

321—29.2(231B) Application content. Any entity that meets the definition of an EGH as defined in Iowa Code Supplement section 231B.1(4) must be certified by DIA. An eligible applicant is any for-profit or nonprofit corporation or person that owns a single-family residence.

29.2(1) Application materials may be obtained by mail from the Department of Inspections and Appeals, Adult Services Bureau, Lucas State Office Building, 321 E. 12th Street, Des Moines, Iowa 50319-0083; or by telephone at (515)281-6325. The Web site is https://dia-hfd.iowa.gov/DIA_HFD/Home.do.

29.2(2) The initial or renewal application for certification shall contain:

a. A list that includes the names, addresses and percentage of stock, shares, partnership or other equity interest of all officers, members of the board of directors, and trustees and of the owner, operator or designated manager, as well as stockholders, partners or any individuals who have greater than a 10 percent equity interest in the program. The EGH operator shall notify DIA of any changes in the list within ten working days of the change;

b. A statement affirming that the individuals listed in 29.2(2)“*a*” have not been convicted of a felony or serious misdemeanor or found in violation of the dependent adult or child abuse code in any state;

c. A statement disclosing whether any of the individuals listed in 29.2(2)“*a*” have or have had an ownership interest in a program certified under Iowa Code Supplement chapter 231 or an EGH, a home health agency, or a licensed health care facility as defined under Iowa Code section 135C.1 or licensed hospital as defined under Iowa Code section 135B.1 which has been closed in any state due to removal of program, agency, or facility licensure or certification or due to involuntary termination from participation in either the Medicaid or Medicare program; or have been found to have failed to provide adequate protection or services for participants to prevent abuse or neglect;

d. A copy of the current policy and procedure for evaluation of each tenant, which includes a copy of the evaluation tool to be used to identify the functional, cognitive and health status of each tenant;

e. Identification of target population;

f. A copy of the current EGH service plan format;

g. If the EGH contracts for personal care or health-related care services from a certified home health agency, a mental health center or a licensed health care facility, a copy of that entity’s current license or certification;

h. The current policy and procedure for addressing medication needs of tenants;

i. The current policy and procedure describing accident and emergency response;

j. A copy of the current tenant occupancy agreement;

k. The current policy and procedure for mutual managed risk agreements and upholding tenant autonomy when tenant decision making may result in poor outcomes for the tenant or others.