

Senate File 232 - Introduced

SENATE FILE 232

BY HATCH, MATHIS, and JOCHUM

A BILL FOR

1 An Act relating to direct care professionals, including the
2 establishment of a board of direct care professionals,
3 providing for implementation, making penalties applicable,
4 and including effective date provisions.
5 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 Section 1. NEW SECTION. 152F.1 Definitions.

2 As used in this chapter, unless the context otherwise
3 requires:

4 1. "*Board*" means the board of direct care professionals
5 created under chapter 147.

6 2. "*Community choices option*" means a service delivery
7 option under the medical assistance home and community-based
8 services waiver program that allows eligible waiver recipients
9 to self-direct personal care, community and employment
10 supports, and individual directed goods and services necessary
11 to remain in the recipient's home or community.

12 3. "*Community living professional*" means a direct care
13 associate who has completed advanced training and is certified
14 to provide home and community living, instrumental activities
15 of daily living, and personal support services.

16 4. "*Consumer-directed attendant care*" means a service
17 delivery option under the medical assistance home and
18 community-based services waiver program that allows eligible
19 waiver recipients to direct and manage the recipient's own
20 skilled and nonskilled attendant care services necessary to
21 remain in the recipient's home or community.

22 5. "*Core training*" means training specified by the board to
23 provide basic foundational knowledge and an introduction to the
24 direct care profession.

25 6. "*Direct care associate*" means any of the following:

26 a. An individual who has completed core training and is
27 certified to provide direct care services in the state.

28 b. An individual who has completed a nurse aide training
29 and competency evaluation program approved by the state as
30 required pursuant to 42 C.F.R. § 483.152, is registered on the
31 Iowa direct care worker registry established by the department
32 of inspections and appeals, complies with the requirements
33 of section 152F.3, and is certified to provide direct care
34 services in the state.

35 7. "*Direct care instructor*" means an individual approved

1 by the board to provide direct care instruction to direct care
2 professionals.

3 8. "*Direct care professional*" means an individual who
4 provides direct care services for compensation and is a direct
5 care associate, a community living professional, a health
6 support professional, or a personal support professional.

7 9. "*Direct care services*" means the services provided
8 to individuals who have health conditions, are ill, or are
9 individuals with disabilities as specified in the individual's
10 service plan or in documented goals, including but not limited
11 to home and community living services, instrumental activities
12 of daily living services, personal activities of daily living
13 services, personal support services, and health monitoring and
14 maintenance services.

15 10. "*Direct care trainer*" means a direct care instructor who
16 is approved by the board to train instructors.

17 11. "*Health monitoring and maintenance services*" means
18 services provided to support and maintain an individual's
19 health, including observation and reporting of behaviors
20 or conditions; understanding the causes and symptoms of
21 conditions including but not limited to muscular/skeletal,
22 skin, respiratory system, and neurologic conditions, and
23 diabetes, mental illness, pain, cancer, and intellectual and
24 developmental disabilities; and providing functional support
25 specific to certain conditions.

26 12. "*Health support professional*" means any of the
27 following:

28 a. A direct care associate who has completed advanced
29 training and is certified to provide personal activities of
30 daily living and health monitoring and maintenance services.

31 b. An individual who has completed a nurse aide training
32 and competency evaluation program approved by the state as
33 required pursuant to 42 C.F.R. § 483.152, is registered on the
34 Iowa direct care worker registry established by the department
35 of inspections and appeals, complies with the requirements of

1 section 152F.3, and is certified to provide personal activities
2 of daily living and health monitoring and maintenance services.

3 13. "*Home and community living services*" means services to
4 enhance or maintain independence of individuals including such
5 activities as helping individuals develop and meet personal
6 goals, providing direct physical and emotional support and
7 assistance for persons with disabilities, utilizing crisis
8 intervention and positive behavior supports, and using and
9 following individual support plans.

10 14. "*Instrumental activities of daily living services*" means
11 services provided to assist individuals with daily living tasks
12 to allow them to function independently in a home or community
13 setting, including but not limited to assistance with managing
14 money, transportation, light housekeeping, and shopping and
15 cooking.

