—91.3(481A) Goose hunting.

91.3(1) *Zone boundaries.* The north goose hunting zone is that part of Iowa north of a line beginning on the South Dakota-Iowa border at Interstate 29, southeast along Interstate 29 to State Highway 175, east to State Highway 37, southeast to State Highway 183, northeast to State Highway 141, east to U.S. Highway 30, and along U.S. Highway 30 to the Iowa-Illinois border. The Missouri River goose hunting zone is that part of Iowa west of Interstate 29 and south to the Iowa-Missouri border. The south goose hunting zone is the remainder of the state.

91.3(2) *Season dates - north zone.* Dark geese (Canada geese, white-fronted geese, brant and any other geese that are not light geese): September 23 through October 8 and October 14 through January 1, 2018. Light geese (white and blue-phase snow geese and Ross' geese): September 23 through October 8 and October 14 through January 10, 2018.

91.3(3) *Season dates - south zone.* Dark geese (Canada geese, white-fronted geese, brant and any other geese that are not light geese): September 30 through October 8 and October 21 through January 15, 2018. Light geese (white and blue-phase snow geese and Ross' geese): September 30 through October 8 and October 21 through January 24, 2018.

91.3(4) *Season dates - Missouri River zone.* Dark geese (Canada geese, white-fronted geese, brant and any other geese that are not light geese): October 7 through October 15 and October 21 through January 15, 2018. Light geese (white and blue-phase snow geese and Ross' geese): October 7 through October 15 and October 21 through January 24, 2018.

91.3(5) *Bag limit.* The daily bag limit for dark geese (Canada geese, white-fronted geese, brant and any other geese that are not light geese) is 5 and may include no more than 2 Canada geese from September 23 through October 31 and no more than 3 Canada geese from November 1 through the end of the season. The daily bag limit for light geese (white and blue-phase snow geese and Ross' geese) is 20.

91.3(6) *Possession limit.* The possession limit is three times the daily bag limit for Canada geese, brant and white-fronted geese. There is no possession limit for light geese.

91.3(7) *Shooting hours.* Shooting hours are one-half hour before sunrise until sunset each day.

91.3(8) *Light goose conservation order season.* Only light geese (white and blue-phase snow geese and Ross' geese) may be taken under a conservation order from the U.S. Fish and Wildlife Service from January 25, 2018, through April 15, 2018.

a. *Zone boundaries.* Statewide.

b. *Shooting hours.* One-half hour before sunrise to one-half hour after sunset.

c. *Bag limit.* No bag limit.

d. *Possession limit.* No possession limit.

e. *Other regulations.* Methods of take approved by the U.S. Fish and Wildlife Service for hunting light geese during the conservation order season shall be permitted.

91.3(9) *Cedar Rapids/Iowa City goose hunting zone.*

a. *Season dates.* September 2 through September 10.

b. *Bag limit.* Daily bag limit is 5 Canada geese.

c. *Possession limit.* Three times the daily bag limit.

d. *Zone boundary.* The Cedar Rapids/Iowa City goose hunting zone includes portions of Linn and Johnson Counties bounded as follows: Beginning at the intersection of the west border of Linn County and Linn County Road E2W; thence south and east along County Road E2W to Highway 920; thence north along Highway 920 to County Road E16; thence east along County Road E16 to County Road W58; thence south along County Road W58 to County Road E34; thence east along County Road E34 to Highway 13; thence south along Highway 13 to Highway 30; thence east along Highway 30 to Highway 1; thence south along Highway 1 to Morse Road in Johnson County; thence east along Morse Road to Wapsi Avenue; thence south along Wapsi Avenue to Lower West Branch Road; thence west along Lower West Branch Road to Taft Avenue; thence south along Taft Avenue to County Road F62; thence west along County Road F62 to Kansas Avenue; thence north along Kansas Avenue to Black Diamond Road; thence west on Black Diamond Road to Jasper Avenue; thence north along Jasper Avenue to Rohert Road; thence west along Rohert Road to Ivy Avenue; thence north along Ivy Avenue to 340th Street; thence west along 340th Street to Half Moon Avenue; thence north along Half Moon Avenue to Highway 6; thence west along Highway 6 to Echo Avenue; thence north along Echo Avenue to 250th Street; thence east on 250th Street to Green Castle Avenue; thence north along Green Castle Avenue to County Road F12; thence west along County Road F12 to County Road W30; thence north along County Road W30 to Highway 151; thence north along the Linn-Benton County line to the point of beginning.

91.3(10) *Des Moines goose hunting zone.*

a. *Season dates.* September 2 through September 10.

b. *Bag limit.* Daily bag limit is 5 Canada geese.

c. *Possession limit.* Three times the daily bag limit.

d. *Zone boundary.* The Des Moines goose hunting zone includes those portions of Polk, Warren, Madison and Dallas Counties bounded as follows: Beginning at the intersection of Northwest 158th Avenue and County Road R38 in Polk County; thence south along County Road R38 to Northwest 142nd Avenue; thence east along Northwest 142nd Avenue to Northeast 126th Avenue; thence east along Northeast 126th Avenue to Northeast 46th Street; thence south along Northeast 46th Street to Highway 931; thence east along Highway 931 to Northeast 80th Street; thence south along Northeast 80th Street to Southeast 6th Avenue; thence west along Southeast 6th Avenue to Highway 65; thence south and west along Highway 65 to Highway 69 in Warren County; thence south along Highway 69 to County Road G24; thence west along County Road G24 to Highway 28; thence southwest along Highway 28 to 43rd Avenue; thence north along 43rd Avenue to Ford Street; thence west along Ford Street to Filmore

Street; thence west along Filmore Street to 10th Avenue; thence south along 10th Avenue to 155th Street in Madison County; thence west along 155th Street to Cumming Road; thence north along Cumming Road to Badger Creek Avenue; thence north along Badger Creek Avenue to County Road F90 in Dallas County; thence east along County Road F90 to County Road R22; thence north along County Road R22 to Highway 44; thence east along Highway 44 to County Road R30; thence north along County Road R30 to County Road F31; thence east along County Road F31 to Highway 17; thence north along Highway 17 to Highway 415 in Polk County; thence east along Highway 415 to Northwest 158th Avenue; thence east along Northwest 158th Avenue to the point of beginning.

91.3(11) *Cedar Falls/Waterloo goose hunting zone.*

a. *Season dates.* September 2 through September 10.

b. *Bag limit.* Daily bag limit is 5 Canada geese.

c. *Possession limit.* Three times the daily bag limit.

d. *Zone boundary.* The Cedar Falls/Waterloo goose hunting zone includes those portions of Black Hawk County bounded as follows: Beginning at the intersection of County Roads C66 and V49 in Black Hawk County, thence south along County Road V49 to County Road D38, thence west along County Road D38 to State Highway 21, thence south along State Highway 21 to County Road D35, thence west along County Road D35 to Grundy Road, thence north along Grundy Road to County Road D19, thence west along County Road D19 to Butler Road, thence north along Butler Road to County Road C57, thence north and east along County Road C57 to U.S. Highway 63, thence south along U.S. Highway 63 to County Road C66, thence east along County Road C66 to the point of beginning.

[**ARC 8106B**, IAB 9/9/09, effective 8/18/09; **ARC 9055B**, IAB 9/8/10, effective 8/16/10; **ARC 9720B**, IAB 9/7/11, effective 8/19/11; **ARC 0307C**, IAB 9/5/12, effective 8/15/12; **ARC 1003C**, IAB 9/4/13, effective 8/15/13; **ARC 1614C**, IAB 9/3/14, effective 8/15/14; **ARC 2129C**, IAB 9/2/15, effective 8/13/15; **ARC 2526C**, IAB 5/11/16, effective 6/15/16; **ARC 3060C**, IAB 5/10/17, effective 6/14/17]

571—91.4(481A) Closed areas. Waterfowl and coots may be hunted statewide except in specific areas.

91.4(1) *Waterfowl and coots.* There shall be no open season for ducks, coots and geese on the east and west county road running through sections 21 and 22, township 70 north, range 43 west, Fremont County; three miles of U.S. Highway 30, located on the south section lines of sections 14, 15, and 16, township 78 north, range 45 west, Harrison County; on the county roads immediately adjacent to, or through, Union Slough National Wildlife Refuge, Kossuth County; Louisa County Road X61 from the E-W centerline of section 29, township 74 north, range 2 west, on the south, to the point where it crosses Michael Creek in section 6, township 74 north, range 2 west, on the north, and also all roads through or adjacent to sections 7, 18, and 19 of this same township and roads through or adjacent to sections 12 and 13, township 74 north, range 3 west; the levee protecting the Green Island Wildlife Area from the Mississippi River in Jackson County wherever the levee is on property owned by the United States or the state of Iowa; certain dikes at Otter Creek Marsh, Tama County, where posted as such; and the NE¼, section 23, and the N½, section 24, all in township 70 north, range 19 west, Appanoose County, including county roads immediately adjacent thereto; and all privately owned lands in the S½, section 30, township 71 north, range 20 west, Lucas County, including the county road immediately adjacent thereto; Cerro Gordo County Road S14 and its right-of-way, between its junction with U.S. Highway 18 and County Road B-35, and portions of Clear Lake and Ventura Marsh, where posted as such in Cerro Gordo County; that portion of Summit Lake located south of State Highway 25 in the west half of the NW¼ of section 2 (22 acres), and the west half of section 3 (100 acres), T72N, R31W in Union County; and within 150 feet of the center of the Army Road from New Albin to the boat ramp on the Mississippi River in sections 11 and 12, T100N, R4W, and sections 7 and 8, T100N, R3W, as posted.

91.4(2) *Canada geese.* There shall be no open season on Canada geese in certain areas described as follows:

a. *Area one.* Portions of Emmet County bounded as follows: Beginning at the northwest corner of section 3, township 98 north, range 33 west; thence east on the county road a distance of five miles; thence south on the county road a distance of three and one-half miles; thence west on the county road a distance of four miles; then continuing west one mile to the southwest corner of the northwest one-quarter of section 22, township 98 north, range 33 west; thence north on the county road to the point of beginning.

b. Area two. Portions of Clay and Palo Alto Counties bounded as follows: Beginning at the junction of County Roads N14 and B17 in Clay County, thence south four miles on N14 (including the road right-of-way), thence east one-half mile, thence east one mile on a county road, thence north one mile on a county road, thence east one mile on a county road to County Road N18, thence south and east approximately one mile on N18, thence east one and one-half miles on a Palo Alto County Road, thence north two miles on a county road, thence east approximately one and one-half miles on a county road, thence north two miles on a county road to County Road B17, thence west six miles to the point of beginning.

c. Area three. A portion of Dickinson County bounded as follows: Beginning at the junction of State Highways 9 and 86; thence north along State Highway 86 (including the right-of-way) to the Iowa-Minnesota state line; thence east along the Iowa-Minnesota state line approximately 3.5 miles (excluding any road right-of-ways) to 240th Avenue (also known as West Lake Shore Drive in Orleans or Peoria Avenue in Spirit Lake); thence south along 240th Avenue (including the right-of-way) to State Highway 9; thence west along State Highway 9 (including the right-of-way) to the point of beginning.

d. Area four. Portions of Winnebago and Worth Counties bounded as follows: Beginning at the junction of U.S. Highway 69 and County Road 105 in the city of Lake Mills; thence east along County Road 105 (including the right-of-way and all other road right-of-ways identified in this description) approximately 2 miles to Apple Ave.; thence south along Apple Ave. to 448th St.; thence east two and one-fourth miles on 448th St. to Cardinal Ave.; thence south one-fourth mile to 445th St.; thence east one-fourth mile to Cedar Ave.; thence south one-half mile on Cedar Ave. to the intersection of Cedar Ave. and 440th St.; thence south one-half mile across the north half of section 16, township 99 north, range 22 west, to the intersection of Cedar Ave. and 435th St.; thence south 2 miles along Cedar Ave. to Lake St.; thence west one-fourth mile along Lake St. to Front St.; thence southeast one-half mile along Front St. to County Road A38 (also named 410th St.); thence west along County Road A38 to County Road R74 (also named 225th Ave.); thence north along County Road R74 to 420th St.; thence west along 420th St. to 220th Ave.; thence north along 220th Ave. to 430th St.; thence west along 430th St. one-half mile; thence north one mile across section 15, township 99 north, range 23 west, to the intersection of 440th St. and 215th Ave.; thence north one-fourth mile on 215th Ave. to 445th St.; thence east and northeast on 445th St. to South 12th Ave. West in Lake Mills; thence east on South 12th Ave. West to South Lake St.; thence north on South Lake St. to point of beginning.

e. Area five. On any federal or state-owned lands or waters within the area bounded by the following roads: Beginning at the junction of Lucas County Road S56 and 400th Street; thence west on 400th Street to its intersection with 291st Avenue; thence north on 291st Avenue to its intersection with 410th Street; thence west on 410th Street to its intersection with 280th Avenue; thence north on 280th Avenue to its intersection with 430th Street; thence east on 430th Street to its intersection with 290th Trail; thence south and east on 290th Trail to its intersection with Lucas County Road S56; thence south on Lucas County Road S56 to the point of beginning, including all federal, state, and county roads through or immediately adjacent thereto.

f. Area six. Rescinded IAB 8/31/05, effective 8/11/05.

g. Area seven. Portions of Guthrie and Dallas Counties bounded as follows: Beginning at the junction of State Highways 4 and 44 in Panora; thence north along State Highway 4 (including the right-of-way) to County Road F25; thence east along County Road F25 (including the right-of-way) to York Avenue; thence south along York Avenue 1 mile (including the right-of-way) to 170th Street; thence east one-half mile (including the right-of-way) to A Avenue in Dallas County; thence south on A Avenue 5 miles (including the right-of-way) to State Highway 44; thence west along State Highway 44 (including the right-of-way) to the point of beginning.

h. Area eight. A portion of Adams County bounded as follows: Beginning at the intersection of State Highway 148 and Adams County Road N28; thence east along Adams County Road N28 (including the right-of-way) to Adams County Road N53; thence east and north along Adams County Road N53 (including the right-of-way) approximately 4.5 miles to Adams County Road H24; thence west along Adams County Road H24 (including the right-of-way) about 8 miles to Hickory Avenue; thence south

along Hickory Avenue (including the right-of-way) about 2.5 miles to Adams County Road N28; thence east along Adams County Road N28 (including the right-of-way) to the point of beginning.

i. *Area nine.* Portions of Monona and Woodbury Counties bounded as follows: For the portion in Monona County, beginning at the junction of County Road K42 and 120th Street; thence south along County Road K42 (including the right-of-way and all other road right-of-ways identified in this description) approximately 4 miles; thence south on Berry Avenue approximately 1 mile to 170th Street; thence east along 170th Street to Cork Avenue; thence north along Cork Avenue to County Road K45; thence northwest approximately 2 miles along County Road K45 to 120th Street; thence west along 120th Street to the point of beginning; and for the portion in Woodbury County, beginning at the junction of County Road K42 and Interstate 29; thence northwest along Interstate 29 approximately 6 miles to the intersection with Woodbury County Road K25; thence west approximately 2 miles along Woodbury County Road K25 to the intersection with Port Neal Road; thence continuing along the same westerly line approximately 1 mile on the north border of section 6, township 86 north, range 47 west, to the center of the Missouri River; thence southerly along the Missouri River channel approximately 8 miles to a point where 340th Street meets the Iowa-Nebraska state line on the Missouri River except that portion of Nebraska lying on the east side of the Missouri River; thence east to and along 340th Street approximately 5.5 miles to County Road K42; thence north and east along County Road K42 approximately 1.5 miles to the point of beginning.

j. *Area ten.* Rescinded IAB 9/5/01, effective 8/17/01.

k. *Area eleven.* Starting at the junction of the navigation channel of the Mississippi River and the mouth of the Maquoketa River in Jackson County, proceeding southwesterly along the high-water line on the west side of the Maquoketa River to U.S. Highway 52; thence southeast along U.S. Highway 52 (including the right-of-way) to 607th Avenue; thence east along 607th Avenue (including the right-of-way) to the Sioux Line Railroad; thence north and west along the Sioux Line Railroad to the Green Island levee; thence northeast along a line following the Green Island levee to the center of the navigational channel of the Mississippi River; thence northwest along the center of the navigational channel to the point of beginning.

l. *Area twelve.* Rescinded IAB 8/30/06, effective 8/11/06.

m. *Area thirteen.* Portions of Van Buren County bounded as follows: Beginning at the junction of State Highway 2 and State Highway 1; thence west on State Highway 2 to County Road V64 (including the right-of-way and all other road right-of-ways identified in this description); thence north on County Road V64 to County Road J40; thence east on County Road J40 to State Highway 1; thence south on State Highway 1 to the point of beginning.

n. *Area fourteen.* Portions of Bremer County bounded as follows: Beginning at the intersection of Tahoe Avenue and State Highway 93 (also named 140th Street); thence south along Tahoe Avenue (including the right-of-way and all other road right-of-ways identified in this description) to County Road C33; thence west along County Road C33 to Navaho Avenue; thence north along Navaho Avenue to State Highway 93; thence west along State Highway 93 to U.S. Highway 63; thence north 3 miles along U.S. Highway 63 to 140th Street; thence east along 140th Street for 2 miles and continuing on a similar east line for 2 more miles along the north borders of sections 28 and 29, township 93 north, range 12 west, to County Road V5C (also named 140th Street); thence east about one-half mile on County Road V5C to State Highway 93; thence east on State Highway 93 to the point of beginning.

o. *Area fifteen.* Portions of Butler County bounded as follows: Beginning at the junction of State Highway 14 and 245th Street; thence south along State Highway 14 (including the right-of-way and all other road right-of-ways identified in this description) to 280th Street; thence west along 280th Street for 3 miles; continuing on a similar westerly line along the south border of section 32, township 91 north, range 17 west, to County Road T25 (also named Hickory Avenue); thence north along County Road T25 to 230th Street; thence east along 230th Street to Jackson Avenue; thence south along Jackson Avenue to 240th Street; thence east along 240th Street to Jackson Avenue; thence south on Jackson Avenue to 245th Street; thence east along 245th Street to the point of beginning.

p. *Area sixteen.* A portion of Union County bounded as follows: Beginning at the intersection of U.S. Highway 34 and County Road P53 near Afton; thence west along U.S. Highway 34 (including the

right-of-way and all other road right-of-ways identified in this description) approximately 2.5 miles to Twelve Mile Lake Road; thence north along Twelve Mile Lake Road approximately 5 miles to Union County Road H17; thence north and east along Union County Road H17 to County Road P53; thence south along County Road P53 to the point of beginning.

q. *Area seventeen.* Rescinded IAB 9/1/04, effective 8/13/04.

91.4(3) *Forney Lake.* The entire Forney Lake area, in Fremont County, north of the east-west county road, shall be closed to waterfowl hunting prior to the opening date for taking geese on the area each year.

[**ARC 8106B**, IAB 9/9/09, effective 8/18/09; **ARC 0307C**, IAB 9/5/12, effective 8/15/12; **ARC 3060C**, IAB 5/10/17, effective 6/14/17]

571—91.5(481A) Canada goose hunting within closed areas.

91.5(1) *Closed areas.* All areas described in subrule 91.4(2).

a. *Purpose.* The hunting of Canada geese in closed areas is being undertaken to allow landowners or tenants who farm in these closed areas to hunt Canada geese on land they own or farm in the closed area.

b. *Criteria.*

(1) Landowners and tenants who own or farm land in the closed areas will be permitted to hunt Canada geese in the closed areas for three years. This experimental hunting opportunity will be evaluated by the landowners and the DNR following each season, at which time changes may be made.

(2) Landowners and those individuals named on the permit according to the criteria specified in paragraph (9) of this subrule will be permitted to hunt in the closed area. Tenants may obtain a permit instead of the landowner if the landowner transfers this privilege to the tenant. Landowners may choose, at their discretion, to include the tenant and those individuals of the tenant's family specified in paragraph (9) of this subrule on their permit. Landowners may assign the permit for their land to any landowner or tenant who owns or farms at least eight acres inside the closed area. Assigned permits must be signed by both the permittee and the landowner assigning the permit.

