

CHAPTER 182
FAMILY-CENTERED SERVICES
[Prior to 2/11/87, Human Services[498]]

PREAMBLE

Family-centered services are designed to treat child abuse, neglect, and delinquency; to promote the safety, permanency, and well-being of children who have been abused or neglected; to prevent out-of-home placements of children; to reunite families whose children have been placed outside the home; or to help children who cannot return to their own homes work toward achieving another planned permanent living arrangement.

The family-centered service program recognizes the wide variety of family needs and allows for varying scope, frequency, and intensity of services to provide the least restrictive response to each child and family receiving services. Service approaches are designed in collaboration with families, build on existing strengths of children and families, and are tailored to meet the identified concerns of families and children.

This chapter defines and structures supportive services in the family-centered service program. These rules set the eligibility criteria, application and approval procedures, requirements for service provision, reimbursement methodology, provider qualifications, and service termination and appeal procedures for the program.

441—182.1(234) Definitions.

“*Case permanency plan*” means the written service plan document. Department case permanency plans shall be developed pursuant to rule 441—130.7(234).

“*Child*” means a person under 18 years of age.

“*Department*” means the Iowa department of human services.

“*Department worker*” means the worker who is responsible for opening a service case.

“*Family members*,” for purposes of child welfare service delivery, may include the following:

1. The natural or adoptive parents, stepparents, and children who reside in the same household.
2. A child who lives with an adult related to the child within the fourth degree of consanguinity and the adult relatives within the fourth degree of consanguinity in the child’s household who are responsible for the child’s supervision. Relatives within the fourth degree of consanguinity include: full or half siblings, aunts, uncles, great-aunts, great-uncles, nieces, great-nieces, nephews, great-nephews, grandparents, great-grandparents, great-great-grandparents, and first cousins.
3. A child who lives alone or resides with a person or persons not legally responsible for the child’s support.

“*Family team*” means people identified by the child or family as collectively possessing the technical skills, knowledge of the family, authority, and access to resources necessary to organize effective services that build on the strengths and meet the needs of the child or family.

“*Family team meeting*” means a gathering of family members and extended family, friends, providers, the department worker, community professionals, and other interested people who plan for the safety, permanency, and well-being of a child or family through development and review of an individualized case permanency plan. Family team meetings are intended to enhance the core casework functions of family engagement, assessment, service planning, monitoring, and coordination.

“*Provider*” means any natural person, company, firm, association, or other legal entity under contract with the department pursuant to 11—Chapters 106 and 107 or 441—Chapters 150 or 152 to provide the services described in this chapter.

“*Referral worker*” means the department worker or juvenile court officer who is responsible for providing case management, including:

1. Assessing and identifying individual and family strengths and needs.
2. Developing a case permanency plan to provide appropriate supports and services.
3. Implementing the case permanency plan.

4. Coordinating and monitoring the provision of services.
5. Evaluating client progress and the case permanency plan to determine continued need for services.

“*Service authorization*” means the process of service need determination and authorization of scope, amount, and duration of services.

“*Supportive services*” in the family-centered program means the following service components:

1. Community resource procurement.
2. Family team meeting facilitation.
3. Flexible family support fund.
4. Parental counseling and education.
5. Relative home studies and home study updates.
6. Supervision.

“*Treatment plan*” means a written, goal-directed plan of service developed for a child and family by the provider.

441—182.2(234) Available services. Family-centered services use a flexible and comprehensive approach to address the needs of individual family members within the context of the entire family. Services are adapted to the individual needs of children and families in terms of scope, intensity, and duration and are intended to improve the child’s safety, permanency, and well-being. The department may approve eligible children and families for one or more of the following service components:

182.2(1) Supervision. Supervision services are activities undertaken to provide the structured monitoring and behavioral oversight needed by a child or the child’s family to achieve or maintain the child’s safety, permanency, and well-being.

a. Service activities may include the following:

