

Veenstra, Hammond, Behn

SSB 3138  
Human Resources

Succeeded By  
HF 2280

SENATE FILE \_\_\_\_\_  
BY (PROPOSED COMMITTEE ON  
HUMAN RESOURCES BILL BY  
CHAIRPERSON REDWINE)

Passed Senate, Date \_\_\_\_\_ Passed House, Date \_\_\_\_\_  
Vote: Ayes \_\_\_\_\_ Nays \_\_\_\_\_ Vote: Ayes \_\_\_\_\_ Nays \_\_\_\_\_  
Approved \_\_\_\_\_

**A BILL FOR**

1 An Act relating to the requirements of the department of human  
2 services for certain child welfare services providers.  
3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

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1 Section 1. REHABILITATIVE TREATMENT CHILD WELFARE SERVICES  
2 PROVIDERS.

3 1. The department of human services shall adopt rules  
4 utilizing emergency procedures as provided in subsection 2 to  
5 implement on or before January 2, 2003, the recommendations of  
6 the department's rehabilitative treatment services provider  
7 regulation and continuous quality improvement work group as  
8 follows:

9 a. Implementing deemed status for those providers who are  
10 certified, accredited, or otherwise found to be in compliance  
11 with the standards of a nationally recognized body.

12 b. Addressing requirements for staff qualifications,  
13 ratios, and supervision.

14 c. Revising requirements for treatment plan development,  
15 review, and revision, and for treatment records.

16 d. Applying shared risk or loss provisions for retroactive  
17 audits.

18 e. Eliminating the technical assistance quality assurance  
19 function.

20 f. Ending the practice of adding additional codes.

21 g. Providing additional flexibility in recognizing staff  
22 qualifications.

23 h. Implementing provider usage of the single contact  
24 repository for employment background checks as authorized  
25 under section 235A.16, subsection 2.

26 i. Removing the caseload and staffing requirements  
27 applicable to family preservation services.

28 2. The department of human services shall adopt  
29 administrative rules under section 17A.4, subsection 2, and  
30 section 17A.5, subsection 2, paragraph "b", to implement this  
31 section and the rules shall become effective immediately upon  
32 filing, unless the effective date is delayed by the  
33 administrative rules review committee, notwithstanding section  
34 17A.4, subsection 5, and section 17A.8, subsection 9, or a  
35 later effective date is specified in the rules. Any rules

1 adopted in accordance with this section shall not take effect  
2 before the administrative rules review committee reviews the  
3 rules. Any rules adopted in accordance with this section  
4 shall also be published as notice of intended action as  
5 provided in section 17A.4.

6 EXPLANATION

7 This bill relates to the requirements of the department of  
8 human services for certain child welfare services providers  
9 reimbursed under the medical assistance program for  
10 rehabilitative treatment services. The department is directed  
11 to adopt rules implementing the recommendations of the  
12 department's rehabilitative treatment services provider  
13 regulation and continuous quality improvement work group  
14 concerning the treatment services providers. The particular  
15 recommendation areas to be implemented are specified. The  
16 department is required to utilize emergency rules procedures  
17 that waive the requirements for public comment and hearings in  
18 order to implement the changes on or before January 2, 2003.

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REPRINTED

FILED FEB 21 2002

SENATE FILE 2280

BY COMMITTEE ON HUMAN RESOURCES

(SUCCESSOR TO SSB 3138)

Passed Senate, Date <sup>(P. 584)</sup> 3-12-02      Passed House, Date <sup>(P. 1198)</sup> 4-8-02  
 Vote: Ayes 47 Nays 0      Vote: Ayes 92 Nays 0  
 Approved April 23, 2002

A BILL FOR

1 An Act relating to the requirements of the department of human  
 2 services for certain child welfare services providers.

3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

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SF 2280

1 Section 1. REHABILITATIVE TREATMENT CHILD WELFARE SERVICES  
2 PROVIDERS.

3 1. The department of human services shall adopt rules  
4 utilizing emergency procedures as provided in subsection 2 to  
5 implement on or before January 2, 2003, the eight  
6 recommendation items identified as having the highest priority  
7 for implementation by the department's rehabilitative  
8 treatment services provider regulation and continuous quality  
9 improvement work group and may implement any of the other  
10 identified recommendation items at the same time. The  
11 department shall implement the remaining identified  
12 recommendation items during the 2003 calendar year. The  
13 recommendation items for implementation on or before January  
14 2, 2003, shall include but are not limited to the eight  
15 recommendation items that address the following topics:

16 a. Deemed status for those providers who are certified,  
17 accredited, or otherwise found to be in compliance with the  
18 standards of a nationally recognized body.