(3) Landowners must hold title to, or tenants must farm by a rent/share/lease arrangement, at least eight acres inside the closed area to qualify for a permit.

(4) No more than one permit will be issued to corporations, estates, or other legal associations that jointly own land in the closed area. No individual may obtain more than two permits nor may an individual be named as a participant on more than two permits.

(5) Persons holding a permit can hunt with those individuals named on their permit as specified in paragraph (9) of this subrule on any property they own (or rent/share/lease in the case of tenants) in the closed area provided their activity complies with all other regulations governing hunting. Nothing herein shall permit the hunting of Canada geese on public property within the closed area.

(6) Persons hunting under this permit must adhere to all municipal, county, state and federal regulations that are applicable to hunting and specifically applicable to Canada goose hunting including, but not limited to: daily limits, possession limits, shooting hours, methods of take, and transportation. Hunting as authorized by this rule shall not be used to stir or rally waterfowl.

(7) Hunting within the closed area will be allowed through October 31.

(8) Permit holders will be allowed to take eight Canada geese per year in the closed area.

(9) Permits will be issued only to individual landowners or tenants; however, permit holders must specify, when requesting a permit, the names of all other individuals qualified to hunt on the permit. Individuals qualified to hunt on the permit shall include the landowners or tenants and their spouses, domestic partners, parents, grandparents, children, children's spouses, grandchildren, siblings and siblings' spouses only.

c. *Procedures.*

(1) Permits can be obtained from the local conservation officer at the wildlife unit headquarters within the closed area at announced times, but no later than 48 hours before the first Canada goose season opens. The permit will be issued to an individual landowner or tenant and must list the names of all individuals that may hunt with the permittee. The permit will also contain a description of the property covered by the permit. The permit must be carried by a member of the hunting party whose

name is listed on the permit. Conservation officers will keep a record of permittees and locations of properties that are covered by permits.

(2) Eight consecutively numbered tags will be issued with each permit. Geese will be tagged around the leg immediately upon being reduced to possession and will remain tagged until delivered to the person's abode. Within one week of the close of hunting within the closed area during at least the first three years the hunt is permitted, unused tags must be turned in at the wildlife unit headquarters within the closed area or the permittee must report the number of geese killed. Failure to turn in unused tags or report the number of geese killed within the specified time period may result in the permittee's forfeiting the opportunity to hunt within the closed area the following year.

(3) No one may attempt to take Canada geese under this permit unless the person possesses an unused tag for the current year.

(4) No landowner or tenant shall be responsible or liable for violations committed by other individuals listed on the permit issued to the landowner or tenant.

91.5(2) Reserved.

[**ARC 8106B**, IAB 9/9/09, effective 8/18/09; **ARC 0307C**, IAB 9/5/12, effective 8/15/12]

571—91.6(481A) Youth waterfowl hunt. A special youth waterfowl hunt will be held on September 16 and 17 in the north duck hunting zone, September 23 and 24 in the south duck hunting zone, and September 30 and October 1 in the Missouri River duck hunting zone. Youth hunters must be residents of Iowa as defined in Iowa Code section 483A.1A and less than 16 years old. Each youth hunter must be accompanied by an adult 18 years old or older. The youth hunter does not need to have a hunting license or stamps. The adult must have a valid hunting license and habitat stamp if normally required to have them to hunt and a state waterfowl stamp. Only the youth hunter may shoot ducks, geese and coots. The adult may hunt for any other game birds for which the season is open. The daily bag and possession limits are the same as for the regular waterfowl season, as defined in rule 571—91.1(481A). All other hunting regulations in effect for the regular waterfowl season apply to the youth hunt.

[**ARC 8106B**, IAB 9/9/09, effective 8/18/09; **ARC 9055B**, IAB 9/8/10, effective 8/16/10; **ARC 9720B**, IAB 9/7/11, effective 8/19/11; **ARC 0307C**, IAB 9/5/12, effective 8/15/12; **ARC 1003C**, IAB 9/4/13, effective 8/15/13; **ARC 1614C**, IAB 9/3/14, effective 8/15/14; **ARC 2129C**, IAB 9/2/15, effective 8/13/15; **ARC 2526C**, IAB 5/11/16, effective 6/15/16; **ARC 3060C**, IAB 5/10/17, effective 6/14/17]

These rules are intended to implement Iowa Code sections 481A.38, 481A.39, and 481A.48.

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CHAPTER 97
COMMON SNIPE, VIRGINIA RAIL AND SORA, WOODCOCK, RUFFED GROUSE, AND DOVE HUNTING SEASONS

[Prior to 12/31/86, Conservation Commission[290] Ch 109]

571—97.1(481A) Common snipe season. Open season for hunting common snipe shall be from the first Saturday in September through November 30. Shooting hours shall be from one-half hour before sunrise to sunset each day. Daily bag limit 8 birds; possession limit 24 birds. Entire state open.
[**ARC 2087C**, IAB 8/5/15, effective 9/9/15]

571—97.2(481A) Virginia rail and sora season. Open season for hunting Virginia rail and sora shall be from the first Saturday in September and continue for 70 consecutive days. Shooting hours shall be from one-half hour before sunrise to sunset each day. Daily bag limit 12 and possession limit 36 in aggregate of both species. Entire state open.
[**ARC 2087C**, IAB 8/5/15, effective 9/9/15]

571—97.3(481A) Woodcock season. Open season for hunting woodcock shall be from the first Saturday in October and continue for 45 consecutive days. Shooting hours shall be from sunrise to sunset each day. Daily bag limit 3; possession limit 9. Entire state open.
[**ARC 2087C**, IAB 8/5/15, effective 9/9/15]

571—97.4(481A) Ruffed grouse season. Open season for hunting ruffed grouse shall be from the first Saturday in October through January 31 of the succeeding year. Shooting hours shall be from sunrise to sunset each day. Daily bag limit 3; possession limit 6.

97.4(1) *Portion of the state open to hunting.* The area open to hunting shall be that portion of the state lying north and east of a line described as follows: beginning at Sabula, Iowa; thence west along State Highway 64 to U.S. Highway 151; thence west along U.S. Highway 151 to State Highway 13; thence north along State Highway 13 to U.S. Highway 20; thence west along U.S. Highway 20 to U.S. Highway 63; thence north along U.S. Highway 63 to the state line.

97.4(2) Reserved.

571—97.5 Reserved.

571—97.6(481A) Dove season. Open season for hunting mourning doves and Eurasian collared-doves shall begin on September 1 and continue for 90 consecutive days. Shooting hours shall be from one-half hour before sunrise to sunset each day. Daily bag limit is 15; possession limit is 45. The entire state is open.
[**ARC 9674B**, IAB 8/10/11, effective 8/17/11 (See Delay note at end of chapter) (See Rescission note at end of chapter); **ARC 2087C**, IAB 8/5/15, effective 9/9/15; **ARC 3060C**, IAB 5/10/17, effective 6/14/17]

These rules are intended to implement Iowa Code sections 481A.38, 481A.39 and 481A.48.

These rules are based on the best biological data available as determined by research conducted by the department of natural resources.

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[1] August 17, 2011, effective date of the last sentence of 571—97.6(481A) delayed until adjournment of the 2012 Session of the General Assembly by the Administrative Rules Review Committee at its meeting held August 16, 2011.

[2] Rule 571—97.6(481A), last sentence, (ARC 9674B, Item 2, IAB 8/10/11) rescinded by Executive Order Number 77 on 5/11/12. Rescinded sentence removed IAC Supplement 5/30/12.

CHAPTER 102
FALCONRY REGULATIONS FOR HUNTING GAME
[Prior to 12/31/86, Conservation Commission[290] Ch 100]

571—102.1(481A) General. Game may be taken annually, by permitted falconers only, subject to the following:

102.1(1) *Definitions.* For the purposes of this rule, the following definitions are used:

"Falconer" means any person permitted under the provisions of 571—Chapter 101, Iowa Administrative Code, who pursues the sport of falconry.

"Falconry" means the sport of taking game by means of a raptor.

"Raptor" means any of the following wild species: American kestrel, Cooper's hawk, Ferruginous hawk, Goshawk, Great horned owl, Gyrfalcon, Harris' hawk, Merlin, Prairie falcon, Red-tailed hawk, Rough-legged hawk, Sharp-shinned hawk and any captive-bred species used for falconry.

102.1(2) *Licenses and permits.* In addition to the falconry permit, a falconer must have all other licenses, stamps, and permits required by law. A falconry observer is not required to be licensed for hunting, but an observer shall not assist in the hunt.

102.1(3) *Other requirements.* Except for the provisions of rule 571—102.2(481A), any person taking game by falconry must comply with all other statutes and rules governing this activity.
[**ARC 9188B**, IAB 11/3/10, effective 12/8/10]

571—102.2(481A) Migratory bird regulations. Seasons and limits for taking migratory birds by means of falconry shall be as follows:

102.2(1) *Ducks and coots.* The season for taking ducks and coots by means of falconry may vary among duck hunting zones. Falconry seasons for ducks and coots shall be open whenever the conventional (gun) duck and coot hunting season is open in each zone, as described in rules 571—91.1(481A) and 571—91.2(481A), and shall also be open beginning the first Saturday in January in each zone and remain open until the combined total of the conventional hunting season days plus falconry hunting season days reaches 107 for the zone or February 28, whichever occurs first.

102.2(2) *Geese.* The season for taking geese by means of falconry may vary among goose hunting zones. Falconry seasons for white-fronted geese and light geese (white and blue-phase snow geese and Ross' geese) shall begin each year on the first day of the conventional (gun) hunting season for these geese in each zone, as described in rule 571—91.3(481A). Falconry seasons for Canada geese and brant shall be open concurrently with the conventional (gun) hunting season for these geese.

102.2(3) *Rails, snipe and woodcock.* The seasons for taking rails, snipe and woodcock by means of falconry shall begin each year on the first day of the conventional (gun) hunting seasons for these species, as described in rules 571—97.1(481A), 571—97.2(481A), and 571—97.3(481A), and continue for 107 consecutive days. The entire state is open for these species.

102.2(4) *Hawking hours and limits.* Hawking hours for migratory game birds are one-half hour before sunrise to sunset. The daily bag limit shall include no more than three migratory game birds, singly or in aggregate. The possession limit is three times the daily bag limit. There are no hawking hour restrictions for nonmigratory game during the legal season.
[**ARC 9188B**, IAB 11/3/10, effective 12/8/10; **ARC 3060C**, IAB 5/10/17, effective 6/14/17]

571—102.3(481A) Small game. Seasons and limits for the taking of pheasant (both sexes), quail, gray partridge, ruffed grouse, squirrels, cottontail rabbit and jackrabbit, by falconry only, shall be as follows:

102.3(1) *Seasons.*

a. Pheasant (both sexes), quail, gray partridge, ruffed grouse, and jackrabbit. The season for the taking of pheasant, quail, gray partridge, ruffed grouse, and jackrabbit shall be from October 1 of each year through March 31 of the following year.

b. Cottontail rabbit and squirrel. The season for the taking of cottontail rabbits and squirrels shall be from September 1 of each year through March 31 of the following year.

102.3(2) *Limits.*

a. *Pheasants (both sexes) and jackrabbit.* The daily limit shall be two pheasants, no more than one of which may be a hen, and one jackrabbit; possession limit shall be four pheasants and two jackrabbits.

b. *Quail, gray partridge, ruffed grouse, squirrels and cottontail rabbit.* The daily limit shall be two quail, two gray partridge, two ruffed grouse, four cottontail rabbits and four squirrels; possession limit shall be four quail, four gray partridge, four ruffed grouse, eight cottontail rabbits, and eight squirrels.

571—102.4(481A) Means and methods of take. No falconer or observer may carry a firearm while in the field with a raptor or in the act of falconry.
[**ARC 9188B**, IAB 11/3/10, effective 12/8/10]

571—102.5(481A) Exclusions. Nothing in this chapter shall pertain to the taking of game under 571—Chapters 91, 96, 97 and 107, Iowa Administrative Code.

These rules are intended to implement Iowa Code sections 481A.38, 481A.39 and 481A.48.

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HOMELAND SECURITY AND EMERGENCY MANAGEMENT DEPARTMENT[605]

[Prior to 12/23/92, see Disaster Services Division[607]; renamed Emergency Management Division by 1992 Iowa Acts, chapter 1139, section 21]
[Prior to 3/31/04, see Emergency Management Division[605]; renamed Homeland Security and Emergency Management Division by 2003 Iowa Acts, chapter 179, section 157]
[Prior to 10/16/13, see Homeland Security and Emergency Management Division[605]; renamed Homeland Security and Emergency Management Department by 2013 Iowa Acts, House File 307, section 2]

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605—1.1(29C) Description. The homeland security and emergency management department is created in Iowa Code chapter 29C. The homeland security and emergency management department shall be under the management of a director appointed by the governor. The director shall be vested with the authority to administer homeland security and emergency management affairs in this state and shall be responsible for preparing and executing the homeland security and emergency management programs of this state subject to the direction of the governor. The director, upon the direction of the governor, shall: prepare a comprehensive plan and emergency management program for homeland security, disaster preparedness, response, mitigation, recovery, emergency operation, and emergency resource management of this state; make such studies and surveys of the industries, resources and facilities in this state as may be necessary to ascertain the capabilities of the state for disaster recovery, disaster planning and operations, and emergency resource management, and to plan for the most efficient emergency use thereof; provide technical assistance to any local emergency management commission or joint commission requiring such assistance in the development of an emergency management program; and implement planning and training for emergency response teams as mandated by the federal government under the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 as amended by the Superfund Amendments and Reauthorization Act of 1986 42 U.S.C. § 9601 et seq. The director, with the approval of the governor, may employ a deputy administrator and such technical, clerical, stenographic and other personnel and make such expenditures within the appropriation or from other funds made available to the department for purposes of homeland security and emergency management, as may be necessary to administer the purposes of Iowa Code chapters 29C, 30, and 34A.
[**ARC 8932B**, IAB 7/14/10, effective 8/18/10; **ARC 2292C**, IAB 12/9/15, effective 1/13/16]

605—1.2(29C) Definitions. The following definitions are applicable to the homeland security and emergency management department:

"Comprehensive countywide emergency operations plan" means documents which describe the actions to be taken to lessen the effects of, prepare for, respond to and recover from a disaster by county and city governments, quasi-government agencies, and private organizations which have emergency operations responsibility. The plan is multihazard in scope (covers all hazards for the county) and provides for a coordinated effort. It references authority, assigns functional responsibilities, provides for direction and control, and the effective use of resources.

"Department" means the homeland security and emergency management department.

"Director" means the director of the homeland security and emergency management department.

"Disaster" means human-caused, technological or natural occurrences, such as fire, flood, drought, earthquake, tornado, windstorm, hazardous substance or nuclear power plant accident or incident, which threaten the public peace, health and safety of the people or which damage or destroy public or private property. The term includes terrorism, enemy attack, sabotage, or other hostile action from without the state.

"Emergency" means a sudden, generally unexpected occurrence or set of circumstances demanding immediate action to protect life or property. Such actions are normally handled in a routine manner by law enforcement, fire protection, public works, utilities, and emergency medical services.

"Emergency management" means lessening the effects of, preparations for, operations during, and recovery from natural, technological or human-caused disasters. These actions are broad in scope and include, but are not limited to: disaster plans, mitigation, preparedness, response, warning, emergency operations, training, exercising, research, rehabilitation, and recovery activities.

"Emergency management performance grant program" means a program by which federal funds are utilized to pay no more than 50 percent of the salaries, benefits, travel, and office expenses incurred in the administration of the state and local emergency management program.

"Homeland security" means the detection, prevention, preemption, and deterrence of and protection from attacks targeted at state territory, population, and infrastructure.

"Joint commissions" means two or more local emergency management commissions acting as a joint commission for the coordination and administration of emergency management.

"Local commission" means the local emergency management commission.

"Mitigation" means any action taken to reduce or eliminate the long-term risk to human life and property from hazards. Examples of mitigation activities include building codes, land use management, floodplain management, building of protective structures such as flood walls, public education, research, risk mapping, safety codes, and statutes and ordinances.

"Preparedness" means any activity taken in advance of an emergency or disaster that improves emergency readiness posture and develops or expands operational capabilities. Examples of preparedness activities include, but are not limited to, continuity of government, emergency alert and warning systems, emergency communications, emergency operations centers, comprehensive countywide emergency operations plans, emergency public information materials, exercise of plans and systems, hazard analysis, mutual aid agreements, resource management, and the training and equipping of personnel.

"Recovery" means short-term activity to return vital life support systems to minimum operating standards and long-term activity designed to return the affected people and areas to their predisaster conditions. Examples of recovery activity are crisis counseling, damage assessment, debris clearance, decontamination, disaster insurance payments, disaster loans and grants, disaster unemployment assistance, public information, community outreach, temporary housing, and reconstruction.

"Response" means any action taken immediately before, during, or directly after an emergency or disaster occurs, which is intended to save lives, minimize injuries, lessen property and environmental damage and enhance the effectiveness of recovery. Examples of response activity include rendering of assistance by emergency responders, activation of the emergency operations center, emergency alert system activation, emergency instructions to the public, emergency plan implementation, public official alerting, evacuation, sheltering of victims, search and rescue, resource mobilization, and warning system activation.

[**ARC 8932B**, IAB 7/14/10, effective 8/18/10; **ARC 2292C**, IAB 12/9/15, effective 1/13/16]

605—1.3(29C) Facilitating business rapid response to state-declared disasters. The implementation of business rapid response to state-declared disasters is addressed in the rules of the Iowa secretary of state in 721—Chapter 12 and the Iowa department of revenue in 701—Chapter 242.

[**ARC 3056C**, IAB 5/10/17, effective 6/14/17]

605—1.4(29C) Disaster case management grant fund and program. The implementation of the disaster case management grant fund and program is addressed in the rules of the Iowa department of human services in 441—Chapter 58.

[**ARC 3056C**, IAB 5/10/17, effective 6/14/17]

605—1.5(29C) Disaster aid individual assistance grant fund. The implementation of the disaster aid individual assistance grant fund is addressed in the rules of the Iowa department of human services in 441—Chapter 58.

[**ARC 3056C**, IAB 5/10/17, effective 6/14/17]

These rules are intended to implement Iowa Code chapters 29C, 30 and 34A.

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CHAPTER 23
PLUMBING AND MECHANICAL SYSTEMS BOARD—LICENSEE PRACTICE

641—23.1(105) Definitions. For purposes of these rules, the following definitions shall apply:

"Board" means the plumbing and mechanical systems board as established pursuant to Iowa Code section 105.3.

"Contractor" means a person or entity that provides plumbing, mechanical, HVAC-refrigeration, or hydronic systems services on a contractual basis and who is paid a predetermined amount under that contract for rendering those services.

"Helper" means a person who performs general manual labor activities and who provides assistance to an apprentice, journeyperson, or master, while under the supervision of a journeyperson or master.

"Inactive license" means a license that is available for a plumbing, mechanical, HVAC-refrigeration, sheet metal, or hydronic professional who is not actively engaged in running a business or working in the business in the corresponding discipline at that license level. An inactive license must be renewed prior to its expiration date. An inactive license is not valid for practice until the license is reactivated by the board.

"Journeyperson" means an individual who possesses a valid and current journey level license issued by the board.

"Lapsed license" means a license that expired prior to June 30, 2017, and was not renewed within 60 days following its expiration date or a license that expired on or after June 30, 2017, and was not renewed by the following August 31. A lapsed license is no longer valid for practice.

"Licensee" means a person holding a license issued by the board, including an apprentice, journeyperson, or master license in the plumbing, mechanical, HVAC-refrigeration, sheet metal, or hydronics trades; a combined license; a special, restricted sublicense; or a medical gas certificate.

"Master" means an individual who possesses a valid and current master level license issued by the board.

