

DHS rules in process
as of 2 28 18

Ref. #	Date Rec'd	DIV	Type Rule	Stat. Rule Auth.	Purpose of these Amendments	Specific Rules Affected	Status	Notice ARC#	Adopt ARC#	Rules Eff. Date	POC
19-010	2/6/2018	ACFS	Reg	234.6	Revises the Child Care Assistance (CCA) fee chart based on the new federal poverty levels (FPL). Updates rules regarding temporary lapse policy and adding a wait list exemption for homeless families.	170.2(2)"b"(9), 170.2(3)"b", 170.4(2)"a"	N - Noticed	3651C		7/1/2018	Mark Adams
19-009	1/31/2018	IME	Reg	249A.4	Requires hospitals providing inpatient psychiatric services, including the state mental health institutes (MHI) to update the inpatient psychiatric bed tracking system at least two times per day with number of available, staffed beds by gender, child, adult, and geriatric.	77.3(3)	N - Noticed	3659C		7/1/2018	LeAnn Moskowitz
19-008	1/29/2018	MHDS	Reg		Allows providers to change how Mental Health Service providers document service narratives.	24.4(1)"b"(1), 24.4(2)"b", 24.4(4)"b"(3)	C - Circulating			8/1/2018	Connie Fanselow
19-007	1/9/2018	Dep Dir	Reg	217.6	Implements new federal guidelines extending the period to appeal decisions for state fair hearings from 90 to 120 days. Also implements changes effectuation of a reversed appeal resolution for MCO appeals.	7.5(4), 7.16(6), 7.16(7), 7.16(8), 7.16(9), 7.16(10), 7.16(11), 7.21(3)	N - Noticed	3652C		7/1/2018	Denise Dutton
19-006	1/18/2018	ACFS	Reg	234.6	Implements the subsidized guardianship program under the guidelines of the federal Fostering Connections to Success Act. The previous program was administered through a federal waiver which has been eliminated.	204.1, 204.2(1), 204.2(4), 204.3, 204.4, 204.6, 204.7	W - Withdrawn			7/1/2018	Tracey Parker

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19-005	1/4/2018	MHDS	Reg	225C.6	The changes are to bring the rule into alignment with 2017 legislative changes to Iowa Code Chapter 225D. House File 215, requires certain health insurance policies, contracts, or plans to provide coverage of applied behavior analysis (ABA) treatment for certain individuals with autism spectrum disorder. Individuals who gain private insurance company as a result of this legislation will no longer be eligible for participation in the Autism Support Program (ASP).	22.1, 22.2(4)	C - Circulating	3619C		7/1/2018	Connie Fanselow
19-004	1/4/2018	IME	Reg	249A.4	These amendments further amend and clarify standards for crisis response services. Iowa Medicaid currently covers crisis response services; however, these amendments clarify the daily upper limit for hourly crisis response and hourly crisis stabilization services is limited to the daily per diem for crisis stabilization services. These amendments also make a technical correction to the record requirements in a previously adopted rule.	79.1(2), 79.3(2)"d"(44), 79.3(2)"d"(45)	N - Noticed	3598C		5/16/2018	LeAnn Moskowitz
19-003	12/19/2017	Field	Reg	217.6	Replaces the current chapter on Child Support Parental Obligation Pilot Projects. Renames the program and clarifies incentives within the program.	441--Chapter 100	N - Noticed	3597C		7/1/2018	Kate Bigg
19-002	12/19/2017	Field	Reg	217.6	Aligns CSRU rules with federal regulations. Removes references to voluntary reduction of income as a factor when CSRU modifies child support obligations.	95.14, 99.65(1), 99.87, 99.91(5)	N - Noticed	3595C		7/1/2018	Kate Bigg