16 15. "*Personal activities of daily living services*" means
17 services to assist individuals in meeting basic needs,
18 including but not limited to bathing, back rubs, and skin care;
19 grooming activities; assistance with dressing and undressing;
20 assistance with eating and feeding; assistance with toileting;
21 and assistance with mobility, including transfers, walking, and
22 turning in bed.

23 16. "*Personal support professional*" means a direct care
24 associate who has completed advanced training and is certified
25 to provide instrumental activities of daily living, personal
26 activities of daily living, and personal support services.

27 17. "*Personal support services*" means support services
28 provided to an individual as the individual performs personal
29 activities of daily living including but not limited to
30 coaching and prompting, and teaching skills and behaviors.

31 18. "*Service plan*" means a written, consumer-centered,
32 outcome-based plan of services.

33 19. "*Specialty endorsement*" means an advanced level of
34 certification based on requirements developed by experts in a
35 particular discipline or professional area and approved by the

1 board.

2 **Sec. 2. NEW SECTION. 152F.2 Certification required —**
3 **exceptions — use of title.**

4 1. Unless otherwise exempt under section 152F.4, beginning
5 January 1, 2015, an individual shall not provide direct care
6 services in this state without being certified as a direct care
7 associate.

8 2. An individual who is not certified pursuant to this
9 chapter shall not use words or titles which imply or represent
10 that the individual is certified as a direct care professional
11 under this chapter.

12 3. A direct care associate shall not act as or represent
13 that the individual is a direct care professional with advanced
14 training certification or a specialty endorsement, unless the
15 direct care associate is first certified at the appropriate
16 level of certification under this chapter.

17 4. An individual may voluntarily pursue advanced training
18 or a specialty endorsement under this chapter. Notwithstanding
19 any provision to the contrary, an individual who completes
20 advanced training or satisfies the requirements for a specialty
21 endorsement is not required to be certified at that level if
22 the individual does not act as or represent that the individual
23 is certified at that level. Section 147.83 does not apply
24 to a direct care associate who is not certified as a direct
25 care professional with advanced training certification or a
26 specialty endorsement if the direct care associate does not act
27 as or represent that the individual is certified at that level.

28 **Sec. 3. NEW SECTION. 152F.3 Requirements to obtain**
29 **certification — renewal — continuing education — reciprocity.**

30 1. An applicant for certification as a direct care associate
31 shall present evidence satisfactory to the board that the
32 applicant satisfies all of the following requirements:

33 a. The applicant has successfully completed the required
34 education for the certification from a board-approved direct
35 care instructor or direct care trainer; or the individual has

1 completed a nurse aide training and competency evaluation
2 program approved by the state as required pursuant to 42 C.F.R.
3 § 483.152 and is registered on the Iowa direct care worker
4 registry established by the department of inspections and
5 appeals.

6 *b.* The applicant has paid all fees required by the board.

7 *c.* The applicant certifies that the applicant will conduct
8 all professional activities in accordance with standards for
9 professional conduct established by the board.

10 2. An applicant for certification as a direct care
11 professional with advanced training or a specialty endorsement
12 shall present evidence satisfactory to the board that the
13 applicant satisfies all of the following requirements:

14 *a.* The applicant has successfully completed the required
15 education for the certification from a board-approved direct
16 care instructor or direct care trainer.

17 *b.* The applicant has paid all fees required by the board.

18 *c.* The applicant has passed a state examination approved by
19 the board.

20 *d.* The applicant certifies that the applicant will conduct
21 all professional activities in accordance with standards for
22 professional conduct established by the board.

23 3. Notwithstanding subsection 2, an applicant for
24 certification as a health support professional shall present
25 evidence satisfactory to the board that the applicant satisfies
26 all of the following requirements:

27 *a.* The applicant has complied with one of the following:

28 (1) Successful completion of the required education for
29 the certification from a board-approved direct care instructor
30 or direct care trainer and successful passage of a state
31 examination approved by the board.

32 (2) Successful completion of a nurse aide training and
33 competency evaluation program approved by the state as required
34 pursuant to 42 C.F.R. § 483.152 and registration on the Iowa
35 direct care worker registry established by the department of

1 inspections and appeals.

2 *b.* The applicant has paid all fees required by the board.

3 *c.* The applicant certifies that the applicant will conduct
4 all professional activities in accordance with standards for
5 professional conduct established by the board.