"Master of record" means an individual possessing an active master license under Iowa Code chapter 105 who shall be responsible for the proper designing, installing, and repairing of plumbing, mechanical, HVAC-refrigeration, sheet metal, or hydronic systems and who is actively in charge of the plumbing, mechanical, HVAC-refrigeration, sheet metal, or hydronic work of a contractor.

This rule is intended to implement Iowa Code sections 105.10, 105.14, 105.16, 105.18, 105.19 and 105.20.

[**ARC 1218C**, IAB 12/11/13, effective 5/1/14; **ARC 3061C**, IAB 5/10/17, effective 6/14/17]

641—23.2(105) Duties of all licensees, specialty licensees, and certificate holders.

23.2(1) While conducting business or performing work covered under Iowa Code chapter 105, each licensee must keep a copy of the licensee's board-issued, wallet-sized licensing identification card issued under Iowa Code section 105.12(2) on the licensee's person or in an easily retrievable area at the work site.

23.2(2) Each licensee must maintain a residential or business address on record with the board. In the event the licensee's residential or business address changes, the licensee shall so notify the board.

23.2(3) Each licensee shall apply for and obtain all applicable permits prior to performing any work covered under Iowa Code chapter 105 as may be required by any law, ordinance, or regulation of this state, or a political subdivision therein.

23.2(4) A licensee shall present upon request a copy of the licensee's board-issued, wallet-sized license identification card issued under Iowa Code section 105.12(2).

23.2(5) A licensee possessing a lapsed license may not operate as a contractor or work in the plumbing, mechanical, HVAC-refrigeration, sheet metal, or hydronic disciplines or work as a medical gas system installer or work in a specialty license discipline until the license is reinstated and renewed.

23.2(6) Each licensee shall perform all Iowa Code chapter 105-covered work in conformity with the applicable professional code.

23.2(7) A licensee shall not perform any Iowa Code chapter 105-covered work for which the licensee does not possess the requisite license.

23.2(8) A licensee shall conform to the minimum standard of acceptable and prevailing practice and shall exercise the degree of workmanlike care which is ordinarily exercised by the average licensee in the applicable trade acting in the same or similar circumstances.

23.2(9) A licensee who utilizes the services of an unlicensed person as a helper shall be responsible for the work performed by the helper and shall ensure that such work conforms to the minimum standard of acceptable and prevailing practice.

This rule is intended to implement Iowa Code sections 105.10, 105.14, 105.16, 105.18 and 105.19.
[**ARC 1218C**, IAB 12/11/13, effective 5/1/14]

641—23.3(105) Contractor license. A contractor licensed under Iowa Code chapter 105 shall adhere to the following requirements, the violation of which may give rise to disciplinary action:

23.3(1) *Master license requirement.* A contractor shall not engage in the business of designing, installing, or repairing plumbing, mechanical, HVAC-refrigeration, or hydronic systems unless at all times the contractor holds or employs at least one person holding an active master license issued by the board for each discipline in which the contractor conducts business. Without prior board approval, a contractor shall not knowingly utilize a master licensee to meet this requirement if the master licensee is simultaneously associated with another contractor in that discipline.

a. Notwithstanding subrule 23.3(1), in the event a licensed master of record's employment with the contractor is terminated, or the master of record otherwise discontinues the master of record's relationship with the contractor, or the master of record's master license is lapsed, suspended, revoked, expired, or otherwise invalidated, the contractor may continue to provide plumbing, mechanical, HVAC-refrigeration, or hydronic systems services for a period of up to six months without identifying a new master of record.

b. To utilize the six-month grace period set forth in paragraph 23.3(1)*"a,"* a contractor must notify the board of the contractor's loss of the master of record within 30 days from the date the master of record is no longer associated with the contractor, absent exigent circumstances.

23.3(2) *Display of license.* A person holding a contractor license shall keep the current license certificate publicly displayed in the primary place in which the person practices.

23.3(3) *Surety bond.* A person or entity holding a contractor license must maintain during the licensing period a surety bond issued by an entity licensed to do business in Iowa in a minimum amount of $5,000. If a person operates the contractor business as a sole proprietorship, the person must personally obtain and maintain the surety bond. If a person operates the contractor business as an employee or owner of a legal entity, the legal entity must obtain and maintain the surety bond, and the surety bond must cover all plumbing or mechanical work performed by the legal entity. The surety bond required under this subrule must contain a provision that requires the issuing entity to provide the board ten days' written notice before the surety bond can be canceled.

23.3(4) *Public liability insurance.* A person or entity holding a contractor license must maintain during the licensing period public liability insurance issued by an entity licensed to do business in Iowa in a minimum amount of $500,000. If a person operates the contractor business as a sole proprietorship, the person must personally obtain and maintain the public liability insurance. If a person operates the contractor business as an employee or owner of a legal entity, the legal entity must obtain and maintain the public liability insurance, and the public liability insurance must cover all plumbing and mechanical work performed by the legal entity. The public liability insurance required under this subrule must contain a provision that requires the issuing entity to provide the board ten days' written notice before the public liability insurance can be canceled.

23.3(5) *Contractor registration with the labor commissioner.* Through June 30, 2017, a contractor must maintain registration as a contractor with the labor commissioner pursuant to Iowa Code chapter 91C. Effective July 1, 2017, a contractor must maintain such registration by providing the board with the necessary information.

23.3(6) *Permanent place of business.* A contractor must maintain a permanent place of business, the address of which must be provided to the board. If a contractor changes the permanent place of business, the contractor must provide the board the new address within 30 days of the change.

23.3(7) *Licensure requirement.* A contractor shall not knowingly allow an employee to perform work covered under Iowa Code chapter 105 without the applicable license.

23.3(8) *Supervision.* A contractor shall not knowingly allow an apprentice employed by the contractor to perform work covered under Iowa Code chapter 105 without supervision of the apprentice by a master or journeyperson who is also employed by the contractor and who is licensed in the discipline in which the apprentice is performing such work.

This rule is intended to implement Iowa Code sections 105.10, 105.14, 105.16, 105.18, 105.19 and 105.22.

[**ARC 1218C**, IAB 12/11/13, effective 5/1/14]

641—23.4(105) Master license. A master licensed under Iowa Code chapter 105 shall adhere to the following requirements, the violation of which may give rise to disciplinary action:

23.4(1) *Contractor relationship.* A master may only be a master of record for one contractor in any particular discipline at any one time, except that a contractor or a master may seek prior board approval to serve as the master of record for more than one contractor in a particular discipline. An individual who possesses master licenses in multiple disciplines may be a master of record for multiple contractors so long as the individual is only a master of record for one contractor in any particular discipline at one time.

23.4(2) *Contractor.* A master shall not knowingly perform work covered under Iowa Code chapter 105 for an unlicensed contractor.

23.4(3) *Supervision.* A master who superintends the design, installation, or repair of plumbing, mechanical, HVAC-refrigeration, or hydronic systems shall be available to supervise journeypersons or apprentices as needed and may only provide such supervision in the discipline or disciplines in which the master is licensed. A master shall not knowingly supervise unlicensed persons who perform work covered under Iowa Code chapter 105 for which a board-issued license is required.

23.4(4) *Master of record.* A master who serves as a master of record for a contractor and who disassociates from the contractor must notify the board and the contractor of the disassociation, if notice was not previously provided, within 30 days from the date of disassociation, absent exigent circumstances.

This rule is intended to implement Iowa Code section 105.22.

[**ARC 1218C**, IAB 12/11/13, effective 5/1/14]

641—23.5(105) Journeyperson license. A journeyperson licensed under Iowa Code chapter 105 shall adhere to the following requirements, the violation of which may give rise to disciplinary action:

23.5(1) *Working under supervision.* A journeyperson must work under the supervision of a master licensed in the discipline of the work being performed in the design, installation, and repair of plumbing, mechanical, HVAC-refrigeration, or hydronic systems.

23.5(2) *Contractor.* A journeyperson shall not knowingly perform work covered under Iowa Code chapter 105 for an unlicensed contractor.

23.5(3) *Supervision.* A journeyperson who superintends one or more apprentices may only provide such supervision in the discipline(s) in which the journeyperson is licensed and only while performing work for the same contractor licensed under Iowa Code chapter 105. A journeyperson shall not knowingly supervise unlicensed persons who perform work covered under Iowa Code chapter 105 for which a board-issued license is required.

This rule is intended to implement Iowa Code sections 105.10, 105.14, 105.16, 105.18 and 105.19.

[**ARC 1218C**, IAB 12/11/13, effective 5/1/14]

641—23.6(105) Apprentice license. An apprentice licensed under Iowa Code chapter 105 shall adhere to the following requirements, the violation of which may give rise to disciplinary action:

23.6(1) *Working under supervision.* An apprentice may only perform work covered under Iowa Code chapter 105 under the supervision of a master or journeyperson.

23.6(2) *Contractor.* An apprentice shall not knowingly perform work covered under Iowa Code chapter 105 for an unlicensed contractor.

23.6(3) *Dual licensure as an apprentice prohibited.* A licensee may not simultaneously possess both an active apprentice license and an active specialty license.

This rule is intended to implement Iowa Code section 105.22.

[**ARC 1218C**, IAB 12/11/13, effective 5/1/14; **ARC 3061C**, IAB 5/10/17, effective 6/14/17]

641—23.7(105) Specialty licenses and certifications.

23.7(1) *Medical gas certification.*

a. A person who possesses a medical gas certification and who performs medical gas brazing must maintain the person's brazing continuity.

b. A person who possesses a medical gas certification must maintain the person's valid certification issued from the National Inspection Testing Certification (NITC) Corporation or an equivalent authority approved by the board.

23.7(2) *Hearth systems specialty license.*

a. A person who possesses a hearth systems specialty license must maintain the person's valid certification issued from the National Fireplace Institute or equivalent authority approved by the board.

b. A hearth systems specialty license allows a licensee to perform work in the installation of gas burning and solid fuel appliances that offer a decorative view of the flames, from the connector pipe to the shutoff valve located within three feet of the appliance. A hearth systems specialty license further allows for work in the venting systems associated with a hearth appliance, log lighters, gas log sets, fireplace inserts, and freestanding stoves. A hearth systems specialty license does not allow a licensee to install a shutoff valve or perform any other mechanical or HVAC-refrigeration work.

c. A person possessing a hearth systems specialty license shall not perform Iowa Code chapter 105-covered work beyond the limited scope of the person's specialty license, and shall not perform work within the limited scope of the person's specialty license unless the person can conform to the minimum standard of acceptable and prevailing practice of a licensee performing such work.

23.7(3) *Service technician HVAC specialty license.*

a. A licensee who holds a service technician HVAC specialty license by demonstrating the licensee possesses a valid certification from North American Technical Excellence, Inc. or an equivalent authority approved by the board must maintain valid certification from North American Technical Excellence, Inc. or an equivalent authority approved by the board.

b. A service technician HVAC specialty license allows a licensee to perform work from the appliance shutoff valve to the appliance and any part and component of the appliance, including the disconnection and reconnection of the existing appliance to the gas piping and the installation of a shutoff valve no more than three feet from the appliance. A service technician HVAC specialty license does not allow a licensee to perform any other mechanical or HVAC-refrigeration work.

c. A person possessing a service technician HVAC specialty license shall not perform Iowa Code chapter 105-covered work beyond the limited scope of the person's specialty license, and shall not perform work within the limited scope of the person's specialty license unless the person can conform to the minimum standard of acceptable and prevailing practice of a licensee performing such work.

23.7(4) *Disconnect/reconnect plumbing technician specialty license.*

a. A disconnect/reconnect plumbing technician specialty license allows a licensee to perform work from the appliance shutoff valve or the fixture shutoff valve to the appliance or fixture and any part or component of the appliance or fixture, including the disconnection and reconnection of the existing appliance or fixture to the water or sewer piping and the installation of a shutoff valve no more than three feet from the appliance or fixture. A disconnect/reconnect plumbing technician specialty license does not allow a licensee to perform any other plumbing work.

b. A person possessing a disconnect/reconnect plumbing technician specialty license shall not perform Iowa Code chapter 105-covered work beyond the limited scope of the person's specialty license,

and shall not perform work within the limited scope of the person's specialty license unless the person can conform to the minimum standard of acceptable and prevailing practice of a licensee performing such work.

23.7(5) *Private school or college routine maintenance specialty license.*

a. A private school or college routine maintenance specialty license allows a licensee to perform routine maintenance within the scope of the licensee's employment with a private school or college. For purposes of this subrule, "routine maintenance" shall mean the maintenance, repair, or replacement of existing fixtures or parts of plumbing, mechanical, HVAC-refrigeration, sheet metal, or hydronic systems in which no changes in original design are made. Fixtures or parts do not include smoke and fire dampers or water, gas, or steam piping permanent repairs except for traps and strainers. Routine maintenance shall include emergency repairs. Routine maintenance does not include the replacement of furnaces, boilers, cooling appliances, or water heaters more than 100 gallons in size.

b. A person possessing a private school or college routine maintenance specialty license shall not perform Iowa Code chapter 105-covered work beyond the limited scope of the person's specialty license, and shall not perform work within the limited scope of the person's specialty license unless the person can conform to the minimum standard of acceptable and prevailing practice of a licensee performing such work.

23.7(6) *Dual licensure as an apprentice prohibited.* A licensee may not simultaneously possess both an active apprentice license and an active specialty license.

This rule is intended to implement Iowa Code section 105.22.

[**ARC 1218C**, IAB 12/11/13, effective 5/1/14; **ARC 3061C**, IAB 5/10/17, effective 6/14/17]

641—23.8(105) Inactive license.

23.8(1) A person possessing an inactive license under 641—subrule 29.2(6) shall not perform any plumbing, mechanical, HVAC-refrigeration, sheet metal, or hydronic work for which licensure is required so long as the person's license is held in inactive status.

23.8(2) A person possessing an active journeyperson/inactive master license under 641—subrule 29.2(5) shall not perform any plumbing, mechanical, HVAC-refrigeration, or hydronic work for which a master license is required so long as the person's master license is held in inactive status.

23.8(3) *Inactive specialty license.*

a. A person possessing an active specialty license under rule 641—23.7(105) must submit a written request to place the specialty license on inactive status in order to obtain an active apprentice license. The licensee must acknowledge that the licensee is unable to perform any work covered under Iowa Code chapter 105 outside of the apprenticeship program.

b. Notwithstanding 641—subrule 28.1(3), a person possessing both an inactive specialty license and an active apprentice license is not required to pay a renewal fee for the inactive specialty license so long as the person remains actively licensed as an apprentice.

c. Notwithstanding 641—subrule 30.2(2), a person possessing an inactive specialty license and an active apprentice license is not required to obtain any continuing education hours for renewal so long as the person remains actively licensed as an apprentice.

d. A person possessing both an inactive specialty license and an active apprentice license may surrender the apprentice license and reactivate the specialty license upon written request and payment of the fee for an active specialty license in the amount specified in 641—Chapter 28.

This rule is intended to implement Iowa Code sections 105.20 and 105.22.

[**ARC 1218C**, IAB 12/11/13, effective 5/1/14; **ARC 3061C**, IAB 5/10/17, effective 6/14/17]

[Filed ARC 1218C (Notice ARC 0937C, IAB 8/7/13), IAB 12/11/13, effective 5/1/14]

[Filed ARC 3061C (Notice ARC 2903C, IAB 1/18/17), IAB 5/10/17, effective 6/14/17]

CHAPTER 25
STATE PLUMBING CODE

[Prior to 7/29/87, see Health Department[470] Ch 25]

641—25.1(105) Adoption. Sections 101 and 102 and Chapters 2 to 17 of the Uniform Plumbing Code, 2015 Edition, as published by the International Association of Plumbing and Mechanical Officials, 4755 E. Philadelphia Street, Ontario, California 91761-2816, are hereby adopted by reference with amendments as the state plumbing code authorized by Iowa Code section 105.4. Portions of this chapter reproduce excerpts from the 2015 International Plumbing Code; Copyright 2014; Washington, D.C.: International Code Council. Such excerpts are reproduced with permission, all rights reserved. www.ICCSAFE.org

[**ARC 8860B**, IAB 6/16/10, effective 7/21/10; **ARC 1089C**, IAB 10/16/13, effective 11/20/13; **ARC 2474C**, IAB 3/30/16, effective 6/1/16; **ARC 3062C**, IAB 5/10/17, effective 6/14/17]

641—25.2(105) Applicability. The provisions of this code are applicable to the plumbing in buildings or on premises in Iowa.

[**ARC 8860B**, IAB 6/16/10, effective 7/21/10]

641—25.3(105) Fuel gas piping. Fuel gas piping shall comply with the requirements of Chapter 12 of the Uniform Plumbing Code, 2015 Edition, unless the provisions conflict with 661—Chapter 226, Liquefied Petroleum Gas, Iowa Administrative Code. Where Chapter 12 conflicts with 661—Chapter 226, the provisions of 661—Chapter 226 shall be followed.

[**ARC 8860B**, IAB 6/16/10, effective 7/21/10; **ARC 1089C**, IAB 10/16/13, effective 11/20/13; **ARC 2474C**, IAB 3/30/16, effective 6/1/16]

641—25.4(105) Amendments to Uniform Plumbing Code. The Uniform Plumbing Code (UPC), as adopted by reference in rule 641—25.1(105), shall be amended as follows:

25.4(1) Rescinded IAB 5/10/17, effective 6/14/17.

25.4(2) The following amendments shall apply to UPC Chapter 3:

a. Subsection 301.5.1 Permit Application. Delete the subsection.

b. Subsection 314.4.1 Installation of Thermoplastic Pipe and Fittings. Trench width for thermoplastic pipe shall be limited to six times the outside diameter of the piping at the base. Thermoplastic piping shall be bedded in not less than 4 inches (102 mm) of aggregate bedding material supporting the pipe. Initial backfill shall encompass the pipe. Aggregate material shall be three-eighths (3/8) inch p-gravel or 1-inch clean class one bedding.