19 b. Group care requirements involving therapy and  
20 counseling hours per week.

21 c. Staff qualifications.

22 d. Group care requirements involving documentation.

23 e. Treatment records.

24 f. Treatment plan.

25 g. Day treatment.

26 h. Supervision requirements.

27 2. The department of human services shall adopt  
28 administrative rules under section 17A.4, subsection 2, and  
29 section 17A.5, subsection 2, paragraph "b", to implement this  
30 section and the rules shall become effective immediately upon  
31 filing, unless the effective date is delayed by the  
32 administrative rules review committee, notwithstanding section  
33 17A.4, subsection 5, and section 17A.8, subsection 9, or a  
34 later effective date is specified in the rules. Any rules  
35 adopted in accordance with this section shall not take effect

1 before the administrative rules review committee reviews the  
2 rules. Any rules adopted in accordance with this section  
3 shall also be published as notice of intended action as  
4 provided in section 17A.4.

5 EXPLANATION

6 This bill relates to the requirements of the department of  
7 human services for certain child welfare services providers  
8 reimbursed under the medical assistance program for  
9 rehabilitative treatment services. The department is directed  
10 to adopt rules implementing the recommendations of the  
11 department's rehabilitative treatment services provider  
12 regulation and continuous quality improvement work group  
13 concerning the treatment services providers. Particular  
14 recommendation topics to be initially implemented are  
15 specified. The department is required to utilize emergency  
16 rules procedures that waive the requirements for public  
17 comment and hearings in order to implement the initial changes  
18 on or before January 2, 2003.

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**SENATE FILE 2280****S-5145**

1 Amend Senate File 2280 as follows:  
2 1. Page 1, by striking lines 1 through 26 and  
3 inserting the following:  
4 "Section 1. REHABILITATIVE TREATMENT CHILD WELFARE  
5 SERVICES PROVIDERS.  
6 1. The department of human services shall act in  
7 accordance with this section to implement the high  
8 priority recommendation items identified by the  
9 department's rehabilitative treatment services  
10 provider regulation and continuous quality improvement  
11 work group and listed in this section. In order to  
12 implement a listed item, the department must determine  
13 that the item can be implemented without additional  
14 cost to the state and implementation of the item,  
15 including any necessary state medical assistance  
16 program plan amendment, must be approved by the  
17 federal center for Medicare and Medicaid services. If  
18 administrative rules are required for implementation  
19 of an item, the department shall adopt rules utilizing  
20 the emergency procedures provided in subsection 4.  
21 2. If the implementation conditions in subsection  
22 1 are met, the following items shall be implemented on  
23 or before January 2, 2003:  
24 a. Permitting deemed status for those providers of  
25 residential treatment services that are certified,  
26 accredited, or determined by the department to be in  
27 compliance with the standards of a nationally  
28 recognized body.  
29 b. Utilizing a calculation of the number of hours  
30 per week for therapy and counseling in lieu of a  
31 monthly billing calculation.  
32 c. Accepting, for deemed status providers, staff  
33 qualifications that meet minimum standards established  
34 by the applicable nationally recognized body and  
35 requiring a clinical supervisory plan for those staff  
36 who do not meet the minimum standards.  
37 d. Utilizing a weekly documentation requirement  
38 for group care skill development services in lieu of  
39 daily documentation.  
40 e. Eliminating the requirements that a case  
41 permanency plan be included in the provider's records,  
42 that the setting in which the service was provided be  
43 documented, and that correspondence with the referral  
44 worker be included in the provider's records.  
45 f. Eliminating the care plan requirements  
46 regarding licensing and treatment plan review;  
47 accepting a change in the treatment plan in lieu of  
48 requiring the plan to be rewritten; and permitting the  
49 provider to determine the author of the treatment  
50 plan.

**S-5145**

**S-5145**

Page 2

1 g. Establishing an hourly rate and reimbursement  
2 category for day treatment.

3 h. Eliminating staff supervision requirements from  
4 licensure rules.

