CHAPTER 139
EMERGENCY MEDICAL SERVICES—TRAINING PROGRAMS—STUDENTS—COMPLAINTS AND INVESTIGATIONS

641—139.1(147A) Purpose. This chapter establishes the standards and requirements for authorization of emergency medical care training programs in the state of Iowa; establishes the requirements of the training program related to preparing students for emergency medical provider certification in the state of Iowa; and describes the authority of the department to impose disciplinary sanctions against a training program.

[ARC 5143C, IAB 8/12/20, effective 9/16/20]

641—139.2(147A) Definitions.

“Advanced emergency medical technician” or “AEMT” means an individual who has successfully completed a course of study based on the United States Department of Transportation’s Advanced Emergency Medical Technician Instructional Guidelines (January 2009), has passed the psychomotor and cognitive examinations for the AEMT, and is currently certified by the department as an AEMT.

“Bureau” or “BETS” means the bureau of emergency and trauma services, the bureau designated by the department as the lead agency for coordinating and implementing the provision of emergency medical services in this state.

“CAAHEP” means the Commission on Accreditation of Allied Health Education Programs.

“CAPCE” means the Commission on Accreditation for Prehospital Continuing Education. CAPCE is an accrediting body charged with the review and accreditation of EMS continuing education.

“CEH” means continuing education hour, which is based upon a minimum of 50 minutes of training per hour.

“Certification” or “certificate” means a document issued by the department authorizing a person to practice as an emergency medical care provider in Iowa.

“Certified” means being officially recognized as meeting department-approved training and testing standards and being issued a certificate by the department in accordance with Iowa Code chapters 272C and 147A.

“Cognitive examination” or “written examination” means the portion of the NREMT certification examination process evaluating the candidate’s level of EMS knowledge.

“Core continuing education” means education obtained during a certification period to renew certification. Core continuing education shall have an assigned sponsor number from CAPCE, an authorized EMS training program, the board of nursing, the board of medicine or the department.

“Course completion date” means the date of the final classroom session of an emergency medical care provider course.

“Course coordinator” means an individual who has been assigned by the training program to coordinate the activities of an emergency medical care provider course.

“Critical care paramedic” or “CCP” means a currently certified paramedic who has successfully completed a critical care course of instruction approved by the department and has received endorsement from the department as a critical care paramedic.

“Department” means the Iowa department of public health.

“Director” means the director of the Iowa department of public health.


“Emergency medical care provider” means an individual who has been trained to provide emergency and nonemergency medical care at the EMR, EMT, AEMT, paramedic, or other certification level recognized by the department before 2011 and has been issued a certificate by the department, or a person practicing in accordance with Iowa Code chapter 147D.

“Emergency medical care student” or “student” means any individual registered with the department and enrolled in an EMS training program with an active EMS student registration.
“Emergency medical responder” or “EMR” means an individual who has successfully completed a course of study based on the United States Department of Transportation’s Emergency Medical Responder Instructional Guidelines (January 2009), has passed the psychomotor and cognitive examinations for the EMR, and is currently certified by the department as an EMR.

“Emergency medical services” or “EMS” means an integrated medical care delivery system to provide emergency and nonemergency medical care.

“Emergency medical technician” or “EMT” means an individual who has successfully completed a course of study based on the United States Department of Transportation’s Emergency Medical Technician Instructional Guidelines (January 2009), has passed the psychomotor and cognitive examinations for the EMT, and is currently certified by the department as an EMT.

“EMS evaluator” or “EMS-E” means an individual who has successfully completed an EMS evaluator curriculum approved by the department and is currently endorsed by the department as an EMS-E.

“EMS instructor” or “EMS-I” means an individual who has successfully completed an EMS instructor curriculum approved by the department and is currently endorsed by the department as an EMS-I.

“EMS training program” or “training program” means an Iowa college approved by the Higher Learning Commission, an Iowa hospital, or a service program that has received authorization from the department to conduct emergency medical care training.

“Endorsement” or “endorsed” means an approval granted by the department authorizing an individual to serve as an EMS-I, EMS-E or CCP.

“Higher Learning Commission” means the independent corporation which accredits degree-granting postsecondary institutions in the north central region of the United States.

“NREMT” means the National Registry of Emergency Medical Technicians. The NREMT provides a valid, uniform process to assess the knowledge and skills required for competent entrance-level practice by EMS professionals.

“Out-of-state student” means any individual participating in clinical or field experience as a student in an approved out-of-state training program.

“Out-of-state training program” means an EMS training program located outside the state of Iowa that is approved by the authorizing agency of the program’s home state to conduct initial EMS training for EMR, EMT, AEMT, paramedic or other level certified by the department.

“Outreach course coordinator” means an individual assigned by the training program to coordinate the activities of an emergency medical care provider course held outside the training program facilities.

