CHAPTER 12
REGISTERED NURSE CERTIFYING ORGANIZATIONS/
UTILIZATION AND COST CONTROL REVIEW

655—12.1(509,514,514B,514F) Purpose. The following chapter is promulgated for the purpose of administering the provisions of Iowa Code sections 509.3, 514.7, 514B.1 and 514F.1.

655—12.2(509,514,514B,514F) Definition. A “certified registered nurse” is a registered nurse with an active license in Iowa or who is currently licensed in another state and recognized for licensure in Iowa, pursuant to the nurse licensure compact contained in Iowa Code chapter 152E, and who possesses evidence of certification by a national certification organization or successor agency as recognized by the board in 655—12.3(509,514,514B).

655—12.3(509,514,514B) National certifying organizations. Eligibility requirements for certification are established by the individual national certifying organization. The national certifying organizations identified by the board pursuant to Iowa Code sections 509.3, 514.7, 514B.1, and 514F.1 are as follows:

- Addictions Nursing Certification Board
- American Academy of Nurse Practitioners
- American Association of Critical Care Nurses Certification Corporation
- American Association for Marriage and Family Therapy
- American Board of Medical Genetics
- American Board of Neuroscience Nursing
- American Board for Occupational Health Nurses, Inc.
- American Board of Post Anesthesia Nursing Certification, Inc.
- American Board of Urologic Allied Health Professionals, Inc.
- American College of Nurse-Midwives, ACNM Certification Council
- American Holistic Nurses’ Certification Corporation
- American Nurses’ Credentialing Center
- American Society of Plastic and Reconstructive Surgical Nurses, Inc.
- Association of Operating Room Nurses
- Association for Practitioners in Infection Control
- Association of Rehabilitation Nursing, Certification Board
- Board of Certification for Emergency Nursing
- Board of Nephrology Examiners, Nursing and Technology
- Certification Board of Perioperative Nursing
- Certifying Council for Gastroenterology Clinicians, Inc.
- Clinical Nutrition Certification Board
- Council on Certification of Nurse Anesthetists
- Council on Recertification of Nurse Anesthetists
- Dermatology Nurses Association
- Enterostomal Therapy Nursing Certification Board
- HIV/AIDS Nursing Certification Board
- International Association of Infant Massage Instructors
- International Board of Lactation Consultant Examiners
- International Nurses Society on Addictions
- Intravenous Nurses Society Certification Corporation
- Lamaze International
- National Board for Certification of School Nurses
- National Certification Board of Diabetes Educators
- National Certification Board of Pediatric Nurse Practitioners and Nurses
- National Certification Corporation for the Obstetric, Gynecologic and Neonatal Nursing Specialties
- National Certifying Board for Ophthalmic Registered Nurses
National Consortium of Chemical Dependency Nurses
Oncology Nursing Certification Corporation
Orthopaedic Nurses Certification Board
Plastic Surgical Nursing Certification Board
Radiological Nursing Certification Board
Society of Gastroenterology Nurses and Associates
Society of Otorhinolaryngology and Head-Neck Nurses
Society of Urological Nurses and Associates
Society of Vascular Nursing
Wound, Ostomy and Continence Nurses Society

655—12.4(514F) Utilization and cost control review (U.C.C.R.) committee. The board shall establish
a U.C.C.R. committee for the purpose of providing a mechanism for review of questions related to:
1. Appropriateness of levels of nursing care.
2. Documentation of the credentials of the nurse(s) offering the service(s).
3. Documentation of the care provided.
4. Documentation of the costs of nursing services provided by certified registered nurses as
requested by users and payers of such services.

655—12.5(514F) Selection and composition of the U.C.C.R. committee.
12.5(1) The U.C.C.R. committee shall consist of five licensed registered nurses, three of whom shall
be certified registered nurses. A quorum of the U.C.C.R. committee is three members. When a quorum
is present, a position is carried by a majority of the committee members.
12.5(2) The chairperson of the board of nursing, upon receipt of a request for review, shall appoint
committee members and designate a chairperson and a secretary.
12.5(3) Members of the U.C.C.R. committee shall:
a. Have been actively practicing nursing in Iowa for a period of five years immediately prior to
their appointment.
b. Hold an active Iowa registered nurse license or hold a current license in another state and be
recognized for licensure in Iowa pursuant to the nurse licensure compact contained in Iowa Code chapter
152E.
c. Be actively involved in nursing practice during the term of appointment.
d. Not be exempt from mandatory disclosure requirements of Iowa Code section 272C.9.
e. Not be civilly liable when functioning in their capacity of committee members in compliance
with Iowa Code section 272C.8.
f. Observe the requirements of confidentiality imposed by Iowa Code subsection 272C.6(4). For
the purposes of this subsection, all information requested by or provided to the U.C.C.R. committee
under this chapter shall be considered privileged and confidential complaint or investigative information.
However, the final decision of the U.C.C.R. committee shall not be considered confidential.

655—12.6(514F) Scope of review.
12.6(1) Factors to determine appropriateness of nursing care deemed medically necessary shall
include, but not be limited to, the following:
a. Utilization of the nursing process in establishing a nursing diagnosis.
b. Development of a nursing care plan based on documentation of client needs and standards of
care for that particular clinical specialty.
c. Adequate completion of recommended nursing care plan.
d. Quality of care as measured by outcome.
e. Proper referral to specialists/physicians when conditions indicate.
12.6(2) Cost review shall result in an opinion as to the fairness of charges for nursing care services
based on criteria which shall include, but not be limited to, the following:
a. The nurse’s usual charge for the service.
b. The customary charge for the service based on a review of peer group charges.

c. Reasonable variance due to degree of difficulty factors which require extraordinary skill and judgment.

655—12.7(514F) Procedures for utilization and cost control review.

12.7(1) A request for review may be made to the board by a patient, a licensee or any third party payer of health care benefits.

12.7(2) The fee for a utilization and cost control review will be $50 per individual patient review, made payable to the secretary of the U.C.C.R. committee at the time of the request. Such funds are to be used to pay expenses as deemed appropriate by the U.C.C.R. committee.

12.7(3) A request for review shall be submitted to the board by addressing the request to the Iowa Board of Nursing, RiverPoint Business Park, 400 S.W. Eighth Street, Suite B, Des Moines, Iowa 50309-4685. All requests shall be made on the approved forms. Forms will be made available upon request from the office of the board of nursing. All references to identification and location of the licensee shall be deleted prior to submission to the U.C.C.R. committee.

12.7(4) The office of the board of nursing shall provide administrative services to the U.C.C.R. committee. The U.C.C.R. committee shall present its findings and recommendations in writing to the chairperson of the board within 90 days of the committee appointment. The executive director of the board of nursing shall notify the parties of the committee findings.

12.7(5) If the U.C.C.R. committee, by way of its review of the matter, determines that the matter constitutes possible violation of the Iowa practice of nursing Act (Iowa Code chapter 152), the chairperson of the committee shall immediately notify the board of nursing and submit a copy of the review findings. The board has authority to further investigate and pursue disciplinary action based on any information submitted pursuant to these rules.

12.7(6) Action of the U.C.C.R. committee does not constitute an action of the board.

These rules are intended to implement Iowa Code sections 509.3, 514.7, 514B.1, and 514F.1.

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