6 4. An individual shall renew the individual's certification
7 biennially. Prior to such renewal, the individual shall
8 present evidence that the individual has satisfied continuing
9 education requirements and shall pay a renewal fee as
10 determined by the board.

11 5. The board shall issue the appropriate certification to an
12 applicant who demonstrates experience in direct care services
13 in another state and satisfies the requirements established by
14 the board for the specific certification.

15 Sec. 4. NEW SECTION. 152F.4 **Scope of chapter.**

16 1. The provisions of this chapter do not apply to any of the
17 following:

18 *a.* An individual who is providing direct care services
19 and is governed by a collective bargaining agreement in place
20 before July 1, 2017, until the expiration of such agreement.

21 *b.* An individual providing direct care services to a family
22 member. However, if public funds are used to provide payment
23 for the direct care services provided by the family member,
24 the family member shall comply with the requirements of this
25 chapter unless otherwise exempt.

26 *c.* An individual otherwise licensed who is operating within
27 the scope of that license and who does not represent to the
28 public that the individual is a direct care professional.

29 2. *a.* Notwithstanding any provision of this chapter to the
30 contrary, beginning January 1, 2015, an individual providing
31 direct care services under the medical assistance consumer
32 choices option or the consumer-directed attendant care program
33 is subject to the following:

34 (1) If the provider will provide services to only one
35 medical assistance recipient, the certification requirements of

1 this chapter shall not apply to the provider.

2 (2) If the provider will provide services to more than one
3 medical assistance recipient, the provisions of this chapter
4 shall apply unless all of the following requirements are met:

5 (a) The provider has the necessary competencies and
6 training to deliver the services included in the consumer
7 choices option employment agreement or consumer-directed
8 attendant care agreement. Competencies shall be demonstrated
9 through documentation of prior training and experience or a
10 certificate of formal training as required by rule of the
11 department of human services for the specific program.

12 (b) The medical assistance recipient and the provider
13 sign and submit to the department of human services, with
14 the agreement, a separate written acknowledgment that the
15 recipient acknowledges that the provider has the necessary
16 competencies and training to provide the services specified in
17 the agreement. The written acknowledgment shall be accompanied
18 by documents verifying that the necessary competencies and
19 training requirements have been met.

20 b. This subsection shall not be interpreted as supplanting
21 the medical assistance recipient's choice to train a provider
22 in a manner that comports with the medical assistance
23 recipient's personal preferences and needs or to establish
24 additional provider qualifications based on the medical
25 assistance recipient's needs and preferences.

26 3. This chapter shall not be interpreted to preclude
27 an individual who provides direct care services but is not
28 otherwise required to be certified under this chapter from
29 being certified under this chapter on a voluntary basis.

30 Sec. 5. NEW SECTION. 152F.5 Duties of the board.

31 The board shall do all of the following:

32 1. Adopt rules consistent with this chapter, chapter 147,
33 chapter 272, and the recommendations of the direct care worker
34 advisory council established pursuant to 2008 Iowa Acts,
35 chapter 1188, section 69, including the recommendations in the

1 final report submitted by the advisory council to the governor
2 and the general assembly in March 2012, which are necessary for
3 the performance of its duties.

4 2. Adopt rules to provide a transition process that allows
5 individuals providing direct care services on or before January
6 1, 2015, who are subject to the certification requirements
7 of this chapter, to continue providing direct care services
8 while completing certification under this chapter. The rules
9 shall provide that certification requirements for an individual
10 subject to the transition process are based on consideration
11 of previous training, employment history, and experience. An
12 individual subject to the transition process shall complete the
13 requirements for direct care associate certification within a
14 time frame determined by rule of the board. The rules shall
15 provide for acceptance of prior record checks completed by the
16 individual's current employer in lieu of new record checks, if
17 the individual has had no gap in employment since completion
18 of the checks.

19 3. Establish standards and guidelines for direct care
20 professionals, including establishing or approving, as
21 applicable, training and curriculum requirements for direct
22 care associates and each advanced training credential and
23 specialty endorsement.