25.4(3) The following amendments shall apply to UPC Chapter 4:

a. Section 407.3 Limitation of Hot Water Temperature for Public Lavatories. Modify the section by adding the following sentence to the end of the section: "These devices shall be installed at or as close as possible to the point of use."

b. Section 408.4 Waste Outlet. Modify the section by adding the following exception to the end of the section: "Exception: In a residential dwelling unit where a 2-inch waste pipe is not readily available and approval of the Authority Having Jurisdiction has been granted, the waste outlet, fixture tailpiece, trap and trap arm may be 1½ inch when an existing tub is being replaced by a shower sized per Section 408.6(2). This exception only applies where one shower head rated at 2.5 gpm is installed."

c. Section 409.4 Limitation of Hot Water in Bathtubs and Whirlpool Bathtubs. Modify the section by adding the following sentence to the end of the section: "These devices shall be installed at or as close as possible to the point of use."

d. Section 410.3 Limitation of Water Temperature in Bidets. Modify the section by adding the following sentence to the end of the section: "These devices shall be installed at or as close as possible to the point of use."

e. Section 416.5 Drain. Modify the section by deleting the last sentence, which states: "Where a drain is provided, the discharge shall be in accordance with Section 811.0."

f. Section 418.3 Location of Floor Drains. Modify the section by adding the following to the end of the section: "(5) Rooms equipped with a water heater."

g. Section 422.1 Fixture Count. Modify the section by deleting the first paragraph and inserting the following in lieu thereof: "Plumbing fixtures shall be provided in each building, for the type of building occupancy, and in the minimum number shown in Table 403.1 of the International Plumbing Code, reprinted here as Table 422.1. The design occupant load and occupancy classification shall be determined in accordance with Section 1004 of the 2015 International Building Code. Required public facilities shall be designated by a legible sign for each sex. Signs shall be readily visible and located near the entrance to each toilet facility."

h. Subsection 422.1.1 Family or Assisted-Use Toilet and Bathing Facilities. Modify the subsection by adding the following sentence to the end of the subsection: "Required family or assisted-use fixtures are permitted to be included in the number of required fixtures for either the male or female occupants in assembly and mercantile occupancies."

i. Table 422.1 Minimum Plumbing Facilities. Delete the table and insert the following table in lieu thereof:

TABLE 422.1 MINIMUM NUMBER OF REQUIRED PLUMBING FIXTURES[a]
(Reprinted, with permission,* from the 2015 International Plumbing Code, excerpt from IPC Table 403.1)

NO.	CLASSIFICATION	OCCUPANCY	DESCRIPTION	WATER CLOSETS (Urinals, see Sections 411.0 and 412.0)		LAVATORIES		BATHTUBS/ SHOWERS	DRINKING FOUNTAIN (See Section 415.0)	OTHER
				MALE	FEMALE	MALE	FEMALE			
1	Assembly	A-1[d]	Theaters and other buildings for the performing arts and motion pictures	1 per 125	1 per 65	1 per 200		—	1 per 500	1 service sink
		A-2[d]	Nightclubs, bars, taverns, dance halls and buildings for similar purposes	1 per 40	1 per 40	1 per 75		—	1 per 500	1 service sink
			Restaurants, banquet halls and food courts	1 per 75	1 per 75	1 per 200		—	1 per 500	1 service sink
		A-3[d]	Auditoriums without permanent seating, art galleries, exhibition halls, museums, lecture halls, libraries, arcades and gymnasiums	1 per 125	1 per 65	1 per 200		—	1 per 500	1 service sink
			Passenger terminals and transportation facilities	1 per 500	1 per 500	1 per 750		—	1 per 1,000	1 service sink
			Places of worship and other religious services	1 per 150	1 per 75	1 per 200		—	1 per 1,000	1 service sink
		A-4	Coliseums, arenas, skating rinks, pools and tennis courts for indoor sporting events and activities	1 per 75 for the first 1,500 and 1 per 120 for the remainder exceeding 1,500	1 per 40 for the first 1,520 and 1 per 60 for the remainder exceeding 1,520	1 per 200	1 per 150	—	1 per 1,000	1 service sink

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NO.	CLASSIFICATION	OCCUPANCY	DESCRIPTION	WATER CLOSETS (Urinals, see Sections 411.0 and 412.0)		LAVATORIES		BATHTUBS/ SHOWERS	DRINKING FOUNTAIN (See Section 415.0)	OTHER
				MALE	FEMALE	MALE	FEMALE			
1	Assembly (cont'd)	A-5	Stadiums, amusement parks, bleachers and grandstands for outdoor sporting events and activities	1 per 75 for the first 1,500 and 1 per 120 for the remainder exceeding 1,500	1 per 40 for the first 1,520 and 1 per 60 for the remainder exceeding 1,520	1 per 200	1 per 150	—	1 per 1,000	1 service sink
2	Business	B	Buildings for the transaction of business, professional services, other services involving merchandise, office buildings, banks, light industrial and similar uses	1 per 25 for the first 50 and 1 per 50 for the remainder exceeding 50		1 per 40 for the first 80 and 1 per 80 for the remainder exceeding 80		—	1 per 100	1 service sink[e]
3	Educational	E	Educational facilities	1 per 50		1 per 50		—	1 per 100	1 service sink
4	Factory and Industrial	F-1 and F-2	Structures in which occupants are engaged in work fabricating, assembly or processing of products or materials	1 per 100		1 per 100		(See Section 416)	1 per 400	1 service sink
5	Institutional	I-1	Residential care	1 per 10		1 per 10		1 per 8	1 per 100	1 service sink
		I-2	Hospitals, ambulatory nursing home recipient	1 per room[c]		1 per room[c]		1 per 15	1 per 100	1 service sink per floor
			Employees, other than residential care[b]	1 per 25		1 per 35		—	1 per 100	—
			Visitors, other than residential care	1 per 75		1 per 100		—	1 per 500	—

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				MALE	FEMALE	MALE	FEMALE			
5	Institutional (cont'd)	I-3	Prisons[b]	1 per cell		1 per cell		1 per 15	1 per 100	1 service sink
			Reformatories, detention centers, and correctional centers[b]	1 per 15		1 per 15		1 per 15	1 per 100	1 service sink
			Employees[b]	1 per 25		1 per 35		—	1 per 100	—
		I-4	Adult day care and child care	1 per 15		1 per 15		1	1 per 100	1 service sink
6	Mercantile	M	Retail stores, service stations, shops, salesrooms, markets and shopping centers	1 per 500		1 per 750		—	1 per 1,000	1 service sink[e]
7	Residential	R-1	Hotels, motels, boarding houses (transient)	1 per sleeping unit		1 per sleeping unit		1 per sleeping unit	—	1 service sink
		R-2	Dormitories, fraternities, sororities and boarding houses (not transient)	1 per 10		1 per 10		1 per 8	1 per 100	1 service sink
		R-2	Apartment house	1 per dwelling unit		1 per dwelling unit		1 per dwelling unit	—	1 kitchen sink per dwelling unit; 1 automatic clothes washer connection per 20 dwelling units

TABLE 422.1 MINIMUM NUMBER OF REQUIRED PLUMBING FIXTURES[a]
(Reprinted, with permission,* from the 2015 International Plumbing Code, excerpt from IPC Table 403.1)

NO.	CLASSIFICATION	OCCUPANCY	DESCRIPTION	WATER CLOSETS (Urinals, see Sections 411.0 and 412.0)		LAVATORIES		BATHTUBS/ SHOWERS	DRINKING FOUNTAIN (See Section 415.0)	OTHER
				MALE	FEMALE	MALE	FEMALE			
7	Residential (cont'd)	R-3	Congregate living facilities with 16 or fewer persons	1 per 10		1 per 10		1 per 8	1 per 100	1 service sink
		R-3	One- and two-family dwellings and lodging houses with five or fewer guestrooms	1 per dwelling unit		1 per dwelling unit		1 per dwelling unit	—	1 kitchen sink per dwelling unit; 1 automatic clothes washer connection per dwelling unit
		R-4	Congregate living facilities with 16 or fewer persons	1 per 10		1 per 10		1 per 8	1 per 100	1 service sink
8	Storage	S-1 and S-2	Structures for the storage of goods, warehouses, storehouses and freight depots. Low and Moderate Hazard.	1 per 100		1 per 100		See Section 416	1 per 1,000	1 service sink

[a] The fixtures shown are based on one fixture being the minimum required for the number of persons indicated or any fraction of the number of persons indicated. The number of occupants shall be determined by the International Building Code.

[b] Toilet facilities for employees shall be separate from facilities for inmates or care recipients.

[c] A single-occupant toilet room with one water closet and one lavatory serving not more than two adjacent patient sleeping units shall be permitted provided that each patient sleeping unit has direct access to the toilet room and provision for privacy for the toilet room user is provided.

[d] The occupant load for seasonal outdoor seating and entertainment areas shall be included when determining the minimum number of facilities required.

[e] For business and mercantile occupancies with an occupant load of 15 or fewer, service sinks shall not be required.

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j. Subsection 422.2.1 Family or Assisted-Use Toilet and Bathing Facilities. Modify the subsection by adding the following sentence to the end of the subsection: "Required family or assisted-use fixtures are permitted to be included in the number of required fixtures for either the male or female occupants in assembly and mercantile occupancies."

k. Insert the following text at the end of Chapter 4:

"422.6 Pay Facilities. Where pay facilities are installed and permissible under Iowa law, such facilities shall be in excess of the required minimum facilities. Required facilities shall be free of charge.

"422.7 Substitution for Water Closets. In each bathroom or toilet room, urinals shall not be substituted for more than 67 percent of the required water closets in assembly and educational occupancies. Urinals shall not be substituted for more than 50 percent of the required water closets in all other occupancies. (Reprinted from the 2015 International Plumbing Code section 419.2)"

25.4(4) The following amendment shall apply to UPC Chapter 5:

Sections 503.0 through 503.2 Inspection. Delete the sections.

25.4(5) The following amendments shall apply to UPC Chapter 6:

a. Section 603.4.8 Drain Lines. Modify the section by adding the following language to the end of the section: "or in accordance with the manufacturer's drain-sizing chart for installation."

b. Section 609.11 Pipe Insulation. Delete sections 609.11 through 609.11.2 and insert the following in lieu thereof:

Section 609.11 Pipe Insulation. Insulation of domestic hot water piping shall be in accordance with the applicable energy conservation code.

c. Section 611.4 Sizing of Residential Softeners. Modify the section by adding the following to the end of the last sentence in the section: "or as specified in the manufacturer's installation instructions."

d. Section 612 Residential Fire Sprinkler Systems. Delete sections 612.0 through 612.7.2.

25.4(6) The following amendment shall apply to UPC Chapter 7:

Section 710.1 Backflow Protection. Modify the section by adding the following sentences to the end of the section: "The requirement for the installation of a backwater valve shall apply only when determined necessary by the authority having jurisdiction based on local conditions. When a valve is required by the authority having jurisdiction, it shall be a manually operated gate valve or fullway ball valve. An automatic backwater valve may also be installed but is not required."

25.4(7) The following amendment shall apply to UPC Chapter 8:

Section 807.3 Domestic Dishwashing Machine. Modify the section by deleting the section and inserting the following language in lieu thereof: "No domestic dishwashing machine shall be directly connected to a drainage system or food waste disposer without the use of an approved dishwasher air gap fitting on the discharge side of the dishwashing machine, or by looping the discharge line of the dishwasher as high as possible near the flood level of the kitchen sink where the waste disposer is connected. Listed air gap fittings shall be installed with the flood level (FL) marking at or above the flood level of the sink or drainboard, whichever is higher."

25.4(8) The following amendment shall apply to UPC Chapter 9:

a. Section 906.7 Frost or Snow Closure. Modify the section by deleting "two (2) inches (50.8 mm)" in the first sentence and inserting "three (3) inches (76.2 mm)" in lieu thereof.

b. Section 908.2.2 Size. Delete the second sentence in this section and insert the following new sentence in lieu thereof: "The wet vent shall be not less than 2 inches (50 mm) in diameter for 6 drainage fixture units (dfu) or less, and not less than 3 inches (80 mm) in diameter for 7 dfu or more."

25.4(9) The following amendment shall apply to UPC Chapter 10:

a. Table 1002.2 Horizontal Lengths of Trap Arms. Delete the table and insert the following table in lieu thereof:

TABLE 1002.2
Horizontal Lengths of Trap Arms
(Except for Water Closets and Similar Features)[1,2]

Trap Arm Diameter (inches)	Distance Trap to Vent Minimum (inches)	Length Maximum (feet)
1¼	2½	5
1½	3	6
2	4	8
3	6	12
4	8	12
Exceeding 4	2 × Diameter	12

For SI units: 1 inch = 25.4 mm

Notes:

[1]Maintain ¼ inch per foot slope (20.8 mm/m).

[2]The developed length between the trap of a water closet or similar fixture (measured from the top of the closet flange to the inner edge of the vent) and its vent shall not exceed 6 feet (1829 mm).

b. Section 1014.1.3 Food Waste Disposers and Dishwashers. Modify the section by deleting the second sentence and inserting the following in lieu thereof: "Commercial food waste disposers shall discharge into the building's drainage system in accordance with the requirements of the Authority Having Jurisdiction."

25.4(10) The following amendments shall apply to UPC Chapter 12:

a. Sections 1203.0 through 1203.4 Inspection. Delete the sections.

b. Sections 1204.0 through 1204.3 Certificate of Inspection. Delete the sections.

c. Sections 1205.0 through 1205.2 Authority to Render Gas Service. Delete the sections.

d. Sections 1207.0 and 1207.1 Temporary Use of Gas. Delete the sections.

25.4(11) The following amendments shall apply to UPC Chapter 13:

a. Sections 1304.5 through 1304.5.3 Construction Documents. Delete the sections.

b. Section 1320.3 Report Items. Modify the section by deleting "Authority Having Jurisdiction" and inserting "responsible facility authority" in lieu thereof.

25.4(12) The following amendment shall apply to UPC Chapter 14:

Sections 1406.0 through 1406.4 Required Inspection. Delete the sections.

25.4(13) The following amendments shall apply to UPC Chapter 15:

a. Section 1501.3 Permit. Delete the section.

b. Section 1501.6 Operation and Maintenance Manual. Modify the section by deleting "required to have a permit in accordance with Section 1501.3" from the first sentence.

c. Subsection 1501.11.2.1 Visual System Inspection. Modify the subsection by deleting "by the Authority Having Jurisdiction and other authorities having jurisdiction" from the first sentence.

d. Subsection 1501.11.2.2 Cross-Connection Test. Modify the subsection by deleting "by the applicant in the presence of the Authority Having Jurisdiction and other authorities having jurisdiction" from the first sentence.

e. Subsection 1501.11.2.3 Discovery of Cross-Connection. Modify the subsection by deleting "in the presence of the Authority Having Jurisdiction."

f. Section 1503.2 Permit. Delete the section.

g. Section 1504.2 Plumbing Plan Submission. Delete the section.

h. Section 1504.5 Initial Cross-Connection Test. Modify the section by deleting "by the applicant in the presence of the Authority Having Jurisdiction and other authorities having jurisdiction," and by deleting the final sentence ("The test shall be ruled successful by the Authority Having Jurisdiction before final approval is granted.").

25.4(14) The following amendments shall apply to UPC Chapter 16:

a. Section 1602.2 Plumbing Plan Submission. Delete the section.

b. Section 1602.5 Initial Cross-Connection Test. Modify the section by deleting the second and third sentences ("Before the building is occupied or the system is activated, the installer shall perform the initial cross-connection test in the presence of the Authority Having Jurisdiction and other authorities having jurisdiction. The test shall be ruled successful by the Authority Having Jurisdiction before final approval is granted.").

c. Subsection 1602.11.2.1 Visual System Inspection. Modify the subsection by deleting "by the Authority Having Jurisdiction and other authorities having jurisdiction."

d. Subsection 1602.11.2.2 Cross-Connection Test. Modify the subsection by deleting "by the applicant in the presence of the Authority Having Jurisdiction and other authorities having jurisdiction."

e. Subsection 1602.11.2.3 Discovery of Cross-Connection. Modify the subsection by deleting "in the presence of the Authority Having Jurisdiction."

[**ARC 8860B**, IAB 6/16/10, effective 7/21/10; **ARC 1089C**, IAB 10/16/13, effective 11/20/13; **ARC 2474C**, IAB 3/30/16, effective 6/1/16; **ARC 3062C**, IAB 5/10/17, effective 6/14/17]

641—25.5(105) Backflow prevention with containment. Cities with populations of 15,000 or greater as determined by the 2010 census or any subsequent regular or special census shall have a backflow prevention program with containment. The minimum requirements for a program are given in subrules 25.5(1) through 25.5(5). These requirements are in addition to the applicable requirements of Section 603 of the Uniform Plumbing Code, 2015 Edition.

25.5(1) *Definitions.* The following definitions are added to those in Chapter 2 and Section 603 of the Uniform Plumbing Code, 2015 Edition, or are modified from those definitions for the purposes of rule 641—25.5(105) only.

a. Administrative authority. The administrative authority for this rule is the city council and its designees or, with respect to private water utilities, the Iowa utilities board.

b. Approved backflow prevention assembly for containment. Approved backflow prevention assembly for containment means a backflow prevention assembly which is approved by the University of Southern California Foundation for Cross-Connection Control and Hydraulic Research. The approval listing shall include the limitations of use based on the degree of hazard. The backflow prevention assembly shall also be listed by the International Association of Plumbing and Mechanical Officials (IAPMO) or by the American Society of Sanitary Engineering (ASSE) as having met the requirements of one of the standards listed below.

Standard	Product Covered
ANSI¤/ASSE* 1013-2009	Reduced Pressure Principle Backflow Preventers
ANSI¤/ASSE* 1015-2009	Double Check Backflow Prevention Assembly
ANSI¤/ASSE* 1047-2009	Reduced Pressure Detector Backflow Preventer
ANSI¤/ASSE* 1048-2009	Double Check Detector Assembly Backflow Preventer
ANSI¤/AWWA† C510-07	Double Check Valve Backflow Prevention Assembly
ANSI¤/AWWA† C511-07	Reduced-Pressure Principle Backflow Prevention Assembly

¤American National Standards Institute, 1819 L Street NW, Washington, DC 20036
*American Society of Sanitary Engineering, 901 Canterbury Road, Suite A, Westlake, OH 44145
†American Water Works Association, 6666 West Quincy Avenue, Denver, CO 80235

c. Approved backflow prevention assembly for containment in a fire protection system. Approved backflow prevention assembly for containment in a fire protection system means a backflow prevention assembly to be used in a fire protection system which meets the requirements of Factory Mutual Research Corporation (FM) and Underwriters Laboratory (UL) in addition to the requirements of 25.5(1)*"b."*

d. Containment. Containment is a method of backflow prevention which requires a backflow prevention assembly on certain water services. Containment requires that the backflow prevention assembly be installed on the water service as close to the public water supply main as is practical.

e. Customer. Customer means the owner, operator or occupant of a building or property which has a water service from a public water system, or the owner or operator of a private water system which has a water service from a public water system.

f. Degree of hazard. Degree of hazard means the rating of a cross connection or a water service which indicates if it has the potential to cause contamination (high hazard) or pollution (low hazard).

g. Water service. Depending on the context, water service is the physical connection between a public water system and a customer's building, property or private water system, or the act of providing potable water from a public water system to a customer.

25.5(2) *Proposed water service.*

a. No person shall install, or cause to have installed, a water service to a building, property or private water system before the administrative authority has evaluated the proposed water service for degree of hazard.

b. The administrative authority shall require the submission of plans, specifications and other information deemed necessary for a building, property or private water system to which a water service is proposed. The administrative authority shall review the information submitted to determine if cross connections will exist and the degree of hazard.

c. The owner of a building, property or private water system shall install, or cause to have installed, an approved backflow prevention assembly for containment as directed by the administrative authority before water service is initiated.

d. Reconstruction of an existing water service shall be treated as a proposed water service for the purposes of rule 641—25.5(135).

25.5(3) *Existing water services.*

a. Each customer shall survey the activities and processes which receive water from the water service and shall report to the administrative authority if cross connections exist and the degree of hazard.

b. The administrative authority may inspect the plumbing of any building, property and private water system which has a water service to determine if cross connections exist and the degree of hazard.

c. If, based on information provided through 25.5(3)*"a"* and *"b,"* the administrative authority determines that a water service may contaminate the public water supply, the administrative authority shall require that the customer install the appropriate backflow prevention assembly for containment.

d. If a customer refuses to install a backflow prevention assembly for containment when it is required by the administrative authority, the administrative authority may order that water service to the customer be discontinued until an appropriate backflow prevention assembly is installed.

25.5(4) *Backflow prevention assemblies for containment.*

a. Backflow prevention assemblies for containment shall be installed immediately following the water meter or as close to that location as deemed practical by the administrative authority.

b. A water service determined to present a high hazard shall be protected by an air gap or an approved reduced-pressure principle backflow prevention assembly.

c. A water service determined to present a low hazard shall be protected by an approved double check valve assembly or as in 25.5(4)*"b."*

d. A water service to a fire protection system shall be protected from backflow in accordance with the recommendations of American Water Works Association Manual M14. Where backflow prevention is required for a fire protection system, an approved backflow prevention assembly for containment in a fire protection system shall be used.

25.5(5) *Backflow incidents.*

a. The customer shall immediately notify the agency providing water service when the customer becomes aware that backflow has occurred in the building, property or private water system receiving water service.

b. The administrative authority may order that a water service be temporarily shut off when a backflow occurs in a customer's building, property or private water system.

[**ARC 8860B**, IAB 6/16/10, effective 7/21/10; **ARC 1089C**, IAB 10/16/13, effective 11/20/13; **ARC 2614C**, IAB 7/6/16, effective 6/15/16]

These rules are intended to implement Iowa Code chapter 105 as amended by 2013 Iowa Acts, Senate File 427.

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CHAPTER 27
PLUMBING AND MECHANICAL SYSTEMS BOARD—ADMINISTRATIVE AND REGULATORY AUTHORITY

641—27.1(17A,105) Definitions. For purposes of this chapter, the following definitions apply:

"Board" means the plumbing and mechanical systems board.

"Board office" means the office of the administrative staff.

"Department" means the department of public health.