5 3. If the department determines the items can be  
6 implemented without additional cost to the state, the  
7 following items shall be submitted on or before June  
8 30, 2003, to the federal center for Medicare and  
9 Medicaid services for approval:

10 a. Modifying retroactive audit requirements to  
11 include an explanation for the possible overpayment  
12 due from the provider; waiving of a provider  
13 overpayment of less than a certain dollar threshold;  
14 increasing training for financial and service  
15 transaction documentation; and recategorizing the  
16 group care provider service reimbursements.

17 b. Permitting providers to determine staff-to-  
18 client ratios for licensure purposes.

19 c. Utilizing electronic record checks for staff  
20 employment.

21 d. Permitting providers to determine staffing  
22 requirements for family preservation services.

23 e. Creating reimbursement classifications for  
24 additional services including transportation, home  
25 study, missed appointment, age differentiation of  
26 children, crisis intervention, and planning time for  
27 court hearings, staffing meetings, and school  
28 conferences.

29 f. Requiring that the Iowa plan for behavioral  
30 health contractor provide reimbursement for substance  
31 abuse evaluations of children who are eligible for the  
32 medical assistance program.

33 g. Combining all services offered by a single  
34 provider within one contract.

35 h. Collecting provider overpayments as few times  
36 as is practicable.

37 i. Permitting the provider and the department to  
38 communicate with the contractor that provides the  
39 service authorization for a child.

40 j. Eliminating the reimbursement report  
41 requirement for documentation of the specific amount  
42 of time a service is provided.

43 k. Eliminating reimbursement rate limitations on  
44 staff and administrative salary costs."

45 2. Page 1, line 27, by striking the figure "2"  
46 and inserting the following: "4".

**By** KEN VEENSTRA**S-5145** FILED MARCH 12, 2002

ADOPTED

(p. 583)

A-3/12/02 Human Res  
H. 3/12/02 Amend/old Pass  
W/IT-8306

SENATE FILE **2280**  
BY COMMITTEE ON HUMAN RESOURCES

(SUCCESSOR TO SSB 3138)

(AS AMENDED AND PASSED BY THE SENATE MARCH 12, 2002)

\_\_\_\_\_ - New Language by the Senate

Passed Senate, Date <sup>(P. 1065)</sup> 4/10/02 Passed House, Date <sup>(P. 1198)</sup> 4-8-02  
Vote: Ayes 50 Nays 0 Vote: Ayes 92 Nays 0  
Approved 4/23/02

**A BILL FOR**

1 An Act relating to the requirements of the department of human  
2 services for certain child welfare services providers.  
3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

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S.F. 2280

**SENATE FILE 2280**

**H-8306**

1 Amend Senate File 2280, as amended, passed, and  
2 reprinted by the Senate, as follows:

3 1. Page 3, by inserting after line 29 the  
4 following:

5 "5. The department of human services shall limit  
6 implementation of this section to the extent to which  
7 funding is available for the costs of implementation."

By COMMITTEE ON HUMAN RESOURCES  
BODDICKER of Cedar, Chairperson

**H-8306 FILED MARCH 18, 2002**

*0/0 4-8-02 (P. 1198)*

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1 Section 1. REHABILITATIVE TREATMENT CHILD WELFARE SERVICES  
2 PROVIDERS.

3 1. The department of human services shall act in  
4 accordance with this section to implement the high priority  
5 recommendation items identified by the department's  
6 rehabilitative treatment services provider regulation and  
7 continuous quality improvement work group and listed in this  
8 section. In order to implement a listed item, the department  
9 must determine that the item can be implemented without  
10 additional cost to the state and implementation of the item,  
11 including any necessary state medical assistance program plan  
12 amendment, must be approved by the federal center for Medicare  
13 and Medicaid services. If administrative rules are required  
14 for implementation of an item, the department shall adopt  
15 rules utilizing the emergency procedures provided in  
16 subsection 4.

17 2. If the implementation conditions in subsection 1 are  
18 met, the following items shall be implemented on or before  
19 January 2, 2003:

20 a. Permitting deemed status for those providers of  
21 residential treatment services that are certified, accredited,  
22 or determined by the department to be in compliance with the  
23 standards of a nationally recognized body.

24 b. Utilizing a calculation of the number of hours per week  
25 for therapy and counseling in lieu of a monthly billing  
26 calculation.

27 c. Accepting, for deemed status providers, staff  
28 qualifications that meet minimum standards established by the  
29 applicable nationally recognized body and requiring a clinical  
30 supervisory plan for those staff who do not meet the minimum  
31 standards.