“Paramedic” or “PM” means an individual who has successfully completed a course of study based on the United States Department of Transportation’s Paramedic Instructional Guidelines (January 2009), has passed the psychomotor and cognitive examinations for the paramedic, and is currently certified by the department as a paramedic.

“Physician” means an individual licensed under Iowa Code chapter 148.

“Physician assistant” or “PA” means an individual licensed pursuant to Iowa Code chapter 148C.

“Preceptor” means an individual assigned by the training program, clinical facility or service program to supervise EMS students while the students are completing their classroom, clinical or field experience. A preceptor shall be an emergency medical care provider certified at the level at which the preceptor is providing supervision or at a higher level or be licensed as a physician, physician assistant or registered nurse.

“Primary instructor” means an individual who is responsible for teaching the majority of an emergency medical care provider course.

“Psychomotor examination” or “practical examination” means the portion of the department-approved or NREMT certification examination process that evaluates the skill and procedure capabilities of the candidate.

“Registered nurse” or “RN” means an individual licensed pursuant to Iowa Code chapter 152.
“Service program” or “service” means any transport service or nontransport service, inclusive of associated satellites and service program affiliates, that has received full or conditional authorization from the department.

“Training program director” means a health care professional (full-time educator or practitioner of emergency or critical care) assigned by the training program to direct the operation of the training program.

“Training program medical director” means a physician licensed under Iowa Code chapter 148 who is responsible for providing medical oversight to an EMS training program.

[ARC 5143C, IAB 8/12/20, effective 9/16/20; ARC 6070C, IAB 12/15/21, effective 1/19/22]

641—139.3(147A) Initial application, renewal application, inspection and approval.

139.3(1) Initial application, inspection and approval.

a. An applicant seeking initial authorization as an EMS training program shall complete and submit to the department an Iowa EMS training program self-assessment application. The application can be downloaded from the BETS EMS training program website (www.idph.iowa.gov/BETS/EMS/provider-information).

b. An applicant seeking initial authorization shall submit, along with the Iowa EMS training program self-assessment application, a needs assessment that justifies the need for the training program.

c. The department shall perform an on-site inspection of the applicant’s facilities and clinical resources. The purpose of the inspection is to examine educational objectives, patient care practices, facilities and administrative practices.

d. Following the on-site inspection, the department will provide the applicant an application report detailing the status of the application.

e. The department will approve the application and authorize the training program, determine timelines for the correction of deficiencies in the application, or deny the application. If the deficiencies are not corrected within the time period established by the department, the application will be denied.

f. A training program’s initial authorization shall not exceed one year.

g. No person shall interfere with the inspection activities of the department or its agents. Interference with or failure to allow an inspection may be cause for denial of authorization.

139.3(2) Renewal application, inspection and approval.

a. A training program seeking renewal as an EMS training program shall complete and submit to the department the Iowa EMS training program self-assessment renewal application. The application can be downloaded from the BETS website (www.idph.iowa.gov/BETS/EMS/provider-information).

b. EMS training program renewal applications will be submitted at least 90 days before the end of the current authorization period.

c. The department will complete an on-site inspection and review the self-assessment prior to the end of the current authorization period.

d. Following the on-site inspection, the department will provide the training program a renewal application report detailing the status of the application.

e. The department will authorize the training program or determine timelines for the correction of deficiencies in the renewal application.

f. If the deficiencies are not corrected within the time period established by the department, the training program is subject to disciplinary action as described in rule 641—139.9(147A).

g. A training program’s approved renewal authorization shall not exceed four years.

h. No person shall interfere with the inspection activities of the department or its agents. Interference with or failure to allow an inspection may be cause for denial of authorization.

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641—139.4(147A) Training program standards, student requirements and waivers.

139.4(1) Education standards. A training program shall:

a. Have a sponsoring institution that has received authorization from the department to conduct emergency medical care services training.

b. Use the United States Department of Transportation’s Instructional Guidelines (January 2009) for any courses leading to Iowa certification.
Use the Iowa CCP curriculum (January 2016) for courses leading to the CCP endorsement.

Be accredited by, or have submitted a self-study application to, the CAAHEP if graduating students at the paramedic certification level.

Document equivalent training and what portions of any course have been waived for equivalency. A training program may waive portions of the required emergency medical care provider training for students currently certified as emergency medical care providers or licensed in other health care professions, including but not limited to nursing, physician assistant, respiratory therapist, dentistry, and military.