24 a. The curriculum for core training shall provide for
25 its incorporation into and completion through a flexible
26 delivery system, utilizing a variety of settings and methods,
27 as approved by the board, including but not limited to
28 employer-provided training, community college courses, and
29 online training including but not limited to the college of
30 direct support.

31 b. The curriculum requirements for health support
32 professionals shall satisfy the curriculum requirements
33 specified for nurse aides pursuant to 42 C.F.R. § 483.152.

34 c. The training and curriculum requirements approved by
35 the board shall provide for adaptations, accommodations,

1 modifications, and individualization for applicants, based on
2 their needs, abilities, and personal learning styles.

3 4. Require an individual to undergo criminal history
4 and child and dependent adult abuse record checks prior
5 to certification, and establish record checks requirements
6 applicable to direct care professionals consistent with section
7 135C.33. The requirement shall provide for acceptance of prior
8 record checks completed by the individual's current employer in
9 lieu of new record checks, if the individual has had no gap in
10 employment since completion of the checks.

11 5. Establish child abuse and dependent adult abuse
12 reporting and training requirements consistent with section
13 232.69 and chapters 235B and 235E, as applicable.

14 6. Establish standards and guidelines for certification
15 reciprocity.

16 7. Prepare and conduct, or prescribe, an examination for
17 applicants for certification.

18 8. Establish standards and guidelines for direct care
19 instructors and direct care trainers, including minimum
20 curriculum requirements and continuing education requirements.
21 Training and continuing education guidelines shall provide
22 diverse options for completion of the training and continuing
23 education, as appropriate, including but not limited to online,
24 employer-based, or educational institution-based opportunities.

25 9. Define educational activities which fulfill continuing
26 education requirements for renewal of certification.

27 10. Establish guidelines for inactive certification status
28 and inactive certification reentry.

29 11. Establish a grace period of no less than thirty days
30 during which a newly employed individual may provide direct
31 care services before being required to complete the appropriate
32 level of certification under this chapter.

33 12. Establish the parameters for an exemption from the
34 requirements of this chapter for an individual who provides
35 direct care services in an employment position for not more

1 than ninety days or seven hundred and twenty hours, annually.

2 13. Adopt rules to establish a process for requesting and
3 approving, as a part of the application for certification, a
4 financial hardship exemption from payment of the initial direct
5 care associate certification fee for individual applicants
6 whose income is one hundred percent or less of the federal
7 poverty level as defined by the most recently revised poverty
8 guidelines published by the United States department of health
9 and human services.

10 Sec. 6. NEW SECTION. **152F.6 Certification suspension and**
11 **revocation.**

12 A certification issued by the board under this chapter may be
13 suspended or revoked, or renewal of certification may be denied
14 by the board, for violation of any provision of this chapter,
15 section 147.55 or 272C.10, or rules adopted by the board.

16 Sec. 7. Section 10A.402, subsection 1, Code 2013, is amended
17 to read as follows:

18 1. Investigations relative to the practice of regulated
19 professions and occupations, except those within the
20 jurisdiction of the board of medicine, the board of pharmacy,
21 the dental board, ~~and~~ the board of nursing, and the board of
22 direct care professionals.

23 Sec. 8. Section 135.11A, Code 2013, is amended to read as
24 follows:

25 **135.11A Professional licensure division — other licensing**
26 **boards — expenses — fees.**

27 1. There shall be a professional licensure division within
28 the department of public health. Each board under chapter 147
29 or under the administrative authority of the department, except
30 the board of nursing, board of medicine, dental board, ~~and~~
31 board of pharmacy, and board of direct care professionals shall
32 receive administrative and clerical support from the division
33 and may not employ its own support staff for administrative and
34 clerical duties.

35 2. The professional licensure division and the licensing

1 boards may expend funds in addition to amounts budgeted, if
2 those additional expenditures are directly the result of actual
3 examination and exceed funds budgeted for examinations. Before
4 the division or a licensing board expends or encumbers an
5 amount in excess of the funds budgeted for examinations, the
6 director of the department of management shall approve the
7 expenditure or encumbrance. Before approval is given, the
8 department of management shall determine that the examination
9 expenses exceed the funds budgeted by the general assembly
10 to the division or board and the division or board does not
11 have other funds from which examination expenses can be paid.
12 Upon approval of the department of management, the division
13 or licensing board may expend and encumber funds for excess
14 examination expenses. The amounts necessary to fund the excess
15 examination expenses shall be collected as fees from additional
16 examination applicants and shall be treated as repayment
17 receipts as defined in section 8.2.