"Disciplinary proceeding" means any proceeding under the authority of the board pursuant to which licensee discipline may be imposed.

"License" means a license to operate as a contractor or work in the plumbing, mechanical, HVAC-refrigeration, sheet metal, or hydronic disciplines or work as a certified medical gas system installer or work in the specialty license disciplines developed by the board.

"Licensee" means a person or entity licensed to operate as a contractor or work in the plumbing, mechanical, HVAC-refrigeration, sheet metal, or hydronic disciplines or work as a certified medical gas system installer or work in the specialty license disciplines developed by the board.

[**ARC 8528B**, IAB 2/24/10, effective 1/26/10; **ARC 1219C**, IAB 12/11/13, effective 1/15/14]

641—27.2(17A,105) Purpose of board. The purpose of the board is to administer and enforce the provisions of Iowa Code chapters 17A and 105 with regard to the licensing and regulation of plumbers, mechanical professionals, and contractors. The mission of the board is to protect the public health, safety and welfare by licensing qualified individuals who provide services to consumers and by fair and consistent enforcement of the statutes and regulations of the licensure board. Responsibilities include, but are not limited to:

27.2(1) Licensing of qualified applicants to operate as a contractor or work in the plumbing, mechanical, HVAC-refrigeration, sheet metal, or hydronic disciplines or work as a certified medical gas system installer or work in the specialty license disciplines developed by the board by examination, renewal, endorsement, and reciprocity.

27.2(2) Developing and administering a program of continuing education to ensure the continued competency of individuals licensed by the board.

27.2(3) Imposing discipline on licensees as provided by statute or rule.

[**ARC 8528B**, IAB 2/24/10, effective 1/26/10; **ARC 1219C**, IAB 12/11/13, effective 1/15/14]

641—27.3(17A,105) Organization of board and proceedings.

27.3(1) The board shall be composed of 11 members appointed by the governor. The board members identified in subrule 27.3(2), paragraphs *"c"* to *"i,"* are subject to confirmation by the senate.

27.3(2) The members of the board shall include:

a. The director of public health or the director's designee;

b. The commissioner of public safety or the commissioner's designee;

c. One plumbing inspector;

d. One mechanical inspector;

e. One contractor who works primarily in rural areas;

f. One individual licensed as a journeyperson plumber pursuant to the provisions of Iowa Code chapter 105 or, for the initial membership of the board, an individual eligible for such licensure;

g. One individual working as a plumbing contractor and licensed as a master plumber pursuant to the provisions of Iowa Code chapter 105 or, for the initial membership of the board, an individual eligible for such licensure;

h. Two individuals licensed as journeyperson mechanical professionals pursuant to the provisions of Iowa Code chapter 105 or, for the initial membership of the board, two individuals eligible for such licensure; and

i. Two individuals licensed as master mechanical professionals pursuant to the provisions of Iowa Code chapter 105 or, for the initial membership of the board, two individuals eligible for such licensure. One of these individuals shall be a mechanical systems contractor.

27.3(3) The board shall elect a chairperson, vice chairperson, and secretary from its membership at the first meeting after April 30 of each year.

27.3(4) The board shall hold at least four meetings annually.

27.3(5) A majority of the members of the board shall constitute a quorum.

27.3(6) Board meetings shall be governed in accordance with Iowa Code chapter 21, and the board's proceedings shall be conducted in accordance with Robert's Rules of Order, Revised.

27.3(7) The department shall furnish the board with the necessary facilities and employees to perform the duties required by this chapter but shall be reimbursed for all costs incurred from funds appropriated to the board and subsequent fees from licensing activities.

27.3(8) The board has the authority to:

a. Develop and implement a program of continuing education to ensure the continued competency of individuals licensed by the board.

b. Establish fees.

c. Establish committees of the board, the members of which shall be appointed by the board chairperson and shall not constitute a quorum of the board. The board chairperson shall appoint committee chairpersons.

d. Hold a closed session if the board votes to do so in a public roll-call vote with an affirmative vote of at least two-thirds if the total board is present or a unanimous vote if fewer are present. The board will recognize the appropriate statute allowing for a closed session when voting to go into closed session. The board shall keep minutes of all discussion, persons present, and action occurring at a closed session and shall tape-record the proceedings. The records shall be stored securely in the board office and shall not be made available for public inspection.

e. Investigate alleged violations of statutes or rules that relate to operation as a contractor; work in the plumbing, mechanical, HVAC-refrigeration, sheet metal, or hydronic disciplines; work as a certified medical gas system installer; or work in the specialty license disciplines developed by the board upon receipt of a complaint or upon the board's own initiation. The investigation will be based on information or evidence received by the board.

f. Initiate and impose licensee discipline.

g. Monitor licensees that are restricted by a board order.

h. Perform any other functions authorized by a provision of law.

[**ARC 8528B**, IAB 2/24/10, effective 1/26/10; **ARC 1219C**, IAB 12/11/13, effective 1/15/14]

641—27.4(17A,105) Official communications.

27.4(1) All official communications, including submissions and requests, may be addressed to the Plumbing and Mechanical Systems Board, Lucas State Office Building, 321 E. 12th Street, Des Moines, Iowa 50319-0075.

27.4(2) Notice of change of address. Each licensee and licensed entity shall notify the board of a change of the current mailing address within 30 days after the occurrence.

27.4(3) Notice of change of name. Each licensee shall notify the board in writing of a change of name within 30 days after the occurrence.

[**ARC 8528B**, IAB 2/24/10, effective 1/26/10]

641—27.5(17A,105) Office hours. The board office is open for public business from 8 a.m. to 4:30 p.m., Monday to Friday of each week, except holidays.

641—27.6(21) Public meetings. Members of the public may be present during board meetings unless the board votes to hold a closed session. Dates and location of board meetings may be obtained through the Iowa department of public health's Web site (http://idph.iowa.gov/PMSB) or directly from the board office.

27.6(1) At every regularly scheduled board meeting, time will be designated for public comment. During the public comment period, any person may speak for up to two minutes. Any additional time allowances will be at the discretion of the chairperson or acting chairperson.

27.6(2) Persons who have not asked to address the board during the public comment period may raise their hands to be recognized by the chairperson. Acknowledgment and an opportunity to speak will be at the discretion of the chairperson.

27.6(3) The person presiding at a meeting of the board may exclude a person from an open meeting for behavior that obstructs the meeting.

27.6(4) Cameras and recording devices may be used at open meetings, provided the cameras or recording devices do not obstruct the meeting. If the user of a camera or recording device obstructs the meeting by the use of such device, the person presiding at the meeting may request the user to discontinue use of the camera or device.

[**ARC 8528B**, IAB 2/24/10, effective 1/26/10; **ARC 3061C**, IAB 5/10/17, effective 6/14/17]

These rules are intended to implement Iowa Code chapters 17A and 105.

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[Filed ARC 3061C (Notice ARC 2903C, IAB 1/18/17), IAB 5/10/17, effective 6/14/17]

CHAPTER 28
PLUMBING AND MECHANICAL SYSTEMS BOARD—LICENSURE FEES

641—28.1(105) Fees. All fees are nonrefundable.

28.1(1) Fees for three-year initial licenses are as follows:

a. An apprentice license as defined in 641—subrule 29.2(1) is $50.

b. A journey license as defined in 641—subrule 29.2(2) is $180.

c. A master license as defined in 641—subrule 29.2(3) is $240.

d. A medical gas pipe certificate as defined in 641—29.3(105) is $75.

e. An inactive license as defined in 641—subrules 29.2(5) and 29.2(6) is $50.

f. A contractor license as defined in 641—subrule 29.2(4) is $250.

g. A special restricted license as defined in 641—subrules 29.2(8), 29.2(9), and 29.2(10) is $50.

h. Fees for all initial licenses issued for a period of less than three years shall be prorated using a one-sixth deduction for each six-month period.

28.1(2) Fees for three-year reciprocal licenses are as follows:

a. An apprentice license as defined in 641—subrule 29.2(1) is $50.

b. A journey license as defined in 641—subrule 29.2(2) is $180.

c. A master license as defined in 641—subrule 29.2(3) is $240.

d. Fees for all reciprocal licenses issued for a period of less than three years shall be prorated using a one-sixth deduction for each six-month period.

28.1(3) Fees for renewal of licenses are as follows:

a. An apprentice license as defined in 641—subrule 29.2(1) is $50.

b. A journey license as defined in 641—subrule 29.2(2) is $180.

c. A master license as defined in 641—subrule 29.2(3) is $240.

d. A medical gas pipe certificate as defined in 641—29.3(105) is $75.

e. An inactive license as defined in 641—subrules 29.2(5) and 29.2(6) is $50. However, no fee is required for an inactive specialty license as defined in 641—subrule 23.8(3) so long as the person possessing the inactive specialty license remains actively licensed as an apprentice.

f. A contractor license as defined in 641—subrule 29.2(4) is $250.

g. A special restricted license as defined in 641—subrules 29.2(8), 29.2(9), and 29.2(10) is $50. However, no fee is required for an inactive specialty license as defined in 641—subrule 23.8(3) so long as the person possessing the inactive specialty license remains actively licensed as an apprentice.

h. Through June 29, 2017, fees for all licenses renewed for a period of less than three years shall be prorated using a one-sixth deduction for each six-month period.

28.1(4) The examination application fee is $35.

28.1(5) A late fee for failure to renew before expiration is determined as follows:

a. Prior to July 1, 2017, a licensee who allows a license to lapse for 30 days or less may reinstate and renew the license with payment of the appropriate renewal fee and without payment of a late fee. Beginning July 1, 2017, a licensee who does not timely renew but renews a license on or before the following July 31 may reinstate and renew the license upon payment of the appropriate renewal fee and without payment of a late fee.

b. Prior to July 1, 2017, a licensee who allows a license to lapse for more than 30 days but less than 60 days may reinstate and renew the license without examination upon payment of a $60 late fee and the appropriate renewal of license fee. Beginning July 1, 2017, a licensee who does not timely renew but renews a license between the following August 1 and August 31 may reinstate and renew the license without examination upon payment of a $60 late fee and the appropriate renewal of license fee.

c. Prior to July 1, 2017, a licensee who allows a license to lapse for more than 60 days but not more than 365 days may reinstate and renew the license without examination upon payment of a $100 late fee and the appropriate renewal of license fee. Beginning July 1, 2017, a licensee who does not timely renew but renews a license after the following August 31 and on or before the following June 30 may reinstate and renew the license without examination upon payment of a $100 late fee and the appropriate renewal of license fee.

28.1(6) The duplicate or reissued license certificate or wallet card fee is $20.

28.1(7) The fee for written verification of licensee status is $20.

28.1(8) The returned check fee is $25.

28.1(9) The disciplinary hearing fee is a maximum of $75.

28.1(10) The paper application fee is $25 plus the appropriate license fee.

28.1(11) Combined license.

a. For purposes of this subrule, "combined license" shall mean more than one active master, contractor, or journeyperson license in one or multiple disciplines held by the same individual.

b. A license fee for a combined license shall be the sum total of each of the separate license fees as set forth in subrules 28.1(1) through 28.1(3) reduced by 30 percent.

c. In order to be eligible for the combined license fee reduction, all individual licenses must be purchased in a single transaction.

28.1(12) The fee for converting an HVAC-refrigeration or hydronics license to a mechanical license is $50. This fee shall not apply at the time of reissue.

[Editorial change: IAC Supplement 2/25/09; **ARC 8529B**, IAB 2/24/10, effective 1/26/10; **ARC 9603B**, IAB 7/13/11, effective 6/21/11; **ARC 9847B**, IAB 11/16/11, effective 12/21/11; **ARC 0341C**, IAB 10/3/12, effective 11/7/12; **ARC 1299C**, IAB 2/5/14, effective 3/12/14; **ARC 3061C**, IAB 5/10/17, effective 6/14/17]

641—28.2(105) Annual review of fee schedule. Within 60 days following the end of each fiscal year, the board shall submit a report to the general assembly that includes a balance sheet projection extending no less than three years. If the revenue projection exceeds the expense projections by more than 10 percent, the board shall adjust the fee schedules so that projected revenues are no more than 10 percent higher than projected expenses. Revised fees shall be implemented no later than January 1, 2013, and January 1 of each subsequent year.

[**ARC 9603B**, IAB 7/13/11, effective 6/21/11; **ARC 9847B**, IAB 11/16/11, effective 12/21/11]

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CHAPTER 29
PLUMBING AND MECHANICAL SYSTEMS BOARD— APPLICATION, LICENSURE, AND EXAMINATION

641—29.1(105) Definitions. For purposes of these rules, the following definitions shall apply:

"Applicable" means having relevance; appropriate.

"Apprentice" means any person, other than a helper, journeyperson, or master, who, as a principal occupation, is engaged in working as an employee of a plumbing, mechanical, HVAC-refrigeration, sheet metal, or hydronic systems contractor under the supervision of either a master or a journeyperson and is progressing toward completion of an apprenticeship training program registered by the Office of Apprenticeship of the United States Department of Labor while learning and assisting in the design, installation, and repair of plumbing, HVAC, refrigeration, sheet metal, or hydronic systems, as applicable.

"Board" means the plumbing and mechanical systems board.

"Contractor" means a person or entity that provides plumbing, mechanical, HVAC-refrigeration, or hydronic systems services on a contractual basis and who is paid a predetermined amount under that contract for rendering those services.

"Corresponding" means the same discipline.

"Department" means the Iowa department of public health.

"Disconnect/reconnect plumbing technician specialty license" means a sublicense under a plumbing license to perform work from the appliance shutoff valve or fixture shutoff valve to the appliance or fixture and any part or component of the appliance or fixture, including the disconnection and reconnection of the existing appliance or fixture to the water or sewer piping and the installation of a shutoff valve no more than 3 feet from the appliance or fixture.

"Emergency repairs" means the repair of water pipes to prevent imminent damage to property.

"Hearth systems specialty license" means a sublicense under an HVAC-refrigeration or mechanical license to perform work in the installation of gas burning and solid fuel appliances that offer a decorative view of the flames, from the connector pipe to the shutoff valve located within 3 feet of the appliance. This sublicense is further allowed to perform work in the venting systems, log lighters, gas log sets, fireplace inserts, and freestanding stoves.

"HVAC" means heating, ventilation, air conditioning, ducted systems, or any type of refrigeration used for food processing or preservation. "HVAC" includes all natural, propane, liquid propane, or other gas lines associated with any component of an HVAC system.

"Hydronic" means a heating or cooling system that transfers heating or cooling by circulating fluid through a closed system, including boilers, pressure vessels, refrigerated equipment in connection with chilled water systems, all steam piping, hot or chilled water piping together with all control devices and accessories, installed as part of, or in connection with, any heating or cooling system or appliance whose primary purpose is to provide comfort using a liquid, water, or steam as the heating or cooling media. "Hydronic" includes all low-pressure and high-pressure systems and all natural, propane, liquid propane, or other gas lines associated with any component of a hydronic system. For the purposes of this definition, "primary purpose is to provide comfort" means a system or appliance in which at least 51 percent of the capacity generated by its operation, on an annual average, is dedicated to comfort heating or cooling.

"Inactive license" means a license that is available for a plumbing, mechanical, HVAC-refrigeration, sheet metal, or hydronic professional who is not actively engaged in running a business or working in the business in the corresponding discipline at that license level. An inactive license must be renewed prior to its expiration date. An inactive license is not valid for practice until the license is reactivated by the board.

"Journeyperson" means any person, other than a master, who, as a principal occupation, is engaged as an employee of, or otherwise working under the direction of, a master in the design, installation, and repair of plumbing, mechanical, HVAC-refrigeration, sheet metal, or hydronic systems, as applicable.

"Lapsed license" means a license that expired prior to June 30, 2017, and was not renewed within 60 days following its expiration date or a license that expired on or after June 30, 2017, and was not renewed by the following August 31. A lapsed license is no longer valid for practice.

"Licensee" means a person or entity licensed to operate as a contractor or work in the plumbing, mechanical, HVAC-refrigeration, sheet metal, or hydronic disciplines or work as a certified medical gas system installer or work in the specialty license disciplines developed by the board.

"Master" means any person who works in the planning or superintending of the design, installation, or repair of plumbing, mechanical, HVAC, refrigeration, or hydronic systems and is otherwise lawfully qualified to conduct the business of plumbing, mechanical, HVAC, refrigeration, or hydronic systems, and who is familiar with the laws and rules governing the same.

"Mechanical systems" means HVAC, refrigeration, sheet metal, and hydronic systems.

"Medical gas system installer" means any person who installs or repairs medical gas piping, components, and vacuum systems, including brazers, who has been issued a valid certification from the National Inspection Testing Certification (NITC) Corporation, or an equivalent authority approved by the board.

"Plumbing" means all potable water building supply and distribution pipes, all plumbing fixtures and traps, all drainage and vent pipes, and all building drains and building sewers, storm sewers, and storm drains, including their respective joints and connections, devices, receptors, and appurtenances within the property lines of the premises, and including the connection to sanitary sewer, storm sewer, and domestic water mains. "Plumbing" includes potable water piping, potable water treating or using equipment, medical gas piping systems, fuel gas piping, water heaters and vents, including all natural, propane, liquid propane, or other gas lines associated with any component of a plumbing system.

"Reactivated license" means a license that is changed from inactive status to active status pursuant to rule 641—29.8(105).

"Refrigeration" means any system of refrigeration regardless of the level of power, if such refrigeration is intended to be used for the purpose of food processing and product preservation and is also intended to be used for comfort systems. "Refrigeration" includes all natural, propane, liquid propane, or other gas lines associated with any component of refrigeration.

"Reissued license" means a refrigeration or HVAC license that was changed to an HVAC-refrigeration license pursuant to rule 641—29.8(105). "Reissued license" also means an HVAC or refrigeration license and a hydronic license that was changed to a mechanical license pursuant to rule 641—29.8(105).

"Routine maintenance" means the maintenance, repair, or replacement of existing fixtures or parts of plumbing, mechanical, HVAC, refrigeration, sheet metal, or hydronic systems in which no changes in original design are made. Fixtures or parts do not include smoke and fire dampers or water, gas or steam piping permanent repairs except for traps or strainers. Routine maintenance shall include emergency repairs. "Routine maintenance" does not include the replacement of furnaces, boilers, cooling appliances, or water heaters more than 100 gallons in size.

"Service technician HVAC specialty license" means a sublicense under an HVAC-refrigeration or mechanical license to perform work from the appliance shutoff valve to the appliance and any part and component of the appliance, including the disconnection and reconnection of the existing appliance to the gas piping and the installation of a shutoff valve no more than 3 feet away from the appliance.

"Sheet metal" means heating, ventilation, air conditioning, pollution control, fume hood systems and related ducted systems or installation of equipment associated with any component of a sheet metal system. "Sheet metal" excludes refrigeration and electrical lines and all natural gas, propane, liquid propane, or other gas lines associated with any component of a sheet metal system.

"Surety bond" means a performance bond written by an entity licensed to do business in this state which guarantees that a contractor will fully perform the contract and which guarantees against breach of that contract.

[**ARC 8530B**, IAB 2/24/10, effective 1/26/10; **ARC 9604B**, IAB 7/13/11, effective 6/21/11; **ARC 9849B**, IAB 11/16/11, effective 12/21/11; **ARC 1220C**, IAB 12/11/13, effective 5/1/14; **ARC 3061C**, IAB 5/10/17, effective 6/14/17]

641—29.2(105) Available licenses and general requirements. Effective January 1, 2011, all licenses issued by the board will be for a three-year period, except where a shorter or longer period is required or allowed by statute. Subject to the general requirements set forth herein and the minimum qualifications for licensure set forth in rule 641—29.4(105), the following licenses are available:

29.2(1) *Apprentice license.* An applicant for an apprentice license shall:

a. File an application and pay application fees in accordance with 641—29.5(105).

b. Be enrolled in an applicable apprentice program which is registered with the United States Department of Labor Office of Apprenticeship.

c. Certify that the applicant will work under the supervision of a licensed journeyperson or master in the applicable discipline by providing the department with the United States Department of Labor Office of Apprenticeship identification number and sponsor identification number.

d. If the applicant currently holds an active specialty license, place the specialty license on inactive status as specified in 641—subrule 23.8(3).