32 d. Utilizing a weekly documentation requirement for group  
33 care skill development services in lieu of daily  
34 documentation.

35 e. Eliminating the requirements that a case permanency

1 plan be included in the provider's records, that the setting  
2 in which the service was provided be documented, and that  
3 correspondence with the referral worker be included in the  
4 provider's records.

5 f. Eliminating the care plan requirements regarding  
6 licensing and treatment plan review; accepting a change in the  
7 treatment plan in lieu of requiring the plan to be rewritten;  
8 and permitting the provider to determine the author of the  
9 treatment plan.

10 g. Establishing an hourly rate and reimbursement category  
11 for day treatment.

12 h. Eliminating staff supervision requirements from  
13 licensure rules.

14 3. If the department determines the items can be  
15 implemented without additional cost to the state, the  
16 following items shall be submitted on or before June 30, 2003,  
17 to the federal center for Medicare and Medicaid services for  
18 approval:

19 a. Modifying retroactive audit requirements to include an  
20 explanation for the possible overpayment due from the  
21 provider; waiving of a provider overpayment of less than a  
22 certain dollar threshold; increasing training for financial  
23 and service transaction documentation; and recategorizing the  
24 group care provider service reimbursements.

25 b. Permitting providers to determine staff-to-client  
26 ratios for licensure purposes.

27 c. Utilizing electronic record checks for staff  
28 employment.

29 d. Permitting providers to determine staffing requirements  
30 for family preservation services.

31 e. Creating reimbursement classifications for additional  
32 services including transportation, home study, missed  
33 appointment, age differentiation of children, crisis  
34 intervention, and planning time for court hearings, staffing  
35 meetings, and school conferences.

1 f. Requiring that the Iowa plan for behavioral health  
2 contractor provide reimbursement for substance abuse  
3 evaluations of children who are eligible for the medical  
4 assistance program.

5 g. Combining all services offered by a single provider  
6 within one contract.

7 h. Collecting provider overpayments as few times as is  
8 practicable.

9 i. Permitting the provider and the department to  
10 communicate with the contractor that provides the service  
11 authorization for a child.

12 j. Eliminating the reimbursement report requirement for  
13 documentation of the specific amount of time a service is  
14 provided.

15 k. Eliminating reimbursement rate limitations on staff and  
16 administrative salary costs.

17 4. The department of human services shall adopt  
18 administrative rules under section 17A.4, subsection 2, and  
19 section 17A.5, subsection 2, paragraph "b", to implement this  
20 section and the rules shall become effective immediately upon  
21 filing, unless the effective date is delayed by the  
22 administrative rules review committee, notwithstanding section  
23 17A.4, subsection 5, and section 17A.8, subsection 9, or a  
24 later effective date is specified in the rules. Any rules  
25 adopted in accordance with this section shall not take effect  
26 before the administrative rules review committee reviews the  
27 rules. Any rules adopted in accordance with this section  
28 shall also be published as notice of intended action as  
29 provided in section 17A.4.

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**SENATE FILE 2280****H-8490**

1 Amend Senate File 2280, as amended, passed, and  
2 reprinted by the Senate, as follows:

3 1. By striking everything after the enacting  
4 clause and inserting the following:

5 "Section 1. REHABILITATIVE TREATMENT CHILD WELFARE  
6 SERVICES PROVIDERS.

7 1. The department of human services may adopt  
8 rules utilizing the emergency procedures provided in  
9 subsection 4 as necessary to implement the high-  
10 priority recommendation items identified by the  
11 department's rehabilitative treatment services  
12 provider regulation and quality improvement work group  
13 listed in this section. In order to implement a  
14 listed item, the department must determine that the  
15 item can be implemented without additional cost to the  
16 state and, if implementation of the item requires a  
17 state medical assistance program plan amendment, the  
18 item must be approved by the federal center for  
19 Medicare and Medicaid services.

20 2. Subject to the implementation conditions in  
21 subsection 1, the department shall adopt rules to take  
22 effect on or before April 1, 2003, or within sixty  
23 days after receiving the federal center's approval,  
24 whichever is later, to implement all of the following:

25 a. Permitting deemed status for those providers of  
26 services that are certified, or accredited to be in  
27 compliance with relevant standards by the joint  
28 commission on the accreditation of health care  
29 organizations or the council on accreditation of  
30 services for families and children and that make  
31 accreditation reports and records available to the  
32 department.