18 Sec. 9. Section 135.31, Code 2013, is amended to read as
19 follows:

20 **135.31 Location of boards — rulemaking.**

21 The offices for the board of medicine, the board of pharmacy,
22 the board of nursing, ~~and the dental board,~~ and the board
23 of direct care professionals shall be located within the
24 department of public health. The individual boards shall have
25 policymaking and rulemaking authority.

26 Sec. 10. Section 147.1, subsections 3 and 6, Code 2013, are
27 amended to read as follows:

28 3. *“Licensed” or “certified”*, when applied to a physician
29 and surgeon, podiatric physician, osteopathic physician and
30 surgeon, physician assistant, psychologist, chiropractor,
31 nurse, dentist, dental hygienist, dental assistant,
32 optometrist, speech pathologist, audiologist, pharmacist,
33 physical therapist, physical therapist assistant, occupational
34 therapist, occupational therapy assistant, orthotist,
35 prosthetist, pedorthist, respiratory care practitioner,

1 practitioner of cosmetology arts and sciences, practitioner
 2 of barbering, funeral director, dietitian, marital and
 3 family therapist, mental health counselor, social worker,
 4 massage therapist, athletic trainer, acupuncturist, nursing
 5 home administrator, hearing aid dispenser, ~~or~~ sign language
 6 interpreter or transliterator, or direct care professional
 7 means a person licensed under this subtitle.

8 6. "Profession" means medicine and surgery, podiatry,
 9 osteopathic medicine and surgery, practice as a physician
 10 assistant, psychology, chiropractic, nursing, dentistry,
 11 dental hygiene, dental assisting, optometry, speech pathology,
 12 audiology, pharmacy, physical therapy, physical therapist
 13 assisting, occupational therapy, occupational therapy
 14 assisting, respiratory care, cosmetology arts and sciences,
 15 barbering, mortuary science, marital and family therapy, mental
 16 health counseling, social work, dietetics, massage therapy,
 17 athletic training, acupuncture, nursing home administration,
 18 hearing aid dispensing, sign language interpreting or
 19 transliterating, orthotics, prosthetics, ~~or~~ pedorthics, or
 20 practice as a direct care professional.

21 Sec. 11. Section 147.2, subsection 1, Code 2013, is amended
 22 to read as follows:

23 1. A person shall not engage in the practice of medicine
 24 and surgery, podiatry, osteopathic medicine and surgery,
 25 psychology, chiropractic, physical therapy, physical
 26 therapist assisting, nursing, dentistry, dental hygiene,
 27 dental assisting, optometry, speech pathology, audiology,
 28 occupational therapy, occupational therapy assisting,
 29 orthotics, prosthetics, pedorthics, respiratory care,
 30 pharmacy, cosmetology arts and sciences, barbering, social
 31 work, dietetics, marital and family therapy or mental health
 32 counseling, massage therapy, mortuary science, athletic
 33 training, acupuncture, nursing home administration, hearing aid
 34 dispensing, or sign language interpreting or transliterating,
 35 ~~or~~ shall not practice as a physician assistant or as a direct

1 care professional, unless the person has obtained a license for
2 that purpose from the board for the profession.

3 Sec. 12. Section 147.13, Code 2013, is amended by adding the
4 following new subsection:

5 NEW SUBSECTION. 25. For direct care professionals, the
6 board of direct care professionals.

7 Sec. 13. Section 147.14, subsection 1, Code 2013, is amended
8 by adding the following new paragraph:

9 NEW PARAGRAPH. *x.* For the board of direct care
10 professionals, a total of eleven members, six of whom are
11 direct care professionals who represent diverse settings and
12 populations served, two members of the public who are consumers
13 or family members of consumers of direct care services, one
14 registered nurse who serves as a direct care instructor,
15 one human services professional who serves as a direct care
16 instructor, and one licensed nursing home administrator.