- (1) Behavioral monitoring;
- (2) Inspection and monitoring of the home environment of a child’s parent or other relative to evaluate the home’s safety and suitability;
- (3) Oversight of a family’s participation in services;
- (4) Monitoring of a child’s ability to adjust within the community;
- (5) Guidance for family members on how to improve their adjustment;
- (6) Monitoring of a child’s or parent’s behavior during sibling or parent-child visits; and
- (7) Monitoring of a child’s behavior during transportation to and from juvenile court hearings, to and from sibling visits, or to and from parent-child visits, if specifically requested by the child’s worker on Form 470-3055, Referral and Authorization for Child Welfare Services, and approved by the service area manager or designee.

b. Supervision services may include a combination of:

- (1) Direct contact with the child or an adult family member responsible for the child; and
- (2) Indirect behavioral monitoring through contacts by telephone with the child or adult family members who have caretaking responsibility for the child. With the approval of the referring worker, telephone contacts may be used to monitor the child’s whereabouts and adjustment or to respond to family crises. Telephone contacts are limited to 60 minutes per calendar month of service.

182.2(2) Family team meeting facilitation. Family team meeting facilitation includes activities undertaken to conduct a family team meeting for a family with a child welfare service case. A person who meets department requirements to be an approved facilitator shall provide the service. Expected activities include:

- a.* Responding to a referral for facilitation;
- b.* Working with the family and others to identify participants in the family team meeting and prepare them for the meeting;
- c.* Arranging the meeting location;
- d.* Sending meeting invitations;
- e.* Conducting the family team meeting;
- f.* Recording key issues, discussion topics, and decisions developed during the meeting; and

g. Timely preparation and submission to the department of postmeeting notes that can be used in the development of the case permanency plan, using Form 470-4126, Family Team Meeting Facilitation Notes.

182.2(3) *Rehabilitative treatment.* Rescinded IAB 4/11/07, effective 7/1/07.

182.2(4) *Nonrehabilitative treatment.* Rescinded IAB 4/11/07, effective 7/1/07.

182.2(5) *Parental counseling and education.* Parental counseling and education services are directed to addressing behavioral and emotional issues of a child's parent or of the adult relative with whom a child resides that are identified by the department worker as presenting significant barriers to the safety, stability, permanency, or well-being of the child.

a. Services represent a blend of counseling and educational intervention techniques. Service activities may include providing instruction or education on appropriate parenting, family structure, social relationships, and household management techniques to enhance a child's safety, stability, permanency, and well-being.

b. Services may be provided in an individual or group setting.

c. Unless a similar rehabilitative service has been authorized under rule 441—185.3(234), services may include:

(1) Performing a psychosocial evaluation of the family's strengths and needs as they relate to the child's safety, permanency and well-being; and

(2) Identifying resources available to promote and support the family's ability to maintain the child's safety, permanency and well-being.

182.2(6) *Relative home study and home study update.* Rescinded IAB 6/6/07, effective 10/1/07.

182.2(7) *Community resource procurement.* Community resource procurement services are focused on arranging or coordinating the delivery of community supports or tangible goods identified as necessary for a family to achieve the outcomes of the family's case permanency plan. At the department's direction, the service provider undertakes activities to identify and secure tangible goods, community resources, or informal supports for the child and family.

182.2(8) *Flexible family support fund.* Rescinded IAB 6/6/07, effective 10/1/07.

441—182.3(234) Eligibility for services. Effective October 1, 2007, new referrals for family-centered services shall be evaluated, processed, and served under 441—Chapter 172. No new applications or referrals shall be accepted for services under 441—Chapter 182.

