

441—24.51(230A) Community mental health center designation.

24.51(1) Application. An organization seeking designation as a community mental health center or a designated community mental health center seeking to expand its designated catchment area shall submit the following to the department:

a. Form 470-3005, Accreditation Application, if requesting accreditation for a CMHC core service(s) other than outpatient psychotherapy and evaluation.

b. Form 470-5691, Community Mental Health Center Designation, signed by the organization's chief executive officer and the chairperson of the governing body.

c. Form 470-5692, Community Mental Health Center Self-Assessment.

24.51(2) Exceptional circumstances. Designation for more than one CMHC in a county shall require a determination of exceptional circumstances by the department.

a. Applicants requesting designation for a county that is part of another CMHC's catchment area shall submit information supporting their designation request including, but not limited to, the following:

(1) Evidence that the target population does not have access to the required core services with minimal or no service denials.

(2) Ability to staff core services within the capacity of the catchment area's workforce.

(3) Mental health and disability services (MHDS) region(s) letter of support that includes the catchment area's ability to financially support more than one CMHC.

(4) Notification to the existing CMHC of intention to apply for designation.

(5) Evidence of collaboration and coordination with existing CMHC.

b. Paragraph 24.51(2) "a" and numbered paragraph "2" in rule 441—24.52(230A) do not apply to CMHCs designated as described in Iowa Code section 230A.104(2) "c."

24.51(3) Designation. The department shall review information submitted by the applicant in accordance with subrule 24.51(1), subrule 24.51(2), and paragraph 24.51(3) "a" as well as input from MHDS regions, neighboring CMHCs, and mental health service providers to determine if there will be a recommendation for designation. Recommendations for designation shall be submitted by the department to the MHDS commission for approval.

a. Applicants shall submit the following:

(1) MHDS region(s) letter of support.

(2) Evidence of active three-year accreditation for outpatient and evaluation services under this chapter.

(3) Formal agreement with appropriately accredited provider if the applicant is not directly providing the service for the following:

1. Day treatment, partial hospitalization, or psychosocial rehabilitation services, and

2. Emergency or 24-hour crisis response.

(4) Form 470-5692, Community Mental Health Center Self-Assessment, that demonstrates the applicant's ability to:

1. Provide core services in accordance with rule 441—24.54(230A).

2. Meet service access standards according to 441—subparagraph 25.4(2) "a"(1) and 441—paragraphs 25.4(3) "a" and "c."

3. Serve all ages of the target population with minimal to no service denials.

4. Make referrals for services provided outside the organization.

b. The department shall notify the applicant in writing of the result of the review. If the department recommends designation, the applicant shall attend the MHDS commission meeting at which the department presents the request to the commission.

c. CMHCs designated in accordance with Iowa Code chapter 230A prior to January 1, 2021, or designated as a CMHC by a county prior to October 1, 2010, will maintain their designation provided they meet the requirements set forth in rule 441—24.55(230A).

d. Non-CMHC agencies designated as described in Iowa Code section 230A.107(2) may apply to be designated as a CMHC. The organization shall submit all required application materials in this subrule at least six months prior to the expiration of the organization's current accreditation under this chapter.

24.51(4) *Withdrawal of designation.* Community mental health centers seeking to withdraw their designation for part or all of their catchment area shall submit to the department Form 470-5691, Community Mental Health Center Designation, signed by the organization's chief executive officer and the chairperson of the governing body. The form shall include:

- a.* Current catchment area and catchment area requesting withdrawal of designation.
- b.* Reason for withdrawal request.
- c.* Date withdrawal is to occur.
- d.* Continuity of care plan including but not limited to communication and coordination with:
 - (1) Individuals served.
 - (2) Community mental health centers and mental health service providers serving neighboring and current catchment area.
 - (3) MHDS region(s).
 - (4) General public.

24.51(5) *Agreement.* The board of directors of a designated CMHC shall enter into an agreement with the department in accordance with Iowa Code section 230A.103(3).

24.51(6) *Appeal procedure.* An appeal to a designation determination may be filed in accordance with rule 441—24.8(225C).

24.51(7) *Exception to policy.* Requests for exceptions to policy shall be submitted in accordance with rule 441—24.9(225C).

24.51(8) *Denial of designation or revocation.* The department may deny or revoke the provider's designation at any time for any of the following reasons:

- a.* The provider has failed to provide information requested pursuant to subrule 24.51(1).
- b.* The provider does not meet criteria pursuant to subrule 24.51(3).
- c.* The provider refuses to allow the department to conduct a site visit pursuant to subrule 24.5(3).
- d.* The provider has failed to implement the corrective actions submitted and approved by the department pursuant to subrule 24.55(2).
- e.* The provider's accreditation was discontinued or revoked pursuant to paragraph 24.5(5) "h."

[ARC 6321C, IAB 5/18/22, effective 7/1/22]