17 Sec. 14. Section 147.74, Code 2013, is amended by adding the
18 following new subsection:

19 NEW SUBSECTION. 23A. A direct care professional certified
20 under chapter 152F and this chapter may use the following:

21 *a.* A direct care professional certified as a direct care
22 associate may use the title "direct care associate" or the
23 letters "D.C.A." after the person's name.

24 *b.* A direct care professional certified as a community
25 living professional may use the title "community living
26 professional" or the letters "C.L.P." after the person's name.

27 *c.* A direct care professional certified as a personal
28 support professional may use the title "personal support
29 professional" or the letters "P.S.P." after the person's name.

30 *d.* A direct care professional certified as a health support
31 professional may use the title "health support professional" or
32 the letters "H.S.P." after the person's name.

33 *e.* A direct care professional certified with a specialty
34 endorsement may use the title or letters determined by the
35 specialty endorsement entity and approved by the board of

1 direct care professionals.

2 *f.* A direct care professional who completes a nurse aide
3 training and competency evaluation program approved by the
4 state as required pursuant to 42 C.F.R. § 483.152 may use the
5 title "certified nursing assistant" or the letters "C.N.A."
6 after the person's name.

7 Sec. 15. Section 147.80, subsection 3, Code 2013, is amended
8 to read as follows:

9 3. The board of medicine, the board of pharmacy, the dental
10 board, ~~and~~ the board of nursing, and the board of direct care
11 professionals shall retain individual executive officers, but
12 shall make every effort to share administrative, clerical, and
13 investigative staff to the greatest extent possible.

14 Sec. 16. Section 147.88, Code 2013, is amended to read as
15 follows:

16 **147.88 Inspections and investigations.**

17 The department of inspections and appeals may perform
18 inspections and investigations as required by this subtitle,
19 except inspections and investigations for the board of
20 medicine, board of pharmacy, board of nursing, ~~and~~ the dental
21 board, and the board of direct care professionals. The
22 department of inspections and appeals shall employ personnel
23 related to the inspection and investigative functions.

24 Sec. 17. Section 272C.1, subsection 6, Code 2013, is amended
25 by adding the following new paragraph:

26 NEW PARAGRAPH. *ag.* The board of direct care professionals,
27 created pursuant to chapter 147.

28 Sec. 18. MEDICAL ASSISTANCE CONSUMER-DIRECTED ATTENDANT
29 CARE PROGRAM AND CONSUMER CHOICES OPTION — RULES. The
30 department of human services shall adopt rules for the medical
31 assistance consumer-directed attendant care and consumer
32 choices options programs as follows:

33 1. To specify the necessary competencies and training that
34 a provider is required to demonstrate to deliver the specific
35 services included in a consumer choices option employment

1 agreement or consumer-directed attendant care agreement,
2 and the documentation necessary to demonstrate the required
3 competencies or training. The competencies shall be consistent
4 with those specified for direct care professionals under
5 chapter 152F, as enacted in this Act, relative to the types of
6 services to be provided.

7 2. To require that the medical assistance recipient and
8 the provider sign and submit to the department of human
9 services, with the consumer choices option employment agreement
10 or consumer-directed attendant care agreement, a separate
11 written acknowledgment that the recipient acknowledges that the
12 provider has the necessary competencies and training to provide
13 the services specified in the agreement.

14 Sec. 19. DEPARTMENT OF INSPECTIONS AND APPEALS — NURSE AIDE
15 CURRICULUM. The department of inspections and appeals shall
16 collaborate with the direct care workforce initiative workgroup
17 to ensure that the training curriculum requirements developed
18 for a health support professional credential satisfy the
19 requirements for a nurse aide pursuant to 42 C.F.R. § 483.152.
20 If the training curriculum requirements developed satisfy
21 this standard, beginning January 1, 2015, the department of
22 inspections and appeals shall approve the health support
23 professional training as the approved training curriculum for
24 nurse aides pursuant to 42 C.F.R. § 483.152.

25 Sec. 20. TRANSITION PROVISIONS.

26 1. An individual providing direct care services on or
27 before January 1, 2015, who is subject to the certification
28 requirements of this Act, may continue providing direct care
29 services while completing certification as required under this
30 Act. The board of direct care professionals shall adopt rules
31 to provide that certification requirements for an individual
32 subject to the transition process are based on consideration
33 of previous training, employment history, and experience, and
34 require such individuals to complete the requirements for
35 direct care associate certification within the time frame

1 determined by rule of the board.

