

**441—82.7(249A) Initial approval for ICF/ID care.**

**82.7(1) Referral through targeted case management.** Persons seeking ICF/ID placement shall be referred through targeted case management. The case management program shall:

- a. Identify appropriate service alternatives;
- b. Inform the person of the alternatives; and
- c. Refer a person without appropriate alternatives to the department.

**82.7(2) Approval of placement by department.**

a. Within 30 days of receipt of a referral, the department shall:

- (1) Approve ICF/ID placement;
- (2) Offer a home- or community-based alternative; or
- (3) Refer the person back to the targeted case management program for further consideration of service needs.

b. Once ICF/ID placement is approved, including approval of ICF/ID level of care as described in subrule 82.7(3), the eligible person, or the person's representative, is free to seek placement in the facility of the person's or the person's representative's choice, subject to the provision of ICF/ID services through managed care pursuant to 441—Chapter 73.

**82.7(3) Approval of level of care.** Medicaid payment shall be made for ICF/ID care upon certification of need for this level of care by a licensed physician of medicine or osteopathy and approval by the Iowa Medicaid quality improvement organization (QIO) unit.

**82.7(4) Appeal rights.** Notice of adverse action and right to appeal shall be given in accordance with 441—Chapter 7 and rule 441—16.3(17A).

This rule is intended to implement Iowa Code section 249A.12.

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