182.3(1) *Transition.* The following procedures apply to children and families from the Council Bluffs service area who are approved to receive family-centered services as described in this chapter before January 1, 2008, and who require services after January 1, 2008:

a. The department shall make every effort to transition each case to family-centered safety plan services or family safety, risk, and permanency services as described in 441—Chapter 172.

b. If the case cannot be transferred to a contractor for services under 441—Chapter 172 by January 1, 2008, the department worker may request continued authorization of services under 441—Chapter 182 for a limited period until the case can be transferred.

c. The department worker may also request continued authorization of services under 441—Chapter 182 if:

(1) The child and family are receiving services from a provider that will not be a contractor or subcontractor for services under 441—Chapter 172;

(2) The child and family have a strong and positive relationship with that provider; and

(3) The department worker expects that the child's and family's need for services will end by March 31, 2008.

d. Services that may be continued include supervision, parental counseling and education, community resource procurement, and family team meeting facilitation only.

e. The service area manager or the manager's designee must authorize any continued services by January 1, 2008. The authorization period shall not extend beyond March 31, 2008.

f. Any continued need for family-centered services after March 31, 2008, shall be assessed and served in accordance with the procedures in 441—Chapter 172.

182.3(2) *Need for service.* The department has approved the child's and family's need for service in accordance with rule 441—182.4(234).

182.3(3) *Income.* Children may be eligible for service components of the family-centered services program without regard to income and at no cost to themselves when other eligibility requirements are met.

182.3(4) *Limits on eligibility.*

a. Children placed in a psychiatric medical institution for children are not eligible for family-centered services.

b. Children placed in either emergency shelter care or foster group care are not eligible for family-centered supervision services. The shelter care or group care setting is responsible for meeting the supervision needs of these children.

c. The amount and duration of services to children placed in emergency shelter care are limited as follows:

(1) Children in shelter care may receive a maximum of 20 service units of parental counseling and education services for purposes of family reunification.

(2) The maximum length of time that parental counseling and education services may be provided to a child placed in shelter care is 30 days from the start date of these services, without regard to the length of the child's shelter care stay.

441—182.4(234) *Approval and referral for services.* The referral worker shall assess a child's eligibility for services in accordance with rule 441—182.3(234) and shall determine if services under the family-centered program are necessary to help achieve the goals and outcomes of the case permanency plan. Department case permanency plan development, provision of social casework, and activities for the delivery of family-centered services shall adhere to the provisions of rules 441—130.6(234) and 441—130.7(234).

182.4(1) *Application for services.* Application for family-centered services shall be made according to rule 441—130.2(234).

182.4(2) *Service plan development.* The department caseworker shall, whenever appropriate, use a family team meeting to design the most effective and responsive service plan for the child and family.

182.4(3) *Supervisory approval.*

a. Cases managed by department. Once the department worker has determined there is a need for family-centered services, the worker shall request supervisory approval of any services to be provided to the child or family.

b. Rescinded IAB 4/11/07, effective 7/1/07.

182.4(4) *Referral.* The referral worker shall assist the family in selecting an appropriate provider and shall notify the provider that family-centered services are approved.

a. The referral worker shall complete Form 470-3055, Referral and Authorization for Child Welfare Services, indicating:

(1) The amount (number of units) of services approved. For the flexible family support fund, the referral shall include sufficient detail to describe specific items and the maximum funding amounts that the provider is approved to purchase and obtain for the client under the fund.

(2) The duration of services approved. The duration of services approved shall not exceed six months, except for the flexible family support fund, which shall not extend beyond four consecutive months.

b. The referral worker shall forward a copy of Form 470-3055 to the provider, and a copy to the department when the referral worker is with juvenile court services, before services are provided to the child and family.

182.4(5) *Case permanency plan.* Approved family-centered services shall be specified in the case permanency plan for the child or family. Department case permanency plan development shall adhere to the provisions of rule 441—130.7(234).

a. The current department case permanency plan, if one is available at the time of referral, shall be transmitted to any provider to which the family is referred.

(1) Unless the need for immediate services dictates otherwise, the case permanency plan shall be submitted before the delivery of any services.

(2) For referrals to provide family team meeting facilitation services, a case permanency plan is not required at the time of referral. However, the department worker shall provide the facilitator with as much information about the family as possible.

b. When a case permanency plan is not available to the provider before initial service provision, the referral worker shall provide referral information orally, electronically, or in writing. The referral information shall:

(1) Include a description of the child's or family's needs, the goals for the service, and the services being requested.