29.2(2) *Journeyperson license.*

a. An applicant for a journeyperson license shall:

(1) File an application and pay application fees in accordance with rule 641—29.5(105).

(2) Pass the state journeyperson licensing examination in the applicable discipline. An individual who has passed both the journeyperson HVAC-refrigeration examination and the journeyperson hydronic examination separately shall be qualified to be issued a journeyperson mechanical license without having to pass the journeyperson mechanical examination.

(3) Provide the board with evidence that the applicant has completed at least four years of practical experience as an apprentice. Commencing January 1, 2010, the four years of practical experience required by this paragraph must be an apprenticeship training program registered by the United States Department of Labor Office of Apprenticeship. Documentation must be submitted on a form provided by the board.

b. Notwithstanding the journeyperson licensure requirements set forth in paragraph 29.2(2)*"a,"* an applicant who possesses a master level license and who seeks a journeyperson license in the same discipline shall file an application and pay application fees in accordance with rule 641—29.5(105).

29.2(3) *Master license.* An applicant for a master license shall:

a. File an application and pay application fees in accordance with rule 641—29.5(105).

b. Pass the state master licensing examination for the applicable discipline. An individual who has passed both the master HVAC-refrigeration examination and the master hydronic examination separately shall be qualified to be issued a master mechanical license without having to pass the master mechanical examination.

c. Provide the board with evidence that the applicant:

(1) Has previously been licensed as a master in the applicable discipline; or

(2) Has previously been licensed as a journeyperson in the applicable discipline and has at least two years of journeyperson experience in the applicable discipline.

29.2(4) *Contractor license.* An applicant for a contractor license shall:

a. File an application and pay application fees in accordance with rule 641—29.5(105). Effective May 1, 2017, the application shall include the fee for a three-year contractor registration as specified in 875—Chapter 150.

(1) Through June 30, 2017, the application shall include the applicant's state contractor registration number.

(2) Effective July 1, 2017, the application shall include proof of workers' compensation insurance coverage, proof of unemployment insurance compliance and, for out-of-state contractors, a bond as described in Iowa Code chapter 91C.

(3) Effective July 1, 2017, contractor licensure under Iowa Code chapter 105 as amended by 2013 Iowa Acts, Senate File 427, shall constitute registration as a contractor under Iowa Code chapter 91C.

b. Provide the board with evidence that the applicant maintains a permanent place of business.

c. Provide the board with evidence of a public liability insurance policy issued by an entity licensed to do business in this state with a minimum coverage amount of $500,000 and:

(1) If the applicant operates the contractor business as a sole proprietorship, provide the board with evidence that the applicant personally obtained the policy, or

(2) If the applicant operates the contractor business as an employee or owner of a legal entity, provide the board with evidence that the insurance policy is obtained by the entity and that the insurance covers all plumbing or mechanical work performed by the entity.

d. Provide the board with evidence of a surety bond issued by an entity licensed to do business in this state in a minimum amount of $5,000 and:

(1) If the applicant operates the contractor business as a sole proprietorship, provide the board with evidence that the applicant personally obtained the surety bond, or

(2) If the applicant operates the contractor business as an employee or owner of a legal entity, provide the board with evidence that the surety bond was obtained by the entity and that the surety bond covers all plumbing or mechanical work performed by the entity.

e. Provide a certificate to the board that the public liability insurance policy required under paragraph 29.2(4)*"c"* and the surety bond required under paragraph 29.2(4)*"d"* shall not be canceled without the entity first giving 10 days' written notice to the board.

f. Provide the board with evidence that the applicant holds an active master license or employs at least one person who holds an active master license issued under Iowa Code chapter 105 for each discipline in which the applicant performs chapter 105-covered work.

29.2(5) *Active journeyperson license/inactive master license combination.* An applicant for an active journeyperson license and an inactive master license in the same discipline shall:

a. File an application and pay application fees for both an active journeyperson license and an inactive master license in accordance with rule 641—29.5(105).

b. Provide the board with evidence that the applicant meets the requirements for master licensure under subrule 29.2(3).

c. Provide evidence that the applicant is not performing plumbing, mechanical, HVAC-refrigeration, or hydronic work for which a master license is required.

d. Acknowledge awareness that the applicant is unable to perform any plumbing, mechanical, HVAC-refrigeration, or hydronic work for which a master license is required so long as the applicant's master license is held in inactive status.

29.2(6) *Inactive license.* An applicant for an inactive license that does not fall within subrule 29.2(5) shall:

a. File an application and pay application fees in accordance with rule 641—29.5(105).

b. Provide the board with evidence that the applicant meets the requirements for licensure under rule 641—29.2(105) at the applicable licensure level.

c. Provide the board with evidence that the applicant is not actively engaged working in the plumbing, mechanical, HVAC-refrigeration, sheet metal, or hydronic disciplines for which licensure is required.

d. Acknowledge awareness that the applicant is unable to perform any plumbing, mechanical, HVAC-refrigeration, sheet metal, or hydronic work for which licensure is required so long as the applicant's license is held in inactive status.

29.2(7) *Service technician HVAC specialty license.* An applicant for a service technician HVAC specialty license shall:

a. File an application and pay application fees in accordance with rule 641—29.5(105).

b. Provide the board with evidence that:

(1) The applicant possesses a valid certification from North American Technician Excellence, Inc. or an equivalent authority approved by the board, or

(2) The applicant completed a Service Technician Associate degree or equivalent educational or similar training approved by the board.

29.2(8) *Disconnect/reconnect plumbing technician specialty license.* An applicant for a disconnect/reconnect plumbing technician specialty license shall:

a. File an application and pay application fees in accordance with rule 641—29.5(105).

b. Provide the board with evidence that:

(1) The applicant is receiving or has previously received industry training to perform work covered under this specialty license, or

(2) The applicant completed a Service Technician Associate degree or equivalent educational or similar training approved by the board.

29.2(9) *Private school or college routine maintenance specialty license.* An applicant for a private school or college routine maintenance specialty license shall:

a. File an application and pay application fees in accordance with rule 641—29.5(105).

b. Provide the board with evidence that the applicant is currently employed by a private school or college.

c. Provide the board with evidence that the applicant is performing routine maintenance within the scope of employment with the private school or college.

29.2(10) *Hearth systems specialty license.* An applicant for a hearth systems specialty license shall:

a. File an application and pay application fees in accordance with rule 641—29.5(105).

b. Provide the board with evidence that the applicant possesses a valid certification issued by the National Fireplace Institute or equivalent authority approved by the board.

[**ARC 8530B**, IAB 2/24/10, effective 1/26/10; **ARC 9604B**, IAB 7/13/11, effective 6/21/11; **ARC 9849B**, IAB 11/16/11, effective 12/21/11; **ARC 1220C**, IAB 12/11/13, effective 5/1/14; see Note 2 at end of chapter; **ARC 3061C**, IAB 5/10/17, effective 6/14/17]

641—29.3(105) Medical gas piping certification. The following certification is required for a person who performs work as a medical gas system installer. An applicant for a medical gas certificate shall:

29.3(1) File an application and pay applicable fees.

29.3(2) Possess valid certification from the National Inspection Testing Certification (NITC) Corporation, or an equivalent authority approved by the board. Documentation must be submitted on a form provided by the board.

[**ARC 8530B**, IAB 2/24/10, effective 1/26/10]

641—29.4(105) Minimum qualifications for licensure. The following minimum requirements shall apply to all licenses issued after July 1, 2008.

29.4(1) An applicant for any type of license must be at least 18 years old.

29.4(2) Effective January 1, 2010, all apprentice applicants must have completed a high school education or attained GED equivalent.

[**ARC 8530B**, IAB 2/24/10, effective 1/26/10; **ARC 1220C**, IAB 12/11/13, effective 5/1/14; see Delay note at end of chapter]

641—29.5(105) General requirements for application for licensure. The following criteria shall apply to application for licensure.

29.5(1) On-line or paper application.

a. An applicant shall complete a board-approved application either on-line or on a paper application according to instructions contained in the application.

b. Applications can be completed online or on a paper application. Paper applications are available to download from the board Web site or from the board office by writing to: Plumbing and Mechanical Systems Board, Iowa Department of Public Health, 312 E. 12th Street, 5th Floor, Des Moines, Iowa 50319-0075, or by calling 1-866-280-1521.

29.5(2) Fees. In order to be processed, each application must be accompanied by the appropriate fees as determined by the board. All fees are nonrefundable.

a. On-line application fees shall be paid by credit card only.

b. A paper application shall be accompanied by the appropriate fees payable by check or money order to the Iowa Plumbing and Mechanical Systems Board.

29.5(3) *Applicant responsibilities.* An applicant for an initial license or license renewal bears full responsibility for each of the following:

a. Paying all fees charged by regulatory authorities, state or national testing or credentialing organizations, and educational institutions providing the information required to complete a license, certification, or renewal application;

b. Providing accurate, up-to-date, and truthful information on the application form including, but not limited to, prior professional experience, education, training, criminal history, and disciplinary history; and

c. Submitting complete application materials. An application for a license or certification or renewal of a license or certification will be considered active for 90 days from the date the application is received. For purposes of establishing timely filing, the postmark on a paper submittal will be used and, for applications submitted online, the date of the electronic time stamp will be used. If the applicant does not submit all materials within this time period or if the applicant does not meet the requirements for the license or certification, the application shall be considered incomplete and shall be destroyed.

29.5(4) No application will be considered by the board without the appropriate verifiable documentation. An applicant must submit the following verifiable documentation:

a. A passing score for a discipline-appropriate examination provided by the testing vendor under contract with the board, when testing is required for a license.

b. Verification that the applicant has met the minimum requirements as defined in 641—29.4(105) and the established employment experience criteria for each type of license.

c. Documentation of criminal convictions related to the practice of the profession, which shall include a full explanation from the applicant. No application shall be considered complete unless and until the licensee responds to board requests for additional information regarding applicant criminal convictions.

[**ARC 8530B**, IAB 2/24/10, effective 1/26/10; **ARC 1220C**, IAB 12/11/13, effective 5/1/14; **ARC 3061C**, IAB 5/10/17, effective 6/14/17]

641—29.6(105) Examination.

29.6(1) An applicant for licensure as a plumbing or mechanical system professional that requires a state licensing examination must successfully pass the licensing examination for the discipline.

a. The examination will be administered by the board-approved vendor.

b. The board shall approve the specific examination to be used for each license type.

c. Rescinded IAB 2/24/10, effective 1/26/10.

29.6(2) Examination requirements.

a. The examination will be written and proctored by a testing agency selected by the board.

b. The examination will be offered periodically during the year. The time and location will rotate between multiple sites in the state of Iowa, as determined by the department, with approval of the board.

c. The examination will not be subject to review by applicants. The testing vendor shall, upon request from an applicant, provide information about the sections that the applicant failed, but shall not provide an applicant access to actual examination questions or answers. Any fees associated with the review process will be assessed by and payable to the testing vendor. The applicant is responsible for paying all associated examination fees.

d. A score of 75 percent or better will be considered passing.

29.6(3) Examination application requirements.

a. An applicant shall complete and submit a board-approved examination application either on-line or on a paper application a minimum of 15 business days prior to taking an examination. An applicant shall complete the application form according to instructions contained in the application.

b. Examination applications can be completed online or on a paper application. Paper applications are available to download from the board Web site or from the board office by writing to: Plumbing and Mechanical Systems Board, Iowa Department of Public Health, 312 E. 12th Street, 5th Floor, Des Moines, Iowa 50319-0075, or by calling 1-866-280-1521.

c. Fees. In order to be processed, each application must be accompanied by the appropriate fees as determined by the board. All fees are nonrefundable.

(1) On-line examination application fees shall be paid by credit card only.

(2) A paper examination application shall be accompanied by the appropriate fees payable by check or money order to the Iowa Plumbing and Mechanical Systems Board.

d. No application will be considered by the board without the appropriate verifiable documentation.

e. The applicant will be notified and issued an examination entrance letter upon approval of the examination application.

f. If the applicant is notified that the application is incomplete, the applicant must contact the board office within 90 days. The board may be contacted at: Plumbing and Mechanical Systems Board, Iowa Department of Public Health, 312 E. 12th Street, 5th Floor, Des Moines, Iowa 50319, or by calling 1-866-280-1521.

g. Incomplete applications shall be considered invalid and after 90 days shall be destroyed.

h. Examination fees shall be payable directly to the board-approved testing vendor.

(1) All transactions shall be the responsibility of the applicant and testing vendor.

(2) The board shall not be held responsible for refunds from the testing vendor.

i. An applicant shall present current photo identification in order to sit for the examination.

j. An applicant for licensure by examination who does not pass the examination within one year from the original application date will be required to submit a new application.

k. A master examination applicant shall not receive permission to sit for a master examination unless the applicant establishes that the applicant:

(1) Has previously been licensed as a master in the applicable discipline; or

(2) Has previously been licensed as a journeyperson in the applicable discipline and has at least two years of journeyperson experience in the applicable discipline.

l. A journeyperson examination applicant may apply to sit for the examination up to 6 months prior to completion of the 48 months of required apprentice credit, which shall include the granting of advanced standing or credit for previously acquired experience, training, or skills.

29.6(4) Expiration of passing examination score. An applicant who successfully passes an examination must apply for licensure in the applicable discipline at the applicable discipline level within two years of notification that the applicant successfully passed the examination. A passing examination score shall expire if the applicant fails to apply for licensure within the two-year period as set forth herein, and the applicant shall be required to successfully retake said examination to become licensed in the applicable discipline at the applicable discipline level.

[**ARC 8530B**, IAB 2/24/10, effective 1/26/10; **ARC 9604B**, IAB 7/13/11, effective 6/21/11; **ARC 9849B**, IAB 11/16/11, effective 12/21/11; **ARC 1220C**, IAB 12/11/13, effective 5/1/14; **ARC 3061C**, IAB 5/10/17, effective 6/14/17]

641—29.7(105) License renewal.

29.7(1) *Renewal period.* The period of licensure to operate as a contractor or work as a master, journeyperson or apprentice in the plumbing, mechanical, HVAC-refrigeration, sheet metal, or hydronic disciplines or work as a certified medical gas system installer or work in the specialty license disciplines developed by the board shall be for a period of three years, except as allowed or required in circumstances described in this subrule.

a. All licenses issued or renewed on or after July 1, 2014, shall expire on June 30 every three years, beginning with June 30, 2017.

b. Licensees with a renewal date that falls from July 1, 2014, through June 29, 2017, shall have the license renewal fee prorated using a one-sixth deduction for each six-month period following July 1, 2014. Applicable late renewal fees shall apply during this period. Licenses renewed through June 29, 2017, shall be issued with an expiration date of June 30, 2017.

c. Fees for new licenses issued after the July 1 beginning of each three-year renewal cycle shall be prorated using a one-sixth deduction for each six-month period of the renewal cycle.

d. A licensee whose license expires between June 30, 2014, and July 1, 2017, may voluntarily renew the license early so the license may have an expiration date of June 30, 2017. This voluntary early renewal may happen at any time on or after July 1, 2014. Notwithstanding any shortened compliance period, licensees who renew their licenses between June 30, 2014, and July 1, 2017, shall meet all of the continuing education requirements that would otherwise be required at both the July 1, 2017, renewal and the prior renewal.

29.7(2) *Renewal notification.*

a. Through December 31, 2016, the board shall send a renewal notice by regular mail to each licensee at the address on record at least 60 days prior to the expiration of the license. After December 31, 2016, the board shall cease this practice.

b. The licensee is responsible for renewing the license prior to its expiration.

c. Failure of the licensee to receive the notice does not relieve the licensee of the responsibility for renewing the license.

29.7(3) *Specific renewal requirements.*

a. *Active and inactive apprentice, specialty, journeyperson, and master licenses.* An apprentice, specialty, journeyperson, or master licensee seeking renewal shall:

(1) Submit an application for renewal either electronically or on the forms provided by the board office.

(2) Meet the continuing education requirements as set forth in rule 641—30.2(105), unless no continuing education is required as specified in 641—subrule 23.8(3), 30.2(2), or 30.6(1).

(3) Include the appropriate fee as specified in 641—Chapter 28. A penalty shall be assessed by the board for late renewal, as specified in 641—Chapter 28.

b. *Medical gas piping certification holders.* A medical gas piping certification holder seeking renewal shall:

(1) Submit an application for renewal either electronically or on the forms provided by the board office.

(2) Provide evidence that the person has maintained valid certification issued from the National Inspection Testing Certification (NITC) Corporation or an equivalent authority approved by the board.

(3) Include the appropriate fee as specified in 641—Chapter 28.

c. *Contractor licenses.* Beginning with the July 1, 2017, renewal and each renewal thereafter, renewal of the contractor license shall constitute registration as a contractor under Iowa Code chapter 91C. A contractor licensee seeking renewal shall:

(1) Submit an application for renewal on the forms provided by the board office. Licensees may renew their licenses online or via paper application.

(2) Include evidence of professional liability insurance and a surety bond required by subrule 29.2(4).

(3) As specified in 875—Chapter 150, include proof of workers' compensation insurance coverage, proof of unemployment insurance compliance and, for out-of-state contractors, a bond as described in Iowa Code chapter 91C.

(4) Include the appropriate license fee as specified in 641—Chapter 28. A penalty shall be assessed by the board for late renewal, as specified in 641—Chapter 28.

(5) Include the fee for a three-year contractor registration as specified in 875—Chapter 150.

29.7(4) *Complete and timely filed application.* No renewal application shall be considered timely and sufficient until received by the board office and accompanied by all material required for renewal and all applicable renewal and late fees. Incomplete applications will not be accepted. For purposes of establishing timely filing, the postmark on a paper submittal will be used and, for renewals submitted online, the date of the electronic time stamp will be used.

29.7(5) *Late renewal.* A licensee shall have a one-month grace period after the expiration date of the license to renew without payment of a late fee.

a. A licensee who seeks to renew more than one month but less than two months after the license expiration date may renew upon payment of the late fee in the amount specified in 641—Chapter 28 in addition to the renewal fee.

b. A license remains valid for practice for up to two months past the expiration date of the license. After two months, the license shall lapse and become invalid for practice until the license is reinstated.

29.7(6) *Reinstatement.* A person seeking reinstatement of a lapsed license must submit an application for reinstatement electronically or on the forms provided by the board office and include all required documentation and fees.

a. A licensee who allows a license to lapse for more than two months but not more than 365 days may reinstate and renew the license upon payment of the late penalty fee in the amount specified in 641—Chapter 28 in addition to the renewal fee. A specialty, journeyperson or master licensee must also meet the continuing education requirements as set forth in rule 641—30.2(105), unless no continuing education is required as specified in 641—subrule 23.8(3), 30.2(2), or 30.6(1).

b. A person holding a specialty, journeyperson or master license who allows the license to lapse for more than one year may reinstate and renew the license by providing evidence of one of the following:

(1) For a journeyperson or master licensee, retaking and successfully passing the applicable licensing examination; or

(2) Retaking and successfully completing all continuing education requirements as set forth in rule 641—30.2(105) for each renewal period in which the license was not timely renewed.

c. A contractor licensee seeking reinstatement of a license that has been lapsed for more than one year may reinstate and renew the license by submitting evidence of meeting the requirements specified in subrule 29.7(3) and payment of any required fees.

d. A licensee who reinstates and renews a lapsed license shall not be entitled to a prorated renewal fee.

[**ARC 8530B**, IAB 2/24/10, effective 1/26/10; **ARC 9604B**, IAB 7/13/11, effective 6/21/11; **ARC 9849B**, IAB 11/16/11, effective 12/21/11; **ARC 0340C**, IAB 10/3/12, effective 11/7/12; **ARC 1220C**, IAB 12/11/13, effective 5/1/14; **ARC 3061C**, IAB 5/10/17, effective 6/14/17]

641—29.8(105) License reissue. Each reissued license shall be for the same level of license held by the licensee at the time of renewal. Beginning July 1, 2014, upon renewal, licenses shall be reissued as follows:

29.8(1) An individual who holds a refrigeration license shall be reissued an HVAC-refrigeration license; an individual who holds an HVAC license shall be reissued an HVAC-refrigeration license.