33 b. Amending rules to maintain the group care  
34 standard for a weekly average number of hours of  
35 therapy and counseling, but determine compliance by  
36 averaging the hours per week over the course of a  
37 month. The recoupment for failure to comply shall be  
38 applied for a week at a time for noncompliance, not to  
39 exceed the number of days paid. This standard shall  
40 not be applied to a highly structured juvenile group  
41 care program.

42 c. Expanding the set of qualifications accepted  
43 for rehabilitative treatment services staff positions.

44 d. Utilizing a weekly results summary for  
45 documentation of the group care requirement for daily  
46 provision of skills development.

47 3. Subject to the implementation conditions in  
48 subsection 1, the department shall adopt rules to take  
49 effect on or before December 31, 2003, or within sixty  
50 days after receiving the federal center's approval,

**H-8490**

**H-8490**

Page 2

1 whichever is later, to implement all of the following:  
2 a. Eliminating the requirements that a case  
3 permanency plan be included in the provider's records,  
4 that the setting in which the service was provided be  
5 documented, and that correspondence with the referral  
6 worker be included in the provider's records.  
7 b. Eliminating the care plan requirements  
8 regarding licensing and treatment plan review;  
9 accepting a change in the treatment plan in lieu of  
10 requiring the plan to be rewritten; and permitting the  
11 provider to determine the author of the treatment  
12 plan.  
13 c. Eliminating staff supervision requirements from  
14 licensure rules.  
15 4. The department of human services may adopt  
16 administrative rules under section 17A.4, subsection  
17 2, and section 17A.5, subsection 2, paragraph "b", to  
18 implement this section and the rules shall become  
19 effective immediately upon filing, unless the  
20 effective date is delayed by the administrative rules  
21 review committee, notwithstanding section 17A.4,  
22 subsection 5, and section 17A.8, subsection 9, or a  
23 later effective date is specified in the rules. Any  
24 rules adopted in accordance with this section shall  
25 not take effect before the administrative rules review  
26 committee reviews the rules. Any rules adopted in  
27 accordance with this section shall also be published  
28 as notice of intended action as provided in section  
29 17A.4.  
30 Sec. \_\_\_\_ . EFFECTIVE DATE. This Act, being deemed  
31 of immediate importance, takes effect upon enactment."  
32 2. Title page, line 2, by inserting after the  
33 word "providers" the following: "and providing an  
34 effective date".  
35 3. By renumbering as necessary.

**By** TYMESON of Madison**H-8490** FILED APRIL 2, 2002*Adopted*  
*4-8-02**(P. 1198)*

# Legislative Fiscal Bureau

## Fiscal Note

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SF 2280 - DHS, Child Welfare Requirements (LSB 6631 SV.1)  
Analyst: Sue Lerdal (Phone: (515) 281-7794) (sue.lerdal@legis.state.ia.us)  
Fiscal Note Version – As passed by the Senate

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### Description

Senate File 2280 requires the Department of Human Services (DHS) to adopt various administrative rules to change provider eligibility, reimbursements, staffing and service requirements, and treatment requirements.

### Assumptions

1. Only required rehabilitative treatment service changes that have no State cost impact, as determined by the Department and the federal Centers for Medicare and Medicaid Services, will be implemented.
2. The DHS will review each specified change in the Bill and will request and receive information from the federal Centers for Medicare and Medicaid Services regarding financial impact.
3. The DHS will file appropriate State plan amendments with the federal Centers for Medicare and Medicaid Services within the required timelines for the specified changes determined to have no State impact.

### Fiscal Impact

The General Fund fiscal impact of SF 2280 would be as follows:

There is no cost to the implementation of the changes for rehabilitative treatment services, as determined by the DHS and the federal Centers for Medicare and Medicaid Services.

If permanent staff is added, \$20,000 and 0.5 FTE position would be required for FY 2003 and FY 2004. Additional one-time staff of 3.0 FTE positions and support would be required for FY 2003, costing approximately \$180,000.

