

**641—56.6(135) Available services/service plan.**

**56.6(1)** Services available will be consistent with the services offered through the Medicaid home- and community-based services waiver.

**56.6(2)** Service plans must reflect use of all services, including non-cost-shared services, to ensure that no duplication of services occurs.

**56.6(3)** All service plans must be submitted, either electronically or in hard-copy format, to the program for approval prior to implementation.

**56.6(4)** Any change to the service plan must be approved by the program.

[ARC 9705C, IAB 11/12/25, effective 1/1/26]