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19-001	12/15/2017	IME	Reg	249A.4	Aligns rules with federal regulations regarding the use of civil money penalties (CMP) imposed by the Centers for Medicare and Medicaid Services (CMS). Also updates the Department's process in how and when applications for grant proposals are requested.	81.1, 81.53, CH 166	N - Noticed	3573C		7/1/2018	Sally Oudekerk
18-050	12/11/2017	IME	Reg		Adds the use of online course curricula to meet the required minimum of thirty hours of classroom instruction. Also adds a definition for, "Clock hours." Adds a process to allow a veteran to be deemed to satisfy the nurse aide training requirements based upon training and experience acquired through the veteran's services and to receive a nurse aide training certificate of completion.	81.1, 81.16(1), 81.16(3)	N - Noticed	3594C		5/16/2018	Sally Oudekerk
18-049	11/21/2017	ACFS	Reg	217.6	Adds new element to the definition of "Requesting entity" The change is required in relation to federal legislation requiring checks on any employee with access to federal tax information used for purposes of the Department.	119.1	A - Adopted	3515C	3680C	4/18/2018	Catt Stack
18-048	11/21/2017	IME	EAN	249A.4	Updates rules, specifically timelines, to reflect revised federal standards for the resolution of appeals to MCOs.	73.12(2)"d", 73.12(2)"e"	A - Adopted	3514C	3667C	2/14/2018	LeAnn Moskowitz
18-047	11/14/2017	ACFS	Reg	234.6	Clarifies procedures for juvenile detention facilities to follow when seeking annual cost reimbursement. Juvenile detention facilities eligible for cost reimbursement will have more clearly defined standards and the changes to dates related to process claim reimbursement.	167.1, 167.3, 167.4, 167.5, 167.6	N - Noticed	3546C	3681C	5/1/2018	Jim Chesnik

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18-046	11/8/2017	ACFS	Reg	217.3(6)	Implements the January 1, 2018 cost of living adjustments to income limits and benefit amounts for several SSA categories.	51.4(1), 51.7, 52.1(1), 52.1(2), 52.1(3), 52.1(3)"A"(2)	N - Noticed	3543C, 3596C		5/16/2018	Karen Jones
18-045	11/8/2017	ACFS	EAI	217.3(6)	Implements the January 1, 2018 cost of living adjustments to income limits and benefit amounts for several SSA categories	51.4(1), 51.7, 52.1(1), 52.1(2), 52.1(3), 52.1(3)"A"(2)	E - In Effect		3544C, 3599C	1/5/2018	Karen Jones
18-044	10/20/2017	IME	Reg	249A.4	Expands the special population nursing facility criteria to include persons residing in an intermediate care facility for persons with medical complexity up to age 30. Also increases the number of qualified providers available to meet the needs of young adults with complex medical conditions.	81.1, 82.1	N - Noticed	3459C		4/1/2018	Brian Wines
18-043	10/19/2017	IME	Reg	249A.4	Changes the rate setting methodology used to develop Supported Community Living (SCL), Day Habilitation, and Adult Day Care service rates in the Intellectual Disability Waiver. The SCL methodology will change from the current retrospectively limited prospective rate setting process to a fee schedule using a tiered rate methodology. Day Habilitation and Adult Day Care service rates are currently established through a fee schedule but will be changed to a fee schedule using tiered rates. The tiered rate methodology establishes a tiered system of reimbursement based on the identified acuity level from the results of the Supports Intensity Scale © (SIS) core standardized assessment.	78.41(1)"F", 78.41(11), 79.1(1)"C", 79.1(2), 79.1(15), 79.1(15)"B"(5), 79.1(29), 83.67(4)"I"	N - Noticed	3476C, 3602C		5/16/2018	Brian Wines

