225C.61 County of residence — services to residents — service authorization appeals — disputes between counties or regions.

- 1. For the purposes of this section, unless the context otherwise requires:
- a. "County of residence" means the county in this state in which, at the time a person applies for or receives services, the person is living and has established an ongoing presence with the declared, good faith intention of living in the county for a permanent or indefinite period of time. The county of residence of a person who is a homeless person is the county where the homeless person usually sleeps. A person maintains residency in the county or state in which the person last resided while the person is present in another county or this state receiving services in a hospital, a correctional facility, a halfway house for community-based corrections or substance use disorder treatment, a nursing facility, an intermediate care facility for persons with an intellectual disability, or a residential care facility, or for the purpose of attending a college or university.
 - b. "Homeless person" means the same as defined in section 48A.2.
 - c. "Mental health professional" means the same as defined in section 228.1.
- d. "Person" means a person who is a United States citizen or a qualified alien as defined in 8 U.S.C. §1641.
- 2. If a person appeals a decision regarding a service authorization or other services-related decision made by a regional administrator that cannot be resolved informally, the appeal shall be heard in a contested case proceeding by a state administrative law judge. The administrative law judge's decision shall be considered final agency action under chapter 17A
- 3. If a service authorization or other services-related decision made by a regional administrator concerning a person varies from the type and amount of service identified to be necessary for the person in a clinical determination made by a mental health professional and the mental health professional believes that failure to provide the type and amount of service identified could cause an immediate danger to the person's health or safety, the person may request an expedited review of the regional administrator's decision to be made by the department. An expedited review held in accordance with this subsection is subject to the following procedures:
- a. The request for the expedited review shall be filed within five business days of receiving the notice of decision by the regional administrator. The request must be in writing, plainly state the request for an expedited review in the caption and body of the request, and be supported by written documentation from the mental health professional who made the clinical determination stating how the notice of decision on services could cause an immediate danger to the person's health or safety.
- b. The expedited review shall be performed by a designee of the director who is a mental health professional and is free of any conflict of interest to perform the expedited review. The expedited review shall be performed within two business days of the time the request is filed. If the reviewer determines the information submitted in connection with the request is inadequate to perform the review, the reviewer shall request the submission of additional information and the review shall be performed within two business days of the time that adequate information is submitted. The regional administrator and the person, with the assistance of the mental health professional who made the clinical determination, shall each provide a brief statement of facts, conclusions, and reasons for the decision made. Supporting clinical information shall also be attached. All information related to the proceedings and any related filings shall be considered to be mental health information subject to chapter 228.
- c. The director's designee shall issue an order, including a brief statement of findings of fact, conclusions of law, and policy reasons for the order, to justify the decision made concerning the expedited review. If the decision concurs with the contention that there is an immediate danger to the person's health or safety, the order shall identify the type and amount of service which shall be provided for the person. The director's designee shall give such notice as is practicable to persons who are required to comply with the order. The order is effective when issued.

- d. The decision of the director's designee shall be considered a final agency action and is subject to judicial review in accordance with section 17A.19. The record for judicial review consists of any documents regarding the matter that were considered or prepared by the director's designee. The director's designee shall maintain these documents as the official record of the decision. If the matter is appealed to the district court, the record shall be filed as confidential.
- 4. The responsibilities of the county under law regarding mental health and disability services shall be performed on behalf of the county by the regional administrator. The mental health and disability services region is responsible for paying the public costs of the mental health and disability services that are not covered by the medical assistance program under chapter 249A and are provided in accordance with the region's approved service management plan to persons who are residents of the region.
- 5. a. The dispute resolution process implemented in accordance with this subsection applies to residency disputes. The dispute resolution process is not applicable to disputes involving persons committed to a state facility pursuant to chapter 812 or rule of criminal procedure 2.22, Iowa court rules, or to disputes involving service authorization decisions made by a region.
- b. If a county or region, as applicable, receives a billing for services provided to a resident in another county or region, or objects to a residency determination certified by another county's or region's regional administrator and asserts either that the person has residency in another county or region or the person is not a resident of this state, the person's residency status shall be determined as provided in this subsection. If the county or region asserts that the person has residency in another county or region, the county or region shall notify the other county or region within one hundred twenty days of receiving the billing for services.
- c. The county or region that received the notification, as applicable, shall respond to the party that provided the notification within forty-five days of receiving the notification. If the parties cannot agree to a settlement as to the person's residency status within ninety days of the date of notification, on motion of any of the parties, the matter shall be referred to the department of inspections, appeals, and licensing for a contested case hearing under chapter 17A before an administrative law judge assigned in accordance with section 10A.801 to determine the person's residency status.
- d. (1) The administrative law judge's determination of the person's residency status shall be considered final agency action, notwithstanding contrary provisions of section 17A.15. The party that does not prevail in the determination or subsequent judicial review is liable for costs associated with the proceeding, including reimbursement of the department of inspections, appeals, and licensing's actual costs associated with the administrative proceeding. Judicial review of the determination may be sought in accordance with section 17A.19.
- (2) If following the determination of a person's residency status in accordance with this subsection, additional evidence becomes available that merits a change in that determination, the parties affected may change the determination by mutual agreement. Otherwise, a party may move that the matter be reconsidered by the county or region, or by the administrative law judge.
- e. (1) Unless a petition is filed for judicial review, the administrative law judge's determination of the person's residency status shall result in one of the following:
- (a) If a county or region is determined to be the person's residence, the county or region shall pay the amounts due and shall reimburse any other amounts paid for services provided by the other county or region on the person's behalf prior to the determination.
- (b) If it is determined that the person is not a resident of this state neither the region in which the services were provided nor the state shall be liable for payment of amounts due for services provided to the person prior to the determination.
- (2) The payment or reimbursement shall be remitted within forty-five days of the date the determination was issued. After the forty-five-day period, a penalty of not greater than one percent per month may be added to the amount due.
- 6. a. The dispute resolution process implemented in accordance with this subsection applies beginning July 1, 2012, to billing disputes between the state and a county or region,