(2) Be confirmed or amended through the transmission of a case permanency plan to the provider no later than 30 days after the date of the family's referral for services.

182.4(6) Review. The department worker shall review the need for family-centered services no less frequently than every six months from the date of initial family-centered service provision.

182.4(7) Time limits for rehabilitative and nonrehabilitative treatment services. Rescinded IAB 4/11/07, effective 7/1/07.

441—182.5(234) Service provider qualifications. To be considered for service provision, all providers must have a contract with the department as specified in subrule 182.5(1). To obtain a contract, a provider must meet the requirements applicable to each service to be provided, as stated in subrules 182.5(2) through 182.5(6).

182.5(1) Contract. All providers shall have a current contract with the department that includes the specific service component to be purchased, as follows:

a. A contract for the delivery of supportive services pursuant to 441—Chapter 152. A provider with a contract for any supportive service shall amend that contract to include any family-centered service component the provider wishes to offer. A contract pursuant to 441—Chapter 152 is the only contracting method available to providers of the following family-centered service components:

- (1) Supervision.
- (2) Parental counseling and education.

b. A contract for the purchase of social services pursuant to 441—Chapter 150. Providers that have a purchase of social services contract and do not have a rehabilitative treatment and supportive service contract shall amend the purchase of social service contract to include any of the following service components that they wish to offer:

- (1) Family team meeting facilitation.
- (2) Community resource procurement.

c. An individual service contract pursuant to 11—Chapters 106 and 107. The individual service contract is available only to individuals (or their employing entities) that do not have a contract pursuant to 441—Chapter 152 or 150 but wish to offer one or more of the following service components:

- (1) Family team meeting facilitation.
- (2) Community resource procurement.

182.5(2) Supervision.

a. Persons providing supervision services to department clients shall meet the following minimum education and experience requirements:

(1) The person shall have two years of college coursework in a program with a social work concentration or shall have satisfactorily completed a relevant, concentrated, certified curriculum, such as a human services specialist program as offered in an Iowa area community college; or

(2) The person shall have the equivalent of two years of full-time work experience involving direct contact with people in overcoming their social, emotional, or behavioral problems. College coursework with an emphasis in the social or behavioral sciences, education, or child development may be substituted for the required experience, based on 30 semester hours being equivalent to one year.

b. Provider service management activities for department clients receiving supervision services shall be conducted by persons who meet or are under the direct supervision of persons who meet the

minimum education and experience requirements for skill development services as specified in rule 441—185.10(234).

182.5(3) *Family team meeting facilitation.* Providers delivering family team meeting facilitation services under this chapter shall:

- a. Have completed at least 18 hours of department-approved family team meeting facilitator training to meet department standards for approved facilitators;
- b. Be approved by the department as a family team meeting facilitator and be currently listed on the department-approved facilitator list; and
- c. Maintain written documentation that facilitator staff have fulfilled all necessary requirements to be department-approved facilitators.

182.5(4) *Parental counseling and education.*

- a. Rescinded IAB 4/11/07, effective 7/1/07.
- b. Persons delivering parental counseling and education shall meet the minimum education and experience requirements for therapy and counseling services as specified in rule 441—185.10(234).
- c. Rescinded IAB 4/11/07, effective 7/1/07.

182.5(5) *Relative home study.* Rescinded IAB 6/6/07, effective 10/1/07.

182.5(6) *Community resource procurement.* Persons delivering community resource procurement services shall have, at a minimum, a high school diploma or a high school equivalency diploma (GED).

441—182.6(234) Requirements for service delivery. All providers of family-centered services shall meet the referral requirements in subrule 182.6(1), the documentation requirements in rule 441—182.7(234), and the service delivery requirements specific to the particular service, as specified in subrules 182.6(4) through 182.6(9).