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18-042	10/19/2017	IME	EAI	249A.4	Changes the rate setting methodology used to develop Supported Community Living (SCL), Day Habilitation, and Adult Day Care service rates in the Intellectual Disability Waiver. The SCL methodology will change from the current retrospectively limited prospective rate setting process to a fee schedule using a tiered rate methodology. Day Habilitation and Adult Day Care service rates are currently established through a fee schedule but will be changed to a fee schedule using tiered rates. The tiered rate methodology establishes a tiered system of reimbursement based on the identified acuity level from the results of the Supports Intensity Scale © (SIS) core standardized assessment.	78.41(1)"F", 78.41(11), 79.1(1)"C", 79.1(2), 79.1(15), 79.1(15)"B"(5), 79.1(29), 83.67(4)"I"	E - In Effect		3481C	12/1/2017	Brian Wines
18-041		ACFS	Reg	237A.12	Implements requirements for federally-mandated professional development for child care homes that are not registered but have a child care assistance agreement. Also provides enhancements to sleep practices to assure that children who are sleeping in child care facilities are using items designed for sleeping which meet CPSC and ASTM requirements.	109.12(5)"e"(7), 109.12(5)"I", 110.8(5), 110.10(1)"h", 120.1, 120.8(5), 120.10(6), 120.10(7), 120.10(8)	A - Adopted	3436C	3556C	3/1/2018	Ryan Page
18-040	10/9/2017	ACFS	Reg	237A.12	Provides parameters on weapons being present in a child care setting.	109.10(17), 110.8(1)"I", 120.8(1)"q"	T - Terminated	3437C	NOT 3547C	3/1/2018	Ryan Page
18-039	10/9/2017	ACFS	Reg	237A.12	Revises the definition of "Child care" to provide allowable exemptions IAW 2017 Iowa Acts, HF 534. Allows programs serving children who are 3 years old and receiving special education under Iowa Code 265B to be exempt from child care licensing.	109.1	A - Adopted	3438C	3555C	3/1/2018	Ryan Page

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18-038	10/5/2017	IME	Reg	249A.4	These amendments reflect the new accreditation standards in Iowa Admin. Code 441--Chapter 24, Division II for crisis response services. These amendments will clarify services covered and provide standards for operation for Medicaid crisis response service providers. These amendments also establish the process by which the Department of Human Services, Iowa Medicaid Enterprise will enroll and reimburse qualified subacute mental health facility providers.	77.53, 77.54, 78.58, 78.59, 79.1(2), 79.3(2)"d"(4), 79.3(2)"d"(45)	A - Adopted	3439C	3551C	2/7/2018	LeAnn Moskowitz
18-037	9/27/2017	IME	Reg	249A.4	Allows hospice agencies to use the Medicare election of hospice benefits as an alternative to using the election of Medicaid hospice benefits.	78.36(4)"b"(1)	A - Adopted	3419C	3553C	2/7/2018	Anna Ruggle
18-036	8/28/2017	IME	Reg	249A.4	Amends definition of "Medical Home" and adds definitions of "Personal provider," "Primary care provider," and "Primary medical provider."	74.1	A - Adopted	3375C	3548C	2/7/2018	Anna Ruggle
18-035	8/21/2017	IME	Reg	249A.4	Revises language used to describe the Home- and Community-Based Services Home-delivered meal benefit in order to provide clarity on how the benefit is to be administered.	78.34(11), 78.37(8), 78.38(6)	A - Adopted	3374C	3552C	2/7/2018	LeAnn Howland, LeAnn Moskowitz
18-034	8/16/2017	IME	Reg	249A.4	Allows Medicaid providers, in addition to providing narrative documentation, to provide narrative documentation of service in a checkbox form format. This is being done to assist Medicaid providers to have a consistent interpretation of the documentation requirements for services provided.	79.3(2)"C"(3), 79.3(2)"D"(6), 79.3(2)"D"(8), 79.3(2)"D"(11), 79.3(2)"D"(24), 79.3(2)"D"(25), 79.3(2)"D"(33), 79.3(2)"D"(35), 79.3(2)"D"(39), 79.3(2)"D"(42)	A - Adopted	3357C	3554C	2/7/2018	LeAnn Moskowitz