other than residency disputes or other dispute processes under this section, involving the responsibility for service costs for services provided on or after July 1, 2011, under any of the following:

- (1) Chapter 221.
- (2) Chapter 222.
- (3) Chapter 229.
- (4) Chapter 230.
- (5) Chapter 249A.
- (6) Chapter 812.
- b. If a county, region, or the department, as applicable, disputes a billing for service costs listed in paragraph "a", the dispute shall be resolved as provided in this subsection. The county or region shall notify the department of the county's or region's assertion within ninety days of receiving the billing. However, for services provided on or after July 1, 2011, for which a county has received the billing as of July 1, 2012, the county shall notify the department of the county's assertion on or before October 1, 2012. If the department disputes such a billing of a regional administrator, the department shall notify the affected counties or regions of the department's assertion.
- c. The department, county, or region that received the notification, as applicable, shall respond to the party that provided the notification within forty-five days of receiving the notification. If the parties cannot agree to a settlement as to the dispute within ninety days of the date of notification, on motion of any of the parties, the matter shall be referred to the department of inspections, appeals, and licensing for a contested case hearing under chapter 17A before an administrative law judge assigned in accordance with section 10A.801 to determine facts and issue a decision to resolve the dispute.
- d. (1) The administrative law judge's decision is a final agency action, notwithstanding contrary provisions of section 17A.15. The party that does not prevail in the decision or subsequent judicial review is liable for costs associated with the proceeding, including reimbursement of the department of inspections, appeals, and licensing's actual costs associated with the administrative proceeding. Judicial review of the decision may be sought in accordance with section 17A.19.
- (2) If following the decision regarding a dispute in accordance with this subsection, additional evidence becomes available that merits a change in that decision, the parties affected may change the decision by mutual agreement. Otherwise, a party may move that the matter be reconsidered by the department, county, or region, or by the administrative law judge.
- e. (1) Unless a petition is filed for judicial review, the administrative law judge's decision regarding a disputed billing shall result in one of the following:
- (a) If a county or region is determined to be responsible for the disputed amounts, the county or region shall pay the amounts due and shall reimburse any other amounts paid for services provided by the other county or region or the department on the person's behalf prior to the decision.
- (b) If it is determined that the state is responsible for the disputed amounts, the state shall pay the amounts due and shall reimburse the county or region, as applicable, for any payment made on behalf of the person prior to the decision.
- (2) The payment or reimbursement shall be remitted within forty-five days of the date the decision was issued. After the forty-five-day period, a penalty of not greater than one percent per month may be added to the amount due.

```
2012 Acts, ch 1120, $36, 37, 39
C2013, $331.394
2018 Acts, ch 1165, $76; 2021 Acts, ch 177, $91, 108; 2023 Acts, ch 19, $1093, 1094, 2011 –
2014; 2023 Acts, ch 140, $15
C2024, $225C.61
Referred to in $35D.9, 125.2, 222.63, 222.65, 222.67, 222.70, 230.2, 230.4, 230.6, 230.9, 230.12, 232.141, 252.24, 347.16
See Code editor's note on simple harmonization at the beginning of this Code volume
Section transferred from $331.394$ in Code 2024 pursuant to directive in 2023 Acts, ch 140, $15
Subsection 1, paragraph a amended
```

Fri Dec 22 21:27:50 2023

Subsection 5, paragraph d, subparagraph (1) amended Subsection 6, paragraph c amended Subsection 6, paragraph d, subparagraph (1) amended