#### Recap of SF 2280 Impact of State Costs

	<u>FY 2003</u>	<u>FY 2004</u>
Permanent DHS Staff	\$ 20,000	\$20,000
Temporary DHS Staff and Support	180,000	0
Total	<u>\$200,000</u>	<u>\$20,000</u>

### Sources

Department of Human Services  
Coalition of Children and Families  
Merit Behavioral Care of Iowa

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/s/ Dennis C Prouty

March 18, 2002

SENATE FILE 2280

H-8538

1 Amend the amendment, H-8490, to Senate File 2280,  
2 as amended, passed, and reprinted by the Senate, as  
3 follows:  
4 1. Page 2, by striking lines 2 through 6.  
5 2. Page 2, line 7, by striking the letter "b."  
6 and inserting the following: "a."  
7 3. Page 2, by striking lines 13 and 14 and  
8 inserting the following:  
9 "b. Revising and combining provider requirements  
10 involving licensing, contracting, and certification so  
11 that duplicative regulatory requirements are  
12 eliminated or minimized while the department maintains  
13 its quality assurance role to an appropriate degree.  
14 The requirements addressed shall include but are not  
15 limited to those involving documentation in records,  
16 and treatment plan provisions involving reviews,  
17 changes, and authors."  
18 4. By renumbering, redesignating, and correcting  
19 internal references as necessary.

By SMITH of Marshall  
TYMESON of Madison

H-8538 FILED APRIL 8, 2002

*Adopted*  
4-8-02  
(p. 1198)

**HOUSE AMENDMENT TO  
SENATE FILE 2280**

**S-5407**

1 Amend Senate File 2280, as amended, passed, and  
2 reprinted by the Senate, as follows:

3 1. By striking everything after the enacting  
4 clause and inserting the following:

5 "Section 1. REHABILITATIVE TREATMENT CHILD WELFARE  
6 SERVICES PROVIDERS.

7 1. The department of human services may adopt  
8 rules utilizing the emergency procedures provided in  
9 subsection 4 as necessary to implement the high-  
10 priority recommendation items identified by the  
11 department's rehabilitative treatment services  
12 provider regulation and quality improvement work group  
13 listed in this section. In order to implement a  
14 listed item, the department must determine that the  
15 item can be implemented without additional cost to the  
16 state and, if implementation of the item requires a  
17 state medical assistance program plan amendment, the  
18 item must be approved by the federal center for  
19 Medicare and Medicaid services.

20 2. Subject to the implementation conditions in  
21 subsection 1, the department shall adopt rules to take  
22 effect on or before April 1, 2003, or within sixty  
23 days after receiving the federal center's approval,  
24 whichever is later, to implement all of the following:

25 a. Permitting deemed status for those providers of  
26 services that are certified, or accredited to be in  
27 compliance with relevant standards by the joint  
28 commission on the accreditation of health care  
29 organizations or the council on accreditation of  
30 services for families and children and that make  
31 accreditation reports and records available to the  
32 department.

33 b. Amending rules to maintain the group care  
34 standard for a weekly average number of hours of  
35 therapy and counseling, but determine compliance by  
36 averaging the hours per week over the course of a  
37 month. The recoupment for failure to comply shall be  
38 applied for a week at a time for noncompliance, not to  
39 exceed the number of days paid. This standard shall  
40 not be applied to a highly structured juvenile group  
41 care program.

42 c. Expanding the set of qualifications accepted  
43 for rehabilitative treatment services staff positions.

44 d. Utilizing a weekly results summary for  
45 documentation of the group care requirement for daily  
46 provision of skills development.

47 3. Subject to the implementation conditions in  
48 subsection 1, the department shall adopt rules to take  
49 effect on or before December 31, 2003, or within sixty  
50 days after receiving the federal center's approval,

**S-5407**

**S-5407**

Page 2

1 whichever is later, to implement all of the following:  
2 a. Eliminating the care plan requirements  
3 regarding licensing and treatment plan review;  
4 accepting a change in the treatment plan in lieu of  
5 requiring the plan to be rewritten; and permitting the  
6 provider to determine the author of the treatment  
7 plan.  
8 b. Revising and combining provider requirements  
9 involving licensing, contracting, and certification so  
10 that duplicative regulatory requirements are  
11 eliminated or minimized while the department maintains  
12 its quality assurance role to an appropriate degree.  
13 The requirements addressed shall include but are not  
14 limited to those involving documentation in records,  
15 and treatment plan provisions involving reviews,  
16 changes, and authors.  
17 4. The department of human services may adopt  
18 administrative rules under section 17A.4, subsection  
19 2, and section 17A.5, subsection 2, paragraph "b", to  
20 implement this section and the rules shall become  
21 effective immediately upon filing, unless the  
22 effective date is delayed by the administrative rules  
23 review committee, notwithstanding section 17A.4,  
24 subsection 5, and section 17A.8, subsection 9, or a  
25 later effective date is specified in the rules. Any  
26 rules adopted in accordance with this section shall  
27 not take effect before the administrative rules review  
28 committee reviews the rules. Any rules adopted in  
29 accordance with this section shall also be published  
30 as notice of intended action as provided in section  
31 17A.4.  
32 Sec. \_\_\_\_ . EFFECTIVE DATE. This Act, being deemed  
33 of immediate importance, takes effect upon enactment."  
34 2. Title page, line 2, by inserting after the  
35 word "providers" the following: "and providing an  
36 effective date".  
37 3. By renumbering as necessary.