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18-033	8/16/2017	IME	EAI	249A.4	Allows Medicaid providers, in addition to providing narrative documentation, to provide narrative documentation of service in a checkbox form format.	79.3(2)"C"(3), 79.3(2)"D"(6), 79.3(2)"D"(8), 79.3(2)"D"(11), 79.3(2)"D"(24), 79.3(2)"D"(25), 79.3(2)"D"(33), 79.3(2)"D"(35), 79.3(2)"D"(39), 79.3(2)"D"(42)	E - In Effect		3358C	10/1/2017	LeAnn Moskowitz
18-032	8/16/2017	ACFS	Reg	249A.4	Removes the references to "medical assistance for Family Planning Services" which refers to Medicaid under the Family Planning Network waiver. The state of Iowa will continue to provide family planning services through the new state-funded Family Planning Program (FPP).	75.1(41), 75.1(43)"D"(2), 75.70, 76.2(1)"C"(3), 76.2(1)"C"(4), 76.2(2)"C"(3), 76.14(2)"A"(2), 76.14(2)"B"(2), 76.14(2)"B"(3)	A - Adopted	3356C	3550C	2/7/2018	Shari Seivert
18-031	8/16/2017	ACFS	EAI	249A.4	Removes references to medical assistance for family planning services which refers to Medicaid under the Family Planning Network waiver. The state of Iowa will continue to provide family planning services through the new state-funded Family-Planning Program (FPP).	75.1(41), 75.1(43)"D"(2), 75.70, 76.2(1)"C"(3), 76.2(1)"C"(4), 76.2(2)"C"(3), 76.14(2)"A"(2), 76.14(2)"B"(2), 76.14(2)"B"(3) 11	E - In Effect		3354C	10/1/2017	Shari Seivert
18-030	8/16/2017	ACFS	Reg	249A.4	Eliminates the three-month retroactive benefit provisions for initial applications and applications to add new household members.	74.5(2), 74.5(3), 74.5(4), 75.1(35)"D"(5), 75.1(35)"E", 75.1(35)"G"(1), 75.11(2)"C"(3), 75.19(1)"D" & "E", 75.25, 76.4(5), 76.4(6), 76.13(2), 76.13(3), 76.14(2)"B"(4)	A - Adopted	3355C	3549C	2/7/2018	Shari Seivert
18-029	8/16/2017	ACFS	EAI	249A.4	Eliminates the three month retroactive benefit provisions from initial application and applications to add new members.	74.5(2), 74.5(3), 74.5(4), 75.1(35)"D"(5), 75.1(35)"E", 75.1(35)"G"(1), 75.11(2)"C"(3), 75.19(1)"D" & "E", 75.25, 76.4(5), 76.4(6), 76.13(2), 76.13(3), 76.14(2)"B"(4)	E - In Effect		3353C	10/1/2017	Shari Seivert