29.8(2) An individual who holds an HVAC license and a hydronic license shall be reissued a mechanical license.

29.8(3) An individual who holds a refrigeration license and a hydronic license shall be reissued a mechanical license.

29.8(4) An individual who holds a refrigeration license or an HVAC license and has passed the board-designated hydronics test prior to June 30, 2014, shall be reissued a mechanical license.

29.8(5) An individual who holds only a hydronics license shall be reissued a hydronics license.

[**ARC 8783B**, IAB 6/2/10, effective 5/10/10; **ARC 1220C**, IAB 12/11/13, effective 5/1/14]

641—29.9(105) Waiver from examination for military service. The written examination requirements and prior experience requirements set forth in Iowa Code sections 105.18(2)*"b"*(1) and 105.18(2)*"c"* shall be waived for a journeyperson license or master license if the applicant meets all of the following requirements:

29.9(1) Is an active or retired member of the United States military.

29.9(2) Provides documentation that the applicant was deployed on active duty during any portion of the time period of July 1, 2008, through December 31, 2009.

29.9(3) Provides documentation that shows the applicant has previously passed an examination which the board deems substantially similar to the examination for a journeyperson license or a master license, as applicable, issued by the board, or provides documentation that shows the applicant has previously been licensed by a state or local government jurisdiction in the same trade and trade level.

[**ARC 9604B**, IAB 7/13/11, effective 6/21/11; **ARC 9849B**, IAB 11/16/11, effective 12/21/11]

641—29.10(105) Reactivation of an inactive license.

29.10(1) An inactive license is not valid for practice but must be renewed in accordance with rule 641—29.7(105). If an inactive license has not been timely renewed and becomes lapsed, the requirements for reinstatement of the license must be met. A person with an inactive license that is not lapsed who is seeking to reactivate the license shall:

a. Submit a written request to the board office for active license status; and

b. Pay the fee for an active license in the amount specified in 641—Chapter 28.

29.10(2) A licensee whose license was reactivated during the current renewal compliance period may use continuing education credit earned during the compliance period for the first renewal period following reactivation.
[**ARC 3061C**, IAB 5/10/17, effective 6/14/17]

641—29.11(105) Review of applications.

29.11(1) Upon receipt of a completed application, the board executive officer or designee has discretion to:

a. Authorize the issuance of the license, certification, or examination application.

b. Refer the application to a committee of the board for review and consideration when the board executive officer determines that matters including, but not limited to, prior criminal history, chemical dependence, competency, physical or psychological illness, professional liability claims or settlements, professional disciplinary history, education or experience, are relevant in determining the applicant's qualifications for a license, certification, or examination.

29.11(2) Following review and consideration of an application referred by the board executive officer, the committee may at its discretion:

a. Authorize the issuance of the license, certification, or examination application.

b. Recommend to the board denial of the license, certification, or examination application.

c. Recommend to the board issuance of the license or certification under certain terms and conditions or with certain restrictions.

d. Refer the license, certification, or examination application to the board for review and consideration without recommendation.

29.11(3) Following review and consideration of a license, certification, or examination application referred by the committee, the board shall:

a. Authorize the issuance of the license, certification, or examination application;

b. Deny the issuance of the license, certification, or examination application; or

c. Authorize the issuance of the license or certification under certain terms and conditions or with certain restrictions.

29.11(4) The committee or board may require an applicant to appear for an interview before the committee or the full board as part of the application process.
[**ARC 3061C**, IAB 5/10/17, effective 6/14/17]

641—29.12(105) Grounds for denial of an application. The board may deny an application for license, certification, or examination for any of the following reasons:

1. Failure to meet the requirements for license, certification, or examination as specified in these rules.
2. Failure to provide accurate and truthful information, or the omission of material information.
3. Pursuant to Iowa Code section 105.22, upon any of the grounds for which licensure may be revoked or suspended.

This rule is intended to implement Iowa Code section 105.22.
[**ARC 3061C**, IAB 5/10/17, effective 6/14/17]

These rules are intended to implement Iowa Code sections 105.2, 105.5, 105.9, 105.18, 105.19, 105.20, 105.22 and 272C.3 and 2013 Iowa Acts, Senate File 427.

[Filed emergency 12/23/08 after Notice 11/5/08—published 1/14/09, effective 1/1/09]
[Filed Emergency After Notice ARC 8530B (Notice ARC 8362B, IAB 12/2/09), IAB 2/24/10, effective 1/26/10]
[Filed Emergency ARC 8783B, IAB 6/2/10, effective 5/10/10]
[Filed Emergency ARC 9604B, IAB 7/13/11, effective 6/21/11]
[Filed ARC 9849B (Notice ARC 9612B, IAB 7/13/11), IAB 11/16/11, effective 12/21/11]
[Filed ARC 0340C (Notice ARC 0043C, IAB 3/21/12), IAB 10/3/12, effective 11/7/12]
[Filed ARC 1220C (Notice ARC 0934C, IAB 8/7/13), IAB 12/11/13, effective 5/1/14][1]
[Editorial change: IAC Supplement 12/24/14][2]

[Filed ARC 3061C (Notice ARC 2903C, IAB 1/18/17), IAB 5/10/17, effective 6/14/17]

[1] May 1, 2014, effective date of ARC 1220C, Item 12 [rescission of 29.4(3)], delayed until the adjournment of the 2014 General Assembly by the Administrative Rules Review Committee at its meeting held January 10, 2014.

[2] 641—paragraph 29.2(4)*"d"* editorially reinstated IAC Supplement 12/24/14.

CHAPTER 30
CONTINUING EDUCATION FOR PLUMBING AND MECHANICAL SYSTEMS PROFESSIONALS

641—30.1(105) Definitions. For the purpose of these rules, the following definitions shall apply:

"Approved program/activity" means a continuing education program/activity meeting the standard set forth in these rules.

"Board" means the plumbing and mechanical systems board as established pursuant to Iowa Code section 105.3.

"Compliance review" means the selection by the board of licensees for verification of satisfactory completion of continuing education requirements during a specified continuing education compliance period.

"Continuing education" means planned, organized learning acts acquired during licensure designed to maintain, improve, or expand a licensee's knowledge and skills relevant to the enhancement of practice, education, or theory development to improve the safety and welfare of the public.

"Continuing education compliance period" means the period between renewals during which a licensee must obtain the requisite amount of continuing education in order to renew the licensee's license.

"Hour of continuing education" means at least 50 minutes spent in one sitting by a licensee in actual attendance at and in completion of an approved continuing education activity.

"Iowa mechanical code" means the most current version of the International Mechanical Code, as adopted and amended by the board.

"Iowa plumbing code" means the most current version of the Uniform Plumbing Code, as adopted and amended by the board.

"License" means a license to work in a specific discipline covered under Iowa Code chapter 105.

"Licensee" means any person licensed to work in a specific discipline covered under Iowa Code chapter 105.

[**ARC 8270B**, IAB 11/4/09, effective 10/16/09; **ARC 8475B**, IAB 1/13/10, effective 2/17/10; **ARC 1221C**, IAB 12/11/13, effective 1/15/14]

641—30.2(105) Continuing education requirements.

30.2(1) The continuing education compliance period shall begin on the license issue date and end on the license expiration date.

30.2(2) During each continuing education compliance period, each active or inactive master and journeyperson licensee must obtain the following amounts of continuing education:

a. Safety education. Each licensee holding a single license shall complete two hours, and each licensee holding multiple licenses shall complete four hours, of continuing education in the content area of the Iowa Occupational Safety and Health Act.

b. Code education.

(1) Each licensee holding one or more licenses or sublicenses in a mechanical discipline shall complete two hours of continuing education in the content area of the Iowa mechanical code.

(2) Each licensee holding a plumbing license or sublicense shall complete two hours of continuing education in the content area of the Iowa plumbing code.

c. Discipline education.

(1) A licensee holding a single plumbing license or sublicense, or a single license or sublicense in a mechanical discipline, shall complete four hours of continuing education in the discipline in which the licensee holds a license.

(2) A licensee holding multiple licenses or sublicenses shall complete eight hours of continuing education in the relevant disciplines.

d. Private school or college maintenance specialty license. For the purposes of this subrule, a private school or college routine maintenance specialty license shall be considered to be a sublicense of whatever discipline(s) in which the licensee actually practices.

e. An individual possessing one or more inactive special restricted licenses under 641—subrule 23.8(3) shall not be required to complete any continuing education hours for the special restricted license so long as the person remains actively licensed as an apprentice.

30.2(3) Up to one-half of board-approved continuing education required by subrule 30.2(2) each continuing education compliance period may be obtained through completion of computer-based continuing education programs/activities approved by the board.

30.2(4) It is the responsibility of each licensee to maintain a record of all continuing education courses attended and retain proof of compliance with the continuing education requirements.

30.2(5) It is the responsibility of each licensee to finance the cost of continuing education.

30.2(6) A licensee who is a presenter of a board-approved continuing education program may receive credit once per continuing education compliance period for the presentation of the program. The licensee may receive the same number of hours granted the attendees.

[**ARC 8270B**, IAB 11/4/09, effective 10/16/09; **ARC 8475B**, IAB 1/13/10, effective 2/17/10; **ARC 9605B**, IAB 7/13/11, effective 6/21/11; **ARC 9850B**, IAB 11/16/11, effective 12/21/11; **ARC 1221C**, IAB 12/11/13, effective 1/15/14; **ARC 3061C**, IAB 5/10/17, effective 6/14/17]

641—30.3(105) Continuing education programs/activities.

30.3(1) *Standards for continuing education programs/activities.* A program/activity is appropriate for continuing education credit if the program/activity meets all of the following criteria:

a. Is board-approved;

b. Constitutes an organized program of learning that contributes directly to the professional competency of the licensee;

c. Pertains to subject matters that integrally relate to the practice of the discipline;

d. Is conducted by individuals who have obtained board approval as required under subrule 30.4(1). This criterion shall not be required for computer-based continuing education programs/activities conducted pursuant to subrule 30.2(3);

e. Fulfills stated program goals, objectives, or both; and

f. Covers product knowledge, methods, and systems of one or more of the following:

(1) The theory and technique for a specific discipline;

(2) The current Iowa plumbing code, Iowa mechanical code, or both;

(3) The standards comprising the current Iowa Occupational Safety and Health Act.

30.3(2) *Board approval.* Board approval for specific programs/activities under paragraph 30.3(1)*"a"* shall be valid for three years.

30.3(3) *Procedure and standards for board approval of continuing education programs/activities.*

a. For non-computer-based continuing education programs/activities, an individual or entity seeking board approval shall:

(1) File an application in the form prescribed by the board without alteration at least 60 days prior to the first scheduled course date;

(2) Attach a copy of the course or activity outline or syllabus which, at a minimum, specifically identifies the course content and a breakdown of the student contact hours; and

(3) Attach a schedule of courses, if known, which indicates the course's or activity's proposed scheduled locations, dates, and times.

b. For computer-based continuing education programs/activities, an individual or entity seeking board approval shall:

(1) File an application in the form prescribed by the board without alteration;

(2) Attach a copy of the course or activity outline or syllabus which, at a minimum, specifically identifies the course content and a breakdown of the student contact hours;

(3) Attach a schedule of courses, if known, which indicates the course's or activity's proposed scheduled locations, dates, and times;

(4) Provide a brief summary of the training product;

(5) Provide a copy of the CD-ROM, DVD, visual aids, or other materials included with the course or activity; and

(6) Provide the names, contact information, and qualifications or résumés of the training designers.

30.3(4) *Board member attendance.* With board approval, board members may attend any board-approved continuing education program/activity for purposes of determining whether the continuing education program/activity complies with these rules. In the event a board member attends a board-approved continuing education program/activity with the purpose of determining whether the continuing education program/activity complies with these rules, the board member may not receive any continuing education credit for those hours in attendance.

[**ARC 8270B**, IAB 11/4/09, effective 10/16/09; **ARC 8475B**, IAB 1/13/10, effective 2/17/10; **ARC 9605B**, IAB 7/13/11, effective 6/21/11; **ARC 9850B**, IAB 11/16/11, effective 12/21/11]

641—30.4(105) Course instructor(s).

30.4(1) *Procedure and standards for board approval of instructors.* An individual seeking board approval to instruct continuing education programs/activities shall:

a. File an application in the form prescribed by the board without alteration;

b. Attach copies of documents, licensures, degrees, and other materials demonstrating compliance with the requirements for the type of continuing education program/activity as set forth below.

(1) If seeking approval to instruct in the content area of the Iowa Occupational Safety and Health Act, an individual must either possess and maintain a current Occupational Safety and Health Act 500, 501, 502, or 503 card or completion certificate, or both, or possess a current train-the-trainer or instructor card or other certification or safety-related degree or diploma issued by the American Heart Association, American Red Cross, National Safety Council, Board of Certified Safety Professionals, or board-approved equivalent.

(2) If seeking approval to instruct in the content area of the Iowa plumbing code or Iowa mechanical code, or both, an individual must:

1. Possess a current license issued by the board at the journey or master level in the applicable discipline under that code,

2. Possess a current license as a professional engineer under Iowa Code chapter 542B,

3. Present evidence of having taught at least eight contact hours in the applicable code within the last three years,

4. Possess a current inspector or plans examiner certificate issued by a code body in the discipline, or

5. Demonstrate equivalent specialized education or training.

(3) If seeking approval to instruct in the content area of a practice discipline, an individual must:

1. Possess a current license issued by the board at the journey or master level in the applicable discipline,

2. Possess a current license as a professional engineer under Iowa Code chapter 542B,

3. Provide evidence of employment as a product representative with manufacturer training,

4. Present evidence of having taught at least eight contact hours in the applicable discipline within the last year, or

5. Demonstrate equivalent specialized education or training.

30.4(2) *Board approval.* Board approval for an instructor under subrule 30.4(1) shall be valid for three years.

[**ARC 8270B**, IAB 11/4/09, effective 10/16/09; **ARC 8475B**, IAB 1/13/10, effective 2/17/10; **ARC 9605B**, IAB 7/13/11, effective 6/21/11; **ARC 9850B**, IAB 11/16/11, effective 12/21/11]

641—30.5(105) Compliance review of continuing education requirements. The board may conduct a review of a licensee's license renewal application to determine compliance with continuing education requirements.

30.5(1) Upon board request, the licensee must submit to the board an individual certificate of completion issued to the licensee or evidence of successful completion of the course from the course sponsor or course instructor. These documents must contain the course title, date(s), contact hours, sponsor's name, and licensee's name. In some instances, licensees will be requested to provide to the

board additional information including, but not limited to, program content, objectives, presenters, location, and schedule. An inclusive brochure may meet this requirement.

30.5(2) Upon board request, a licensee must submit all information set forth in subrule 30.5(1) within 30 calendar days following the board's request. The board may grant extensions on an individual basis.

30.5(3) If the submitted materials are incomplete or unsatisfactory and the board determines that the deficiency was the result of good-faith conduct on the part of the licensee, the licensee may be given the opportunity to submit make-up credit to cover the deficit found through the audit. A licensee must complete the continuing education hours and submit documentation establishing completion of the required make-up continuing education hours to the board within 120 calendar days from the date of the board's finding of good-faith conduct.

30.5(4) A licensee's failure to provide the board with an accurate mailing address shall not be an excuse for noncompliance with any requirement set forth in this rule.

[**ARC 8270B**, IAB 11/4/09, effective 10/16/09; **ARC 8475B**, IAB 1/13/10, effective 2/17/10; **ARC 1221C**, IAB 12/11/13, effective 1/15/14]

641—30.6(105) Continuing education exemptions.

30.6(1) *Automatic exemptions.* A licensee shall be exempt from the continuing education requirement during the continuing education compliance period when that person:

a. Served honorably on active duty in the military service; or

b. Resided in another state or district having continuing education requirements for the discipline and met all requirements of that state or district for practice therein; or

c. Was a government employee working in the licensee's specialty and assigned to duty outside the United States; or

d. Was absent from the state but engaged in active practice under circumstances which are approved by the board; or

e. Obtained a journeyperson license by examination provided that the licensee maintains the same renewal date as the licensee's apprentice license. This automatic exemption shall only apply to the licensee's first renewal of the journeyperson license.

f. Obtained a specialty, journeyperson, or master license with less than one year remaining in the continuing education compliance period. This exemption shall apply only to the licensee's first renewal of that license and only to each license that was issued with less than one year remaining in the continuing education compliance period.

g. Possesses an inactive specialty license under 641—subrule 23.8(3) and is also actively licensed as an apprentice.

30.6(2) *Permissive exemptions.* The board may, in cases involving exceptional hardship or extenuating circumstances, grant an exemption from some or all of the continuing education requirements.

a. A licensee seeking a permissive exemption shall apply to the board, in such form as the board may prescribe.

b. A licensee seeking a permissive exemption shall be required to provide all such documentary evidence as the board may request to establish the exceptional hardship or extenuating circumstances.

c. In the event of a claimed physical or mental disability or illness, the board may request information from a licensed health care professional who can attest to the existence of any such disability or illness.

d. A licensee who applies for a permissive exemption shall be notified in writing of the board's decision.

e. In granting an exemption, the board may impose any such additional conditions on the exemption including, but not limited to, the requirement that the licensee make up a portion of the continuing education requirements.

f. In lieu of granting a full or partial exemption, the board may grant the licensee an extension of time in which to complete the continuing education requirements.

g. The granting of an exemption shall not prohibit a licensee from seeking, or the board from granting, an exemption in a subsequent biennial continuing education compliance period(s).

h. Permissive exemptions shall only be granted in the most exceptional and extraordinary of circumstances.

[**ARC 8270B**, IAB 11/4/09, effective 10/16/09; **ARC 8475B**, IAB 1/13/10, effective 2/17/10; **ARC 9605B**, IAB 7/13/11, effective 6/21/11; **ARC 9850B**, IAB 11/16/11, effective 12/21/11; **ARC 3061C**, IAB 5/10/17, effective 6/14/17]

641—30.7(105) Continuing education extensions. The board may, in individual cases involving hardship or extenuating circumstances, grant an extension of time within which to fulfill the minimum continuing education requirements.

30.7(1) Hardship or extenuating circumstances include documented circumstances beyond the control of the licensee which prevent attendance at required activities.

30.7(2) All requests for extension must be made prior to the license expiration date.

[**ARC 8270B**, IAB 11/4/09, effective 10/16/09; **ARC 8475B**, IAB 1/13/10, effective 2/17/10]

641—30.8(105) Continuing education reporting requirements.

30.8(1) *Non-computer-based continuing education programs/activities.* For non-computer-based continuing education programs/activities, at the conclusion of each continuing education course, the course instructor shall:

a. Inform each attending licensee that a survey of the course and instructor may be completed and submitted by the licensee to the board through either a board-approved written evaluation form or an Internet-based form.

b. Provide a certificate of completion to each licensee who attends the course. The certificate of completion shall include the following information:

(1) The licensee's full name and board-issued license number;
(2) The course name or title;
(3) The board-approved course identification number;
(4) The date of the course;
(5) The number of program contact hours;
(6) The instructor's full name and board-approved identification number; and
(7) The instructor's signature.

c. Submit to the board a typed or electronic course completion roster within 30 days following the completion of the course. The course completion roster shall contain the following information:

(1) The full name and board-issued license number of each attending licensee;
(2) The course name or title;
(3) The board-approved course identification number;
(4) The date of the course;
(5) The location of the course;
(6) The number of program contact hours;
(7) The instructor's full name and board-approved identification number; and
(8) The instructor's signature.