182.6(1) *Referral.* All providers of family-centered services shall:

- a. Receive written approval for these services from the referral worker on Form 470-3055, Referral and Authorization for Child Welfare Services, before providing services; and
- b. Receive approval from the referral worker before increasing the amount or duration of these services beyond what was previously authorized.

182.6(2) *Service location.* The department worker shall ensure that family-centered services are delivered in whatever locations are determined to be appropriate to ensure that reasonable efforts are being made to meet the child's and family's needs. The department worker shall consult with the family and providers throughout the period of service delivery to ensure that the service delivery locations are meeting needs.

182.6(3) *Service management activities.* Providers of supervision or parental counseling and education components shall undertake nonbillable activities to structure and facilitate the delivery of the service they are providing in response to the directions and goals of the case permanency plan. These activities shall include the following:

- a. Intake activities to collect information about the family necessary to begin service delivery.
- b. Assessment activities to review all available information on the family to identify the strengths and resources of the family and its individual members as well as obstacles impeding the family. Strengths, resources, and obstacles shall be analyzed with the family throughout the service delivery period to facilitate the service provider's response to the case permanency plan directions and goals.
- c. Planning activities to develop or revise a written service plan in collaboration with the family. The written service plan shall reflect the assessment findings and describe the service provider's implementation of the directions in the case permanency plan.
- d. Implementation activities to facilitate and deliver the services identified in the written service plan. These activities include documentation of service provision and the family's progress toward meeting the identified goals and objectives.
- e. Termination activities to review information with the family before the discontinuation of one or more services. These activities shall result in a written summary of service delivery and service outcome.

182.6(4) *Supervision.* Providers of family-centered supervision services shall:

a. Provide supervision services to the child referred by the department worker or juvenile court officer.

(1) Supervision services may be provided as the only service to a child or in combination with other department or community services.

(2) In order for indirect behavioral monitoring contacts to be provided, indirect contacts must be included on Form 470-3055, Referral and Authorization for Child Welfare Services, and approved in the case permanency plan.

(3) Service management activities as described in subrule 182.6(3) shall be provided as part of service delivery.

b. Maintain communication with the referral worker throughout the service delivery period. The provider shall promptly notify the referral worker of any protective or safety concerns about the child or family. Upon request, the provider shall submit to the referral worker a written summary of concerns based on observations about the child and family situation made during service delivery.

c. Document service delivery in the child's individual treatment record in accordance with the requirements of this subrule, 441—subrule 152.2(16), and rule 441—182.7(234).

182.6(5) Family team meeting facilitation. Providers of family team meeting facilitation services shall:

a. Deliver family team meeting facilitator services that meet the requirements as outlined in subrule 182.2(2). The provider shall ensure to the extent possible the continuity of facilitators for subsequent family team meetings involving the child and family.

b. Within seven calendar days from the delivery of facilitation services, provide the referral worker with an electronic copy of information needed for applicable sections of the case permanency plan, as specified in Form 470-4126, Family Team Meeting Facilitation Notes. These sections shall include, at a minimum, the following:

- (1) The date and location of the meeting;
- (2) A list of persons attending the meeting;
- (3) Information identifying the family;
- (4) Information on family functioning areas;
- (5) Information and recommended goals and action steps on the family functioning domains of the home environment, parental capabilities, family interactions, family safety, and child well-being.

c. Maintain a copy of Form 470-4126, Family Team Meeting Facilitation Notes, and the date that these notes were provided to the department referral worker in the child's individual treatment record.

182.6(6) Parental counseling and education. Providers of parental counseling and education shall:

a. Develop a treatment plan in accordance with 441—subrules 185.10(4) and 185.10(5).

b. Deliver services that reflect the protective treatment needs of the child and the child's parents or adult family members, including intervention to treat abuse or neglect, prevent the placement of the child outside the family home, promote or maintain family reunification, or help achieve another planned permanent living arrangement for the child.