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18-028	8/2/2017	IME	Reg	249A.4	Implements process to compare costs to Managed Care Organization capitation fees. Also updates definitions and provides technical updates to the rule.	75.21	E - In Effect	3323C	3493C	1/1/2018	Sara Schneider
18-027	7/25/2017	ACFS	Reg	235A	Updates technical language around procurement procedures and assists in maintaining compliance with federal and state laws that require program evaluation.	155.1, 155.2, 155.3, 155.4	E - In Effect	3322C	3495C	1/1/2018	Lisa Bender
18-026	7/24/2017	IME	Reg	249A.4	Adds two new provider types for the purpose of member's cost-sharing protections related to Qualified Medicare Beneficiaries (QMB) and Health Insurance Premium Payment (HIPP) members.	77.53, 77.54, 78.58, 78.59, 79.1(22)"a", 79.1(29), 76.14(1)"f", 79.14(1)"g", 80.2(2)"a"(10)80.2(2)"i"	E - In Effect	3321C	3494C	1/1/2018	Sara Schneider
18-025	7/21/2017	ACFS	Reg	234.6	Aligns program and payment changes under the competitive child welfare services procurement for supervised apartment living based on the child welfare crisis intervention, stabilization and reunification service RFP.	152.1, 156.12, 202.9(2), 202.9(3)"a"(4), 202.9(4)	E - In Effect	3260C	3442C	1/1/2018	Jim Chesnik
18-024	7/18/2017	IME	EAN	249A.4	Remove the requirement for an annual cost report for privately operated residential care facilities (RCFs) and changes the cost reimbursement methodology to be based on the maximum per diem rate per Chapter 52.1(3).	52.1(3), 54.3	E - In Effect	3259C	3441C	10/11/2017	Sally Oudekerk
18-023	6/7/2017	ACFS	EAI	234.6	Implements the new Family Planning Program in accordance with legislative guidance.	7.2(15), 7.2(16), 7.5(2)"f", 7.5(4)"b", 7.5(11), 7.7(1)"b", 7.8(1)"a", 7.8(2), 441--Chapter 87	E - In Effect		3199C	7/1/2017	Kelly Lindsay
18-022	6/8/2017	ACFS	Reg	234.6	Implements the new state Family Planning Program in accordance with legislative guidance.	7.2(15), 7.2(16), 7.5(2)"f", 7.5(4)"b", 7.5(11), 7.7(1)"b", 7.8(1)"a", 7.8(2), 441--Chapter 87	E - In Effect	3198C	3389C	11/15/2017	Kelly Lindsay

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18-021	6/7/2017	IME	EAI	249A.4	Implements the cost containment strategy to ensure that total reimbursement for Medicare Part A and Part B crossover claims is limited to the Medicaid reimbursement rate.	79.1(22), 80.2(2)"h"	E - In Effect		3159C	7/1/2017	Anna Ruggle
18-020	6/7/2017	IME	Reg	249A.4	Implements the cost containment strategy to ensure that total reimbursement for Medicare Part A and Part B crossover claims is limited to the Medicaid reimbursement rate.	79.1(22), 80.2(2)"h"	E - In Effect	3163C	3296C	10/4/2017	Anna Ruggle
18-019	6/6/2017	IME	EAI	249A.4	Implements the cost containment strategy to adjust the Iowa Medicaid anesthesia conversion factor to be equal to the calendar year 2017 Medicare anesthesia conversion factor, as adjusted for the state, and converted to a per minute amount. Each January 1, thereafter, the Department shall apply the applicable Medicare anesthesia conversion factor adjusted for the state, and converted to a per-minute amount.	79.1(2), 79.1(7)"d"	E - In Effect		3158C	7/1/2017	Marty Swartz
18-018	6/6/2017	IME	Reg	249A.4	Implements the cost containment strategy to adjust the Iowa Medicaid anesthesia conversion factor to be equal to the calendar year 2017 Medicare anesthesia conversion factor, as adjusted for the state, and converted to a per minute amount. Each January 1, thereafter, the Department shall apply the applicable Medicare anesthesia conversion factor adjusted for the state, and converted to a per-minute amount.	79.1(2), 79.1(7)"d"	E - In Effect	3164C	3292C	10/4/2017	Marty Swartz

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18-017	6/6/2017	IME	EAI	249A.4	Re-implements the cost containment strategy to adjust Medicaid reimbursement rates for physician services rendered in facility settings (e.g., hospitals), by applying a "site of service" differential to reflect the difference between the cost of physician services when provided in a health facility setting and the cost of physician services when provided in a physician's office.	79.1(7)"b"	E - In Effect		3162C	7/1/2017	Marty Swartz
18-016	6/6/2017	IME	Reg	249A.4	Re-implements the cost containment strategy to adjust Medicaid reimbursement rates for physician services rendered in facility settings (e.g., hospitals), by applying a "site of service" differential to reflect the difference between the cost of physician services when provided in a health facility setting and the cost of physician services when provided in a physician's office.	79.1(7)"b"	E - In Effect	3165C	3294C	10/4/2017	Marty Swartz
18-015	6/5/2017	IME	EAI	249A.4	Implements the cost containment strategy to adjust the inpatient diagnostic related group (DRG) cost outlier threshold formula to be the greater of two times the statewide average DRG payment for that case, or the hospital's individual DRG payment for that case plus \$75,000. The current formula is the greater of two times the statewide average DRG payment for the case, or the hospital's individual DRG payment for the case plus \$16,000.	79.1(5)"f"(3)	E - In Effect		3161C	7/1/2017	Marty Swartz