30.8(2) *Computer-based continuing education programs/activities.* For computer-based continuing education programs/activities under subrule 30.2(3), at the conclusion of each computer-based continuing education course, the person authorized to monitor and verify attendance/course completion shall:

a. Provide a certificate of completion to each licensee who completes the course. The certificate of completion shall include the following information:

(1) The licensee's full name and board-issued license number;
(2) The course name or title;
(3) The board-approved course identification number;
(4) The date the course was completed; and
(5) The number of program contact hours.

b. Submit to the board a typed or electronic course completion roster within 30 days following a licensee's completion of a computer-based continuing education course. The course completion roster shall contain the following information:

(1) The full name and board-issued license number of each attending licensee;
(2) The course name or title;
(3) The board-approved course identification number;
(4) The date of the course;
(5) The location of the course; and
(6) The number of program contact hours.

[**ARC 8270B**, IAB 11/4/09, effective 10/16/09; **ARC 8475B**, IAB 1/13/10, effective 2/17/10]

These rules are intended to implement Iowa Code chapters 105 and 272C and 2013 Iowa Acts, Senate File 427.

[Filed Emergency ARC 8270B, IAB 11/4/09, effective 10/16/09]
[Filed ARC 8475B (Notice ARC 8268B, IAB 11/4/09), IAB 1/13/10, effective 2/17/10]
[Filed Emergency ARC 9605B, IAB 7/13/11, effective 6/21/11]
[Filed ARC 9850B (Notice ARC 9613B, IAB 7/13/11), IAB 11/16/11, effective 12/21/11]
[Filed ARC 1221C (Notice ARC 0933C, IAB 8/7/13), IAB 12/11/13, effective 1/15/14]
[Filed ARC 3061C (Notice ARC 2903C, IAB 1/18/17), IAB 5/10/17, effective 6/14/17]

MEDICINE BOARD[653]

[Prior to 5/4/88, see Health Department[470], Chs 135 and 136, renamed Medical Examiners Board[653] under the "umbrella" of Public Health Department[641] by 1986 Iowa Acts, ch 1245]
[Prior to 7/4/07, see Medical Examiners Board[653]; renamed by 2007 Iowa Acts, Senate File 74]

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653—21.1(148,272C) Ineligibility determinants. A physician with an active permanent, special, or temporary Iowa license who is actively engaged in the practice of medicine in Iowa may supervise a physician assistant. A physician is ineligible to supervise a physician assistant for any of the following reasons:

21.1(1) The physician does not hold an active, permanent, special or temporary Iowa medical license.

21.1(2) The physician is subject to a disciplinary order of the board that restricts or rescinds the physician's authority to supervise a physician assistant. The physician may supervise a physician assistant to the extent that the order allows.

653—21.2(148,272C) Exemptions from this chapter. This chapter shall not apply to the following:

21.2(1) A physician working in a federal facility or under federal authority when the provisions of this chapter conflict with federal regulations.

21.2(2) A physician who supervises a physician assistant providing medical care created by an emergency or a state or local disaster pursuant to Iowa Code section 148C.4 as amended by 2003 Iowa Acts, chapter 93, section 10.

653—21.3(148) Board notification. A physician who supervises a physician assistant shall notify the board of the supervisory relationship at the time of the physician's license renewal.

653—21.4(148,272C) Grounds for discipline. A physician may be subject to disciplinary action for supervising a physician assistant in violation of these rules or the rules found in 653—Chapter 23 or 645—Chapters 326 and 327, which relate to duties and responsibilities for physician supervision of physician assistants. Grounds for discipline also include:

21.4(1) The physician supervises a physician assistant when the physician does not have sufficient training or experience to supervise a physician assistant in the area of medical practice in which a physician assistant is to be utilized.

21.4(2) A physician supervises more than five physician assistants at the same time.

21.4(3) The physician fails to ensure that the physician assistant is adequately supervised, including being available in person or by telecommunication to respond to the physician assistant.

[**ARC 0870C**, IAB 7/24/13, effective 8/28/13; **ARC 2532C**, IAB 5/11/16, effective 6/15/16; see Rescission note at end of chapter]

653—21.5(148,272C) Disciplinary sanction. The board may restrict or rescind a physician's authority to supervise a physician assistant as part of a disciplinary sanction following a contested case proceeding, if the reason for the disciplinary action impacts the ability of the physician to supervise a physician assistant. The board shall notify the board of physician assistants when it takes a disciplinary action against a physician's license that affects the physician's authority to supervise a physician assistant.

[**ARC 2532C**, IAB 5/11/16, effective 6/15/16; see Rescission note at end of chapter]

653—21.6(148,272C) Communication with physician assistant supervisees. The physician shall notify all physician assistant supervisees within one workday upon receiving disciplinary action from the board or any other change in status that affects the physician's eligibility to supervise a physician assistant.

[**ARC 2532C**, IAB 5/11/16, effective 6/15/16; see Rescission note at end of chapter]

653—21.7(17A,147,148,272C) Waiver or variance requests. Waiver or variance requests shall be submitted in conformance with 653—Chapter 3.

[**ARC 2532C**, IAB 5/11/16, effective 6/15/16; see Rescission note at end of chapter]

These rules are intended to implement Iowa Code sections 148.13 and 272C.3.

[Filed 1/4/89, Notice 11/16/88—published 1/25/89, effective 3/1/89][123]

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[Filed emergency 3/9/04—published 3/31/04, effective 3/9/04]
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[Filed ARC 2532C (Notice ARC 2372C, IAB 1/20/16), IAB 5/11/16, effective 6/15/16][6]

1 Effective date of 3/1/89 delayed 70 days by Administrative Rules Review Committee at its February 13, 1989, meeting.

2 Effective date of 3/1/89 delayed until adjournment of the 1990 Session of the General Assembly at its May 9, 1989, meeting.

3 Delay until adjournment of the 1990 G.A. lifted by the Administrative Rules Review Committee at its August 3, 1989, meeting which allowed the rules to become effective August 4, 1989.

4 Effective date of 4/17/96 delayed 70 days by the Administrative Rules Review Committee at its meeting held April 16, 1996. Effective date delayed until adjournment of the 1997 General Assembly by the Administrative Rules Review Committee at its meeting held June 11, 1996.

5 Effective date of 1/28/04 delayed 70 days by the Administrative Rules Review Committee at its January 6, 2004, meeting; at its meeting held March 8, 2004, the Committee lifted the delay, effective March 9, 2004.

6 Amendments to ch 21 in ARC 2532C, which included the renumbering of 21.4 to 21.7 as 21.5 to 21.8 (Item 1), the adoption of new 21.4 (Item 2), and the amendment to the implementation sentence (Item 3), rescinded by 2017 Iowa Acts, House File 591, section 2, paragraph *"a,"* on 4/12/17 and, pursuant to paragraph *"b,"* prior language restored IAC Supplement 5/10/17.

CONSTRUCTION—REGISTRATION AND BONDING

CHAPTER 150
CONSTRUCTION CONTRACTOR REGISTRATION

[Prior to 10/21/98, see 347—Ch 150]

875—150.1(91C) Scope. This chapter implements Iowa Code chapter 91C. The rules in this chapter apply to all construction contractors, except for a person who earns less than $2,000 annually or who performs work or has work performed on the person's own property.

875—150.2(91C) Definitions.

"Commissioner" means the labor commissioner of the division of labor services of the workforce development department or the commissioner's designee.

"Construction" means new work, additions, alterations, reconstruction, installations, repairs and demolitions. Construction activities are generally administered or managed from a relatively fixed place of business, but the actual construction work is performed at one or more different sites which may be dispersed geographically. Examples of construction activities, adopted by reference, are in 871—23.82(96) for purposes of the Iowa employment security law. For work on structures that are both located in an area that is subject to a disaster emergency proclamation pursuant to Iowa Code section 29C.6 and damaged by circumstances related to those that caused the disaster emergency proclamation, "construction" includes asbestos abatement.

"Contractor" means a person who engages in the business of construction as the term is defined in 871—23.82(96), for purposes of the Iowa employment security law, including subcontractors and special trade contractors. Also included are persons who conduct or perform construction on an incidental or occasional basis, regardless of whether the person is classified as being engaged in construction by the unemployment insurance services division of the workforce development department.

"Division" means the division of labor services of the workforce development department.

"File" means deliver to the division.

"Out-of-state contractor" means a contractor whose principal place of business is in another state, and who contracts to perform construction in this state.

"Principal place of business" means the state in which a substantial part of the contractor's business is transacted and from which the centralized supervision is exercised. Factors to be reviewed include:

1. State designated as home office on documents filed with governmental agencies.
2. State where payroll is prepared.
3. State where business transactions are performed.
4. State where officers, owners, or partners reside and work.
5. State in which bank accounts are located.
6. State in which fixed business property is located.
7. State where management decisions are made.

"Same phase of construction" means in the same type of construction operations or trade, such as, but not limited to, electrical work; masonry, stonework, tile setting and plastering; roofing; sheet metal work; excavation work; concrete work; glasswork; painting, paper hanging and decorating; plumbing, heating and air conditioning work; carpentry work; and miscellaneous special trade contractors.

"Working days" means Mondays through Fridays but shall not include Saturdays, Sundays or federal or state holidays. In computing 15 working days, the day of receipt of any notice shall not be included, and the last day of the 15 working days shall be included.

[**ARC 8812B**, IAB 6/2/10, effective 7/1/10; **ARC 8984B**, IAB 8/11/10, effective 9/15/10]

875—150.3(91C) Registration required. Before performing any construction work in this state, a contractor shall be registered with the division. A joint venture is an independent entity and shall be registered independently.

875—150.4(91C) Application. A contractor that is covered by the license requirements of Iowa Code chapter 105 shall apply for a contractor registration number by using the application system of the

Iowa plumbing and mechanical systems board. All other contractors shall file an application with the division on forms provided by the division. The application shall contain the applicable information and documents specified in this rule.

150.4(1) *Name.* The name of the contractor.

150.4(2) *Place of business.* The complete mailing address of the principal place of business of the contractor.

150.4(3) *Telephone number.* The business telephone number of the contractor.

150.4(4) *Business classification.* The type of business entity of the contractor (i.e., corporation, partnership, sole proprietorship, trust, etc.).

150.4(5) *Ownership information.*

a. If the contractor is a corporation, the name, address, telephone number, and position of each officer of the corporation.

b. If the contractor is other than a corporation, the name, address, and telephone number of each owner.

150.4(6) *Workers' compensation coverage information.*

a. A certificate of insurance from the insurer showing proof of workers' compensation insurance, the effective dates of coverage, and listing the division of labor as a certificate holder;

b. Employer's release from the insurance requirements under workers' compensation law form provided to self-insured employers by the commissioner of insurance under Iowa Code section 87.11; or

c. A statement that the contractor is not required to carry workers' compensation coverage.

150.4(7) *Account number.* The employer account number issued by the unemployment insurance services division of the workforce development department before the contractor applies for a contractor registration number.

150.4(8) *Business description.* A description of the business to include:

a. The employer's North American Industry Classification System (NAICS) code; or

b. The principal products and services provided.

150.4(9) *Fee or fee exemption.* A contractor who is eligible to register without paying a fee shall submit a completed fee exemption form. All other contractors must submit the nonrefundable fee as set forth below.

a. The standard fee is $50 per year.

b. Contractors who apply for a contractor registration number through the Iowa plumbing and mechanical systems board must pay a fee that is prorated in accordance with the length of the registration period.

150.4(10) *Social security number.* The contractor, if a natural person, shall include the contractor's social security number.

150.4(11) *Out-of-state contractor bond.* An out-of-state contractor shall:

a. File a surety bond in the amount of $25,000 for a one-year period that is prepared using the bond form provided by the division, or

b. Provide a copy of a letter from the Iowa department of transportation stating that the contractor is prequalified to bid on projects for the department of transportation pursuant to Iowa Code section 314.1.

[**ARC 8812B**, IAB 6/2/10, effective 7/1/10; **ARC 8984B**, IAB 8/11/10, effective 9/15/10; **ARC 3059C**, IAB 5/10/17, effective 6/14/17]

875—150.5(91C) Amendments to application.

150.5(1) A contractor shall report to the commissioner any change in the information originally reported on or with the application within 15 working days of the change, except that the contractor shall notify the commissioner of changes to workers' compensation coverage within ten days prior to any change in coverage.

150.5(2) After the time specified in subrule 150.5(1), with good cause shown the commissioner may determine that an amendment may be made to correct an application.

150.5(3) Amendments to applications shall not be permitted where a change occurs in the business classification, such as, but not limited to, a change from a sole proprietorship to a corporation.

875—150.6(91C) Fee.

150.6(1) *New applications.* A new application deposited in the U.S. mail shall be accompanied by the fee effective on the date the application is postmarked. A new application delivered in any other manner shall be accompanied by the fee effective on the date the application is received by the division.

150.6(2) *Renewal applications.* A timely renewal application shall be accompanied by the fee effective on the expiration date of the contractor's expiring registration. An application for renewal deposited in the U.S. mail after the expiration date of the contractor's expiring registration shall be accompanied by the fee effective on the date the application is postmarked. An application for renewal delivered to the division in a manner other than U.S. mail and after the expiration date of the contractor's expiring registration shall be accompanied by the fee effective on the date the application is received by the division.

150.6(3) *Fee exemption.* Rescinded IAB 5/10/17, effective 6/14/17.

150.6(4) *Amendments to applications.* A fee is not required for a permissible amendment to an application.

[**ARC 7876B**, IAB 6/17/09, effective 7/1/09; **ARC 8035B**, IAB 8/12/09, effective 9/16/09; **ARC 3059C**, IAB 5/10/17, effective 6/14/17]

875—150.7(91C) Registration number issuance. Within 30 days of receipt of a completed application, the commissioner will issue to the contractor a registration number. The registration number will consist of the letter "C" followed by six unique digits.

875—150.8(91C) Workers' compensation insurance cancellation notifications.

150.8(1) *Insurance company coverage.* The division shall be notified by the insurance company carrying the contractor's workers' compensation insurance at the time of cancellation. The notice shall contain:

a. The name of the insurance carrier;

b. The name of the insured contractor; and

c. The date the workers' compensation coverage cancellation is effective.

150.8(2) *Self-insured contractors.* The contractor shall notify the division ten days prior to any cessation in self-insurance.

150.8(3) *Noninsured contractors.* The contractor shall notify the division whenever the required notice is not posted or in any change in insurance status.

875—150.9(91C) Investigations and complaints.

150.9(1) *Investigations.* Investigations may take many forms to determine if there is compliance with the law. Investigations shall take place at the times and in the places as the commissioner may direct. The commissioner may interview persons at the work site and utilize other reasonable investigatory techniques. The conduct of the investigation shall be such as to preclude unreasonable disruption of the operations of the work site. Investigations may be conducted without prior notice by correspondence, telephone conversations, or review of materials submitted to the division. At the initiation of an investigation at the contractor's establishment, the investigator shall present credentials, explain the nature and purpose of the investigation, and seek the consent of the owner, operator or agent in charge of the establishment. In the event the investigator is not permitted to fully conduct an investigation, the commissioner may seek an administrative warrant, if necessary.

150.9(2) *Complaints.* Complaints in which the complainant provides a name and address made to the commissioner in writing shall receive a written response as to the results of the investigation. A complainant's name and other identifying information shall not be released if the complaint was included as a part of another complaint where the complainant's identity would be protected under other statutes or rules (i.e., a complaint filed under both Iowa Code chapters 88 and 91C).

875—150.10(91C) Citations/penalties and appeal hearings.

150.10(1) *Citations.* The commissioner shall issue a citation to a contractor where an investigation reveals the contractor has violated:

a. The requirement that the contractor be registered;

b. The requirement that the contractor's registration information be substantially complete and accurate; or

c. The requirement that an out-of-state contractor file a bond with the division.

150.10(2) *Penalties.* If a citation is issued, the commissioner shall notify the contractor by certified mail of the proposed administrative penalty, if any. The administrative penalties shall be not more than $500 in the case of the first violation and not more than $5,000 per violation in the case of a second or subsequent violation. In proposing a penalty, due consideration will be given to knowledge of the alleged violation, knowledge of requirements of the law, and nature and extent of the alleged violation.

150.10(3) *Appeal.* The contractor shall have 15 working days within which to file a notice of contest of the citation or proposed penalty. The notice of contest shall be filed with the commissioner who shall forward it to the employment appeal board.

150.10(4) *Appeal procedures.* The rules of procedure of the employment appeal board shall apply to administrative hearings on citations and penalties.

875—150.11(91C) Revocation of registrations and appeal hearings.

150.11(1) *Reason for revocation.* The commissioner shall seek revocation of a contractor's registration where an investigation reveals the contractor failed to meet the conditions of registration at the time of issuance or no longer meets the conditions.

150.11(2) *Notice of revocation.* The commissioner shall serve a notice of intent to revoke on the contractor by personal service or by restricted certified mail to the address listed in the application or by other service as permitted in the Iowa Rules of Civil Procedure. The notice shall set the time for a fact-finding hearing conducted in accordance with Iowa Code chapter 17A.

150.11(3) *Hearing.* The purpose of the fact-finding hearing is to ensure the contractor is not in compliance before the registration is revoked. All hearings shall be held in the offices of the division. A telephone interview may be conducted upon request.

150.11(4) *Hearing procedures.* Administrative hearing rules at 875—Chapter 1 shall be applicable to the fact-finding hearings.

150.11(5) *Decision.* The commissioner shall serve the decision on the contractor by certified mail to the address listed on the application or to another address provided by the contractor. If the certified mail is returned unclaimed or undelivered, the commissioner shall send the decision to the address by first-class mail.

150.11(6) *Effective date of revocation.* Revocations shall become effective 21 days after certified mailing of the decision.

150.11(7) *Suspension.* The division and the commissioner find the public health, safety or welfare imperatively requires emergency action where a construction contractor fails to maintain compliance with the laws of this state relating to workers' compensation as required in subrule 150.4(6) due to the financial impact upon the public and any worker who might be injured. Therefore, a construction contractor's registration may be suspended effective upon issuance of the subrule 150.11(2) notice of revocation. Upon application showing good cause and proof of compliance with the workers' compensation laws as required in subrule 150.4(6), the commissioner may alter the finding and temporarily reinstate a registration number pending hearing on the revocation. In cases of suspension pending a revocation hearing, the hearing shall be instituted and determined promptly.

150.11(8) *Appeal.* The contractor shall have 15 working days from receipt of the decision issued pursuant to subrule 150.11(5) to file a notice of contest of decision. The notice of contest shall be filed with the commissioner who shall forward it to the employment appeal board.

150.11(9) *Appeal procedures.* The rules of procedure of the employment appeal board shall apply to appealed decisions.

150.11(10) *Effect of revocation.* A contractor whose registration is revoked may reapply for a new registration number if all requirements for registration eligibility are met.

150.11(11) *Relinquishing registration certificate.* A contractor shall return the original registration certificate to the division when a revocation or suspension becomes final.

875—150.12(91C) Concurrent actions. Actions under rules 875—150.10(91C) and 150.11(91C) may proceed at the same time against a contractor.

875—150.13(91C) Out-of-state contractor bonds. Rescinded IAB 6/2/10, effective 7/1/10.

875—150.14(91C) Project bonds. Rescinded IAB 6/2/10, effective 7/1/10.

875—150.15(91C) Blanket bonds. Rescinded IAB 6/2/10, effective 7/1/10.

875—150.16(91C) Bond release.

150.16(1) *Notifications.* Prior to releasing a bond, the commissioner will notify the department of revenue, the unemployment insurance services division of the workforce development department, and applicable state subdivisions of the intent to release the bond. The commissioner shall provide ten days for the filing of objections to the release of the bond. The commissioner may deem any failure to respond to the notice within the time provided as an approval of the release.

150.16(2) *Conditions for release.* A bond shall not be released until the contractor has made payment of all taxes, including contributions due under the unemployment compensation insurance system, penalties, interest, and fees, which may accrue to the state of Iowa or its subdivisions on account of the execution and performance of the contract or approval for the release is obtained from the appropriate agencies.

These rules are intended to implement Iowa Code chapter 91C as amended by 2010 Iowa Acts, House File 2522.

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◊ Two or more ARCs

1 Effective date (2/15/89) delayed 70 days by the Administrative Rules Review Committee at its January 5, 1989, meeting.