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## 441—36.6 (249L) Assessment.

**36.6(1)** Applicability. All nursing facilities as defined in Iowa Code section 135C.1 that are free-standing facilities or are operated by a hospital licensed pursuant to Iowa Code chapter 135B shall pay a quarterly assessment to the department, as determined under this division, with the exception of:

- a. Nursing facilities operated by the state.
- b. Non-state government-owned or government-operated nursing facilities.
- c. Distinct-part skilled nursing units and swing-bed units operated by a hospital.

## **36.6(2)** Assessment level.

- a. Nursing facilities with 50 or fewer licensed beds are required to pay a quality assurance assessment of \$1 per non-Medicare patient day.
- b. Nursing facilities designated as continuing care retirement centers (CCRCs) by the insurance division of the Iowa department of commerce are required to pay a quality assurance assessment of \$1 per non-Medicare patient day.
- c. Nursing facilities with annual Iowa Medicaid patient days of 26,500 or more are required to pay a quality assurance assessment of \$1 per non-Medicare patient day.
- d. All other nursing facilities are required to pay a quality assurance assessment of \$5.26 per non-Medicare patient day.

[ARC 8258B, IAB 11/4/09, effective 1/1/10; ARC 8894B, IAB 6/30/10, effective 7/1/10; ARC 9127B, IAB 10/6/10, effective 11/10/10]