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18-014	6/6/2017	IME	Reg	249A.4	Implements the cost containment strategy to adjust the inpatient diagnostic related group (DRG) cost outlier threshold formula to be the greater of two times the statewide average DRG payment for that case, or the hospital's individual DRG payment for that case plus \$75,000. The current formula is the greater of two times the statewide average DRG payment for the case, or the hospital's individual DRG payment for the case plus \$16,000.	79.1(5)"f"(3)	E - In Effect	3166C	3293C	10/4/2017	Marty Swartz
18-013	6/1/2017	IME	EAI	249A.4	Implements a cost containment strategy to adjust the reimbursement policy in order to eliminate the primary care physician rate increase.	79.1(7)"c"	E - In Effect		3160C	7/1/2017	Marty Swartz
18-012	6/1/2017	IME	Reg	249A.4	Implements a cost containment strategy to adjust reimbursement policy in order to eliminate primary care physician rate increase.	79.1(7)"c"	E - In Effect	3167C	3295C	10/4/2017	Marty Swartz
18-011	5/1/2017	IME	Reg	249A.4	Allows HCBS Waiver members who are inpatient in a hospital or medical institution for 31 to 120 days to resume waiver services upon discharge without having to reapply and going back on the waiver wait list.	83.3(4)"D", 83.8(2)"C", 83.23(4)"C", 83.28(2)"C", 83.43(4)"C", 83.48(2)"C", 83.62(4)"D", 83.83(3)"C", 83.103(3)"C", 83.125(2)"B", 83.128(2)"C"	E - In Effect	3077C	3234C	9/6/2017	LeAnn Moskowitz
18-010	3/29/2017	ACFS	Reg	217.6	These amendments revise outdated terminology and regulations and align with child care regulations and needed revisions for contractor requirements for pre-service training for the Recruitment, Retention, Training and Support contracts effective 7/1/17.	108.4, 112.1, 112.2, 112.3(1)"A", 112.3(4)"A", 112.4, 112.10, 113.2, 113.3(1), 113.3(4), 113.3(5)"A", 113.4(1)"C", 113.5(2), 113.5(3), 113.5(6), 113.5(1)"A", 113.6, 113.7, 113.8, 113.10, 113.11, 113.12(5), 113.12(6), 113.13, 113.14, 113.15, 113.16(2)"D", 113.17(2), 113.18, 114.1, 441--CHAPTER 116(TITLE), 116.1, 116.2, 117.1(4), 117.7(3), 117.8, 156.8(7), 202.5(3)	E - In Effect	3040C	3185C	9/1/2017	Heather Davidson

