

court appointed special advocate, guardian ad litem, service providers, and other persons knowledgeable about the child.

3. **DUTIES.** A transition committee shall review and approve the written plan of services required for the child's case permanency plan in accordance with section 232.2, subsection 4, paragraph "F", which, based upon an assessment of the child's needs, would assist the child in preparing for the transition from foster care to adulthood. In addition, a transition committee shall identify and act to address any gaps existing in the services or other support available to meet the child and adult needs of individuals for whom service plans are approved.

Approved May 9, 2003

CHAPTER 118

MEDICAL ASSISTANCE — HOME AND COMMUNITY-BASED SERVICES WAIVERS

H.F. 560

AN ACT relating to medical assistance home and community-based services waivers.

Be It Enacted by the General Assembly of the State of Iowa:

Section 1. Section 249A.12, Code 2003, is amended by adding the following new subsection:

NEW SUBSECTION. 6. a. Effective July 1, 2003, the provisions of the home and community-based services waiver for persons with mental retardation shall include adult day care, prevocational, and transportation services. Transportation shall be included as a separately payable service.

b. The department of human services shall seek federal approval to amend the home and community-based services waiver for persons with mental retardation to include day habilitation services. Inclusion of day habilitation services in the waiver shall take effect upon receipt of federal approval and no later than July 1, 2004.

c. The person's county of legal settlement shall pay for the nonfederal share of the cost of services provided under the waiver and the state shall pay for the nonfederal share of such costs if the person does not have a county of legal settlement.

Sec. 2. **NEW SECTION.** 249A.32 MEDICAL ASSISTANCE HOME AND COMMUNITY-BASED SERVICES WAIVERS — CONSUMER DIRECTED ATTENDANT CARE — TERMINATION OF CONTRACT.

1. A case manager for a medical assistance home and community-based services waiver may terminate the contract of a person providing consumer directed attendant care services to whom payment is being made for provision of such services under the waiver if the case manager determines that the person has breached the contract by not providing the services agreed to under the contract.

2. For the purposes of this section, "consumer" and "waiver" mean consumer and waiver as defined in section 249A.29.

Sec. 3. **REIMBURSEMENT — REVIEW — RATE LIMITATIONS.**

1. The department of human services shall review the reimbursement methodology for the home and community-based services waiver for persons with mental retardation under the medical assistance program in relationship to the goals and objectives of the mental health and

developmental disability services system redesign being conducted by the mental health and developmental disabilities commission. The department shall submit a report of the findings of the review and recommendations to the general assembly by July 1, 2004.

2. For the fiscal year beginning July 1, 2003, the department of human services in cooperation with the Iowa state association of counties and the Iowa association of community providers shall establish payment rate limitations for the services provided under the home and community-based services waiver for persons with mental retardation that are consistent with the limitations used for the same or similar services that are funded one hundred percent by the counties.

Sec. 4. EMERGENCY RULES. The department of human services shall adopt administrative rules under section 17A.4, subsection 2, and section 17A.5, subsection 2, paragraph "b", to implement the provisions of this Act and the rules shall become effective immediately upon filing or on a later effective date specified in the rules, unless the effective date is delayed by the administrative rules review committee. Any rules adopted in accordance with this section shall not take effect before the rules are reviewed by the administrative rules review committee. The delay authority provided to the administrative rules review committee under section 17A.4, subsection 5, and section 17A.8, subsection 9, shall be applicable to a delay imposed under this section, notwithstanding a provision in those sections making them inapplicable to section 17A.5, subsection 2, paragraph "b". Any rules adopted in accordance with the provisions of this section shall also be published as notice of intended action as provided in section 17A.4.

Approved May 9, 2003

CHAPTER 119

PROPERTY INSURANCE ACCESS REGULATION

H.F. 599

AN ACT relating to property insurance, including establishment of a mandatory plan to assure fair access to insurance requirements, and providing for an effective date and retroactive applicability.

Be It Enacted by the General Assembly of the State of Iowa:

Section 1. NEW SECTION. 515F.30 SHORT TITLE.

This division may be cited as the "Fair Access to Insurance Requirements Plan Act", or the "FAIR Plan Act".

Sec. 2. NEW SECTION. 515F.31 PURPOSE.

The purposes of this division include all of the following:

1. To make basic property insurance available to qualified applicants with the least possible administrative detail and expense.
2. To establish a plan, an industry placement facility and a joint reinsurance association for the equitable distribution and placement of risks among insurers.
3. To utilize fully the voluntary insurance market as a source of essential property insurance.
4. To encourage the delivery of basic property insurance at the most reasonable cost