(1) Parental counseling and education shall be directed toward issues that help the parent or adult family members address the child's safety, permanency, and well-being needs more effectively.

(2) Rescinded IAB 4/11/07, effective 7/1/07.

(3) The services provided shall include service management activities as described in subrule 182.6(3).

c. Document service delivery in the child's individual treatment record in accordance with the requirements of this subrule, 441—subrules 152.2(16) and 185.10(6), and rule 441—182.7(234).

182.6(7) Relative home study. Rescinded IAB 6/6/07, effective 10/1/07.

182.6(8) Community resource procurement. Providers of community resource procurement services shall:

a. Maintain telephonic, electronic, or in-person communication with the department referral worker as necessary during the period of service delivery to best coordinate the securing of necessary supports for children and families. Time spent maintaining this communication shall be billable service activity.

b. Maintain a record that supports billings submitted to the department. This record shall contain Form 470-3055, Referral and Authorization for Child Welfare Services, which authorized the service and shall identify:

- (1) The name of the person who provided the service;
- (2) The name of the client;
- (3) The date and beginning and ending time of all billed service activity;
- (4) The type of activity (e.g., coordinating with referral worker, researching prices, obtaining bids if required, shopping for items);
- (5) The type of contact (e.g., telephone, computer search, driving time, face-to-face); and
- (6) The items sought or procured.

182.6(9) *Flexible family support fund.* Rescinded IAB 6/6/07, effective 10/1/07.

441—182.7(234) Provider service record requirements.

182.7(1) *Treatment plans.* The provider shall develop a treatment plan for each child receiving services, except as specified below. The treatment plan shall comply with 441—subrules 185.10(4) and 185.10(5). Only one treatment plan is needed for all services the provider is contracted to provide on behalf of the child.

a. Provider treatment plans are not required for:

- (1) Family team meeting facilitation.
- (2) Community resource procurement.

b. Provider treatment plans are not required for supervision if supervision is the only service the provider is delivering to the child or family. A treatment plan is required for supervision services when delivered in combination with other services for which a treatment plan is required.

182.7(2) *Progress reports.* For family-centered supervision and parental counseling and education, providers shall complete progress reports that comply with 441—paragraph 185.10(6) “*f.*” Provider progress reports are not required for family team meeting facilitation or community resource procurement.

182.7(3) *Discharge summary.* For family-centered supervision and parental counseling and education, providers shall prepare a written report for the referral worker in accordance with 441—paragraph 185.10(6) “*e.*” within 30 days of the termination of services. Discharge summaries are not required for family team meeting facilitation or community resource procurement.

182.7(4) *Provider individual client case records.* Providers shall maintain a confidential individual record for each individual or family receiving family-centered services for a period of five years after terminating services to the client. The record shall include the following:

a. The case permanency plan if supplied by the referral worker, or written documentation to the referral worker requesting a copy of the case permanency plan.

b. Form 470-3055, Referral and Authorization for Child Welfare Services, from the referral worker.

c. Any treatment plans, treatment plan reviews, progress reports, additional reports requested by the referral worker, and discharge summaries developed by the provider.

d. For family team meeting facilitation, a copy of Form 470-4126, Family Team Meeting Facilitation Notes, submitted to the department worker.

e. and *f.* Rescinded IAB 6/6/07, effective 10/1/07.

g. For community resource procurement, the documentation described in paragraph 182.6(8) “*b.*”

h. For parental counseling and education and supervision, documentation to substantiate each unit of service billed to the department. This documentation shall include:

- (1) A description of the specific service rendered;
- (2) Clear identification of the person or persons who rendered the service;
- (3) Identification of the person or persons who received the service;
- (4) The dates and amount of time service was rendered; and
- (5) The type of contact (face-to-face or by telephone).

i. Any correspondence with the referral worker regarding changes in services or requests for additional services.

441—182.8(234) Unit of service and service unit rates.