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18-009	3/17/2017	FIELD	Reg	234.6	This amendment proposes to allow the Department to implement and utilize the National Electronic Interstate Compact Enterprise (NEICE) system. NEICE is a secure, web-based case management system that enables state-to-state transfer data and documents for a child who needs placement across state lines. The implementation of NEICE would improve the Interstate Compact on the Placement of Children (ICPC) process efficiency and decrease delay in placement approval.	441--142.9(232)	E - In Effect	3020C	3186C	8/15/2017	Tami J. Hoffman
18-008	3/7/2017	ACFS	EAN	249A.4	Decreases the statewide average cost of nursing facility services to a private-pay person. Updates the average charges for nursing facilities, Psychiatric Medical Institutions for Children, and Mental Health Institutions which are used to determine the disposition of the income of a Medical Assistance Income Trust (MAIT)	75.23(3), 75.24(3)"b"(1) & (3)	E - In Effect	3017C	3183C	7/1/2017	Karen Jones
18-007	3/7/2017	ACFS	EAN	249A.4	Updates the maximum Medicaid rate for ICF/IDs which are used to determine the disposition of income of a Medical Assistance Income Trust (MAIT)	75.24(3)"b"	E - In Effect	3016C	3182C	7/1/2017	Karen Jones
18-006	3/7/2017	ACFS	Reg	249A.4	This amendment increases premiums for applicants and recipients under the Medicaid for Employed People with Disabilities (MEPD) program with income over 150% of the federal poverty level (FPL).	75.1(39)"b"(3)	E - In Effect	3001C	3094C	8/1/2017	Kim Grasty

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18-005	2/20/2017	ACFS	Reg	237A.12	<p>These amendments require Child Care Centers, Homes and Development Homes to have written emergency plans for response to food or allergic reactions. These amendments also revise administrative rules to include the pre-service/orientation training component of child development. These amendments also clarify the intent of substitute requirements for essential child care training that is also federally mandated. All of the aforementioned amendments are federally mandated as a result of the Child Care and Development Block Grant (CCDBG) reauthorization.</p> <p>Finally these amendments provide technical updates to administrative rules for child care regarding first aid/CPR requirements.</p>	109.7(1)"e"(10), 109.9(2)"g", 109.10(3)"d", 110.9(3)"e", 110.9(4), 110.10(1)"a"(10), 110.10(1)"c"(2), 120.9(2), 120.10(1)"j", 120.10(3)"b", 120.10(5)	E - In Effect	2998C	3095C	8/1/2017	Ryan Page
18-004	2/20/2017	ACFS	Reg	237A.12	Revises administrative rule requirements on reporting serious injuries in child care settings	109.10(10), 110.8(1)"S", 120.8(1)"P"	E - In Effect	2997C	3096C	8/1/2017	Ryan Page
18-003	2/14/2017	ACFS	EAN	234.6	Updates the child care assistance fee chart to be in compliance with federal poverty levels (FPL). Also updates rules regarding job search for new applications to allow three months of job searching instead of one.	170.2(2)"B"(5), 170.2(2)"B"(10), 170.3(5)"D", 170.4(2)"A", 170.5(1)"H"	E - In Effect	2973C	3092C	7/1/2017	Mark Adams
18-002	2/9/2017	DEP DIR	Reg	217.6	Clarifies that appeals related to health care decisions made by a managed care organization must follow a different process than other DHS appeals. Establishes a new appeals process for MCO-related appeals.	7.1, 7.2, 7.5, 7.7(1)"E", 7.7(2)"K", 7.7(5)"E", 7.8(1), 7.8(2), 7.8(3), 7.8(4), 7.8(6), 7.8(9), 7.9, 7.10(1), 7.10(2), 7.10(3), 7.10(4), 7.10(5), 7.10(6), 7.10(7)"C", 7.13(5)"B", 7.13(5)"F", 7.13(6)"C", 7.13(6)"G", 7.16(4), 7.16(9)"A", 7.19, 7.21(1), 7.21(2), 7.21(3), 7.24(1), 7.42(3)	E - In Effect	2972C	3093C	7/12/2017	Denise Dutton

DHS rules in process
as of 2 28 18

Ref. #	Date Rec'd	DIV	Type Rule	Stat. Rule Auth.	Purpose of these Amendments	Specific Rules Affected	Status	Notice ARC#	Adopt ARC#	Rules Eff. Date	POC
18-001	2/8/2017	MHDS	Reg	225C.6	Add a definition to the Austism Support Program. Adds staff qualification options for crisis service providers.	22.1, 24.23, 24.24	E - In Effect	2971C	3057C	7/1/2017	Theresa Armstrong, Peter Schumacher