RECEIVED FROM THE HOUSE

**S-5407** FILED APRIL 8, 2002

*Senate Concurred*  
*4/10/02*  
*(p 1065)*

SENATE FILE 2280

AN ACT

RELATING TO THE REQUIREMENTS OF THE DEPARTMENT OF HUMAN SERVICES FOR CERTAIN CHILD WELFARE SERVICES PROVIDERS AND PROVIDING AN EFFECTIVE DATE.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

Section 1. REHABILITATIVE TREATMENT CHILD WELFARE SERVICES PROVIDERS.

1. The department of human services may adopt rules utilizing the emergency procedures provided in subsection 4 as necessary to implement the high-priority recommendation items identified by the department's rehabilitative treatment services provider regulation and quality improvement work group listed in this section. In order to implement a listed item, the department must determine that the item can be implemented without additional cost to the state and, if implementation of the item requires a state medical assistance program plan amendment, the item must be approved by the federal center for Medicare and Medicaid services.

2. Subject to the implementation conditions in subsection 1, the department shall adopt rules to take effect on or before April 1, 2003, or within sixty days after receiving the federal center's approval, whichever is later, to implement all of the following:

a. Permitting deemed status for those providers of services that are certified, or accredited to be in compliance with relevant standards by the joint commission on the accreditation of health care organizations or the council on accreditation of services for families and children and that make accreditation reports and records available to the department.

b. Amending rules to maintain the group care standard for a weekly average number of hours of therapy and counseling, but determine compliance by averaging the hours per week over the course of a month. The recoupment for failure to comply shall be applied for a week at a time for noncompliance, not to exceed the number of days paid. This standard shall not be applied to a highly structured juvenile group care program.

c. Expanding the set of qualifications accepted for rehabilitative treatment services staff positions.

d. Utilizing a weekly results summary for documentation of the group care requirement for daily provision of skills development.

3. Subject to the implementation conditions in subsection 1, the department shall adopt rules to take effect on or before December 31, 2003, or within sixty days after receiving the federal center's approval, whichever is later, to implement all of the following:

a. Eliminating the care plan requirements regarding licensing and treatment plan review; accepting a change in the treatment plan in lieu of requiring the plan to be rewritten; and permitting the provider to determine the author of the treatment plan.

b. Revising and combining provider requirements involving licensing, contracting, and certification so that duplicative regulatory requirements are eliminated or minimized while the department maintains its quality assurance role to an appropriate degree. The requirements addressed shall include but are not limited to those involving documentation in records, and treatment plan provisions involving reviews, changes, and authors.

4. The department of human services may adopt administrative rules under section 17A.4, subsection 2, and section 17A.5, subsection 2, paragraph "b", to implement this section and the rules shall become effective immediately upon filing, unless the effective date is delayed by the

administrative rules review committee, notwithstanding section 17A.4, subsection 5, and section 17A.8, subsection 9, or a later effective date is specified in the rules. Any rules adopted in accordance with this section shall not take effect before the administrative rules review committee reviews the rules. Any rules adopted in accordance with this section shall also be published as notice of intended action as provided in section 17A.4.

Sec. 2. EFFECTIVE DATE. This Act, being deemed of immediate importance, takes effect upon enactment.

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MARY E. KRAMER  
President of the Senate

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BRENT SIEGRIST  
Speaker of the House

I hereby certify that this bill originated in the Senate and is known as Senate File 2280, Seventy-ninth General Assembly.

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MICHAEL E. MARSHALL  
Secretary of the Senate

Approved 4/22, 2002

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THOMAS J. VILSACK  
Governor