



Iowa Department of Human Services

Terry E. Branstad
Governor

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Lt. Governor

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Director

INFORMATIONAL LETTER NO.1401

DATE: June 23, 2014

TO: Iowa Medicaid Psychiatric Medical Institutions for Children (PMIC) Providers

FROM: The Iowa Department of Human Services, Iowa Medicaid Enterprise (IME)

RE: Second Notice Annual Restraint and Seclusion Attestation Letters and Incident Reporting

This letter is a follow up [Informational Letter No. 1355](#)¹ published February 13, 2014, and is intended to remind all PMIC providers of the requirement to adhere to federal regulations regarding the use of restraint and seclusion. The Code of Federal Regulations at 42 CFR 483.350 through 483.376 establishes standards for the use of restraint and seclusion in psychiatric residential treatment facilities (PTRFs) providing inpatient psychiatric services to individuals under age 21. These rules apply to all PMIC providers enrolled with Iowa Medicaid and compliance with these [standards for the use of restraints and seclusion in PTRFs](#)² is a condition of participation in the Iowa Medicaid program. Please review these regulations closely.

Iowa Medicaid policy requires that PMIC providers submit an annual written attestation statement to attest that each facility is in compliance with these standards. The attestation statement must be signed by the facility director. When a new director is appointed, a new written attestation statement must be sent to the state Medicaid agency. Please provide your annual attestation statement by July 31, 2014. This should be sent to:

LeAnn Moskowitz, PMIC Program Manager
Iowa Medicaid Enterprise
100 Army Post Road
Des Moines, IA 50315

Additionally, the reporting requirements in this section of the federal regulations require facilities to report all serious occurrences such as a resident's death or serious injury to the state Medicaid agency and the state's designated protection and advocacy agency. To fulfill this requirement, such incident reports should be sent to the IME at the above address, as well as to:

Disability Rights Iowa
950 Office Park Road, Suite 221
West Des Moines, IA 50265

¹ <http://dhs.iowa.gov/sites/default/files/1355%20Annual%20Restraint%20and%20Seclusion%20Attestation%20Letters.pdf>

² <http://www.gpo.gov/fdsys/pkg/CFR-2007-title42-vol1/content-detail.html>

In the event of the death of a resident, facilities must report the death to the regional office of the Centers for Medicare and Medicaid Services (CMS) in addition to the state Medicaid agency, and the state's designated protection and advocacy agency. This report should be sent to:

CMS – Region 7
Division of Medicaid and Children's Health
Richard Bolling Federal Building, Room 235
601 East 12th Street
Kansas City, MO 64106

All of the above reports must also be documented in the resident's file and in the incident and accident report logs kept by the facility. The Iowa Department of Inspections and Appeals, which licenses PMIC facilities under Iowa Code chapter 135H, is responsible for ascertaining further compliance with this requirement. The Department of Inspections and Appeals may be contacted at:

Iowa Department of Inspections and Appeals
Health Facilities Division
321 East 12th Street
Des Moines, IA 50319

Please direct questions to LeAnn Moskowitz, Program Manager at: imoskow@dhs.state.ia.us or (515) 256-4653.