182.8(1) Billable units. All members of a family shall collectively be considered one recipient of any unit of family-centered services. The billable units of service for family-centered supportive service components shall be as follows:

a. For supervision:

(1) One-half hour of direct face-to-face contact between the service provider and the family or one or more of its members constitutes one unit of service.

(2) One-half hour of indirect monitoring through contacts by telephone with the child or a caretaking adult family member constitutes one unit of service. Indirect monitoring is billable only when specifically authorized by the referral worker.

(3) Monthly cumulative time for both direct and indirect services shall be totaled and rounded up or down to the nearest whole unit.

b. For family team meeting facilitation, a facilitated family team meeting including all premeeting preparation, meeting place arrangement, service management activities, meeting facilitation activities, postmeeting note preparation and timely submission of an acceptably completed Form 470-4126, Family Team Meeting Facilitation Notes, constitutes one unit of service.

c. Rescinded IAB 4/11/07, effective 7/1/07.

d. For parental counseling and education:

(1) One-half hour of direct face-to-face contact between the service provider and either or both of the parents or a caretaking adult family member constitutes one unit of service.

(2) Monthly cumulative time shall be totaled and rounded up or down to the nearest whole unit.

e. Rescinded IAB 6/6/07, effective 10/1/07.

f. For community resource procurement:

(1) One-half hour of service activity on behalf of the child or child's family, either through direct contact with the family or through activities carried out in person or by telephone or electronic means, constitutes one unit of service.

(2) Monthly cumulative time shall be totaled and rounded up or down to the nearest whole unit.

182.8(2) Payment rates.

a. Unit rates for supervision shall be established in accordance with 441—Chapter 185, Division VI.

b. Unit rates for the following services shall be established in accordance with 441—subrule 185.112(14):

(1) Family team meeting facilitation.

(2) Parental counseling and education.

(3) Community resource procurement.

c. Rescinded IAB 6/6/07, effective 10/1/07.

182.8(3) Indirect costs. Expenses of transporting clients, service management activities, and other administrative functions shall be allowable indirect costs for parental counseling and education, community resource procurement, and supervision services, subject to the restrictions set forth in 441—Chapters 152 and 185. Such costs and activities are not directly billable costs or activities.

182.8(4) Group services. When more than one family receives services in a group setting, all members of each family participating in the group service activity are to be considered as one participant for billing purposes. Contracts shall specify a unit rate for group services separate from other services described in the contract.

182.8(5) Team approach to service delivery. When two or more individuals from a service provider agency jointly deliver a unit of supervision services, billings for that unit of service shall be reimbursable in an amount equal to the cost of two or more units of service if the following criteria are met:

a. The case permanency plan requests a team approach to supervision service delivery and specifies the number of individuals who will be working together on the team, and the provider's contract identifies the service provider's ability to deliver such a team approach.

b. The specific number of provider staff requested in the case permanency plan are physically present to deliver services to the family, and these same individuals undertake the service management activities in relation to service provision.

441—182.9(234) Termination and adverse service actions. Services shall be denied, terminated, or reduced and appropriate notice given the client as specified in rule 441—130.5(234) unless otherwise provided for in this chapter. Services shall be terminated no later than the end of the service period approved by the department in Form 470-3055, Referral and Authorization for Child Welfare Services.

441—182.10(234) Appeals.

182.10(1) Decisions concerning family-centered services made by the department or its designee that adversely affect clients may be appealed pursuant to 441—Chapter 7.

182.10(2) Decisions made by the department that adversely affect service providers concerning services provided through a contract established pursuant to 441—Chapter 152 may be reviewed in accordance with rule 441—152.3(234).

182.10(3) Decisions made by the department that adversely affect service providers concerning services provided through a contract established pursuant to 441—Chapter 150 may be reviewed in accordance with 441—subrule 150.3(9).

182.10(4) Decisions made by the department that adversely affect service providers concerning services provided through a contract established pursuant to 11—Chapters 106 and 107 may be addressed through the provisions contained in that contract.

These rules are intended to implement Iowa Code section 234.6.

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