2 2. An individual who is registered on or before January
3 1, 2015, on the Iowa direct care worker registry established
4 by the department of inspections and appeals, is deemed to
5 satisfy the certification requirements for a health support
6 professional under this Act and, notwithstanding any provision
7 of this Act to the contrary, shall, upon application, be issued
8 initial certification as a direct care associate or a health
9 support professional, as requested by the individual.

10 3. Notwithstanding sections 147.14 and 147.16, for the
11 initial board of direct care professionals, the governor may
12 appoint, subject to confirmation by the senate, in lieu of the
13 six members required to be direct care professionals and the
14 two members required to be direct care instructors, members
15 with employment experience providing direct care services in
16 diverse settings or expertise that is substantially equivalent
17 to the professional requirements for a direct care professional
18 or direct care instructor, as applicable.

19 Sec. 21. IMPLEMENTATION. The provisions of this Act shall
20 be implemented as follows:

21 1. The sections of this Act relating to the board of direct
22 care professionals including sections 152F.1 and 152F.5, as
23 enacted in this Act; sections 10A.402, 135.11A, 135.31, 147.13,
24 147.14, 147.80, 147.88, and 272C.1, as amended in this Act,
25 and as specified in the transition provisions; and the section
26 of this Act providing transition provisions relating to the
27 board shall be implemented so that a board of direct care
28 professionals is appointed no later than December 15, 2013.

29 2. The sections of this Act relating to requirements for
30 certification of direct care professionals including sections
31 152F.2, 152F.3, 152F.4, and 152F.6, as enacted in this Act;
32 and sections 147.1, 147.2, and 147.74, as amended in this Act,
33 shall be implemented so that the requirements are applicable
34 beginning no later than January 1, 2015.

35 Sec. 22. FUNDING PROVISIONS.

1 1. The department of public health shall limit the indirect
2 service charge for the board of direct care professionals to
3 not more than fifteen percent.

4 2. It is the intent of the general assembly that the board
5 of direct care professionals be self-sustaining by January 1,
6 2018.

7 Sec. 23. MEDICAL ASSISTANCE — PREFERENTIAL RATE FOR
8 CERTIFIED DIRECT CARE PROFESSIONALS. The department
9 of human services shall review the feasibility of and
10 benefits to the medical assistance program in providing a
11 preferential reimbursement rate for services provided by
12 direct care professionals based upon the individual's level
13 of certification. The department shall report findings and
14 recommendations to the chairpersons and ranking members of the
15 joint appropriations subcommittee on health and human services
16 by December 15, 2013.

17 Sec. 24. EFFECTIVE UPON ENACTMENT. This Act, being deemed
18 of immediate importance, takes effect upon enactment.

19 EXPLANATION

20 This bill provides for the certification of direct care
21 professionals under new Code chapter 152F. The bill provides
22 definitions relating to levels of certification and services
23 provided, and defines the "board" as the board of direct care
24 professionals.

25 The bill requires individuals who provide direct care
26 services for compensation (direct care professionals) to be
27 certified as direct care associates.

28 The bill also provides for advanced training and specialty
29 endorsements as the bases for higher levels of certification.

30 The bill provides requirements for certification, renewal
31 of certification, continuing education, and reciprocity
32 of certification. The bill provides for exemptions
33 from certification and for suspension or revocation of
34 certification. The bill specifies the duties of the board of
35 direct care professionals.

1 The bill makes conforming changes in the Code including
2 those under Code chapter 147 (general provisions for
3 health-related professions), and Code chapter 272C (regulation
4 of licensed professions and occupations).

5 The bill provides transition provisions for the initial
6 appointment of the board and for application of requirements to
7 direct care professionals providing direct care services prior
8 to implementation of direct care professional requirements on
9 January 1, 2015. The bill takes effect upon enactment, but
10 provides for phased-in implementation.

11 The provisions of Code chapters 147 and 272C, including
12 a provision in Code section 147.86 that a violation of Code
13 chapter 147 or new Code chapter 152F is a serious misdemeanor,
14 are applicable to new Code chapter 152F.