139.4(2) Clinical or field experience resources. Training programs shall:

a. Have a mechanism to clearly identify students in the clinical or field setting, or both.

b. Have sufficient equipment and supplies to be used in the provision of instruction. The equipment and supplies shall be available and consistent with the needs of the curriculum and adequate for the number of students enrolled.

c. Ensure that clinical experiences available are consistent with the needs of the curriculum and adequate for the number of students enrolled.

d. Ensure that clinical affiliations that are outside of the sponsoring training program are established and confirmed in written agreements with institutions or agencies that provide clinical experience under appropriate medical direction and clinical supervision.

e. Only allow students to perform skills and procedures in the classroom, clinical or field setting for which the students have received training with direct supervision by a preceptor designated and approved by the training program.

f. Have sufficient classrooms, laboratories, and administrative offices and facility design to accommodate the number of students in the program and the supporting faculty.

g. Have current approved curriculum and library resources related to the curriculum readily accessible to all enrolled students (on campus and off campus) and shall include current EMS and medical periodicals, scientific texts, audiovisual and self-instructional resources, and other appropriate references.

139.4(3) Staff. Training programs shall:

a. Have a training program director who is a health care professional (full-time educator or practitioner of emergency or critical care) assigned by the training program to direct the operation of the training program.

b. Have a training program medical director who shall, at a minimum, review the educational content of each training program curriculum, evaluate the quality of medical instruction, and supervise delivery of the curriculum by the faculty members.

c. Have qualified faculty through academic preparation, training, and experience to teach and evaluate the courses or topics to which they are assigned. At a minimum, each course coordinator, outreach course coordinator, and primary instructor utilized by the training program shall be endorsed as an Iowa EMS instructor.

d. Be allowed to conduct the NREMT psychomotor examination according to the policies and procedures of the department and the NREMT.

139.4(4) Student eligibility. Training programs shall ensure that emergency medical care students meet the following requirements.

a. Be at least 17 years of age on the date of enrollment.

b. Have a high school diploma or its equivalent if enrolling in an AEMT or paramedic course.

c. Be able to speak, write and read English.

d. Be able to meet the minimum requirements for the cognitive and psychomotor components of the examination with reasonable and appropriate accommodations for those persons with documented disabilities, as required by the Americans with Disabilities Act (ADA).

e. Be currently certified, at a minimum, as an EMT if enrolling in an AEMT or paramedic course.

f. Be a current emergency medical care provider, RN, PA, or physician and submit a recommendation in writing from an approved EMS training program if enrolling in an EMS instructor course.
139.4(5) Students. Training programs shall:
   a. Ensure that each student submits a completed EMS student registration no later than 14 days from the beginning of an emergency medical training program course. The student registration link can be found on the BETS website (www.idph.iowa.gov/BETS/EMS/provider-information).
   b. Have defined processes for review of academic history, criminal history, and health-related issues for the admission of students.
   c. Have a process to evaluate students on a recurring basis and with sufficient frequency to provide both the student and training program faculty with valid and timely indicators of the student’s progress and achievement of the competencies and objectives stated within the program’s curriculum.
   d. Have student guidance procedures that include documentation of regular and timely discussions with qualified faculty or counselors.
   e. Maintain student records for each student enrolled in each program.
   f. Notify the NREMT of each student’s successful completion of a training course to ensure NREMT cognitive examination eligibility.
   g. Verify that a student completes all training program requirements before being eligible to attempt the cognitive and psychomotor certification examinations.
   h. Report to the NREMT successful completion of psychomotor examination of each EMR and EMT student to ensure NREMT registration eligibility.
   i. Verify that a student completes all training program coursework, completes the cognitive and psychomotor testing and possesses a current certification with the NREMT before making application to the department for an initial Iowa emergency medical care provider certification.
   j. Notify the department of the successful or unsuccessful status of each student at the completion of each training course.
   k. Ensure that students function and only perform skills or procedures learned in the training program until an Iowa emergency medical care provider certification is obtained.
   l. Ensure that a student is not substituted for the regular personnel of any affiliated medical facility or service program but may be employed while enrolled in the training program.

139.4(6) Financing and administration. Training programs shall:
   a. Have adequate financial resources to ensure the continued operation of the educational program(s) in which students are enrolled.
   b. Have a program evaluation process to gather and analyze data on the effectiveness of the program.
   c. Notify the department, in writing, of any change in ownership or control of the training program.
   d. Have liability insurance and offer liability insurance to students while they are enrolled in the training program.

[ARC 5143C, IAB 8/12/20, effective 9/16/20; Editorial change: IAC Supplement 11/18/20; ARC 5528C, IAB 3/24/21, effective 4/28/21; ARC 6070C, IAB 12/15/21, effective 1/19/22]

641—139.5(147A) Out-of-state training programs.

139.5(1) Application, inspection and approval.
   a. An out-of-state training program shall complete and submit to the department for review and approval the out-of-state training program self-assessment application. The application can be downloaded from the BETS website (www.idph.iowa.gov/BETS/EMS/provider-information).
   b. An out-of-state training program’s approval by the department shall not exceed four years.
   c. An out-of-state training program seeking initial or renewal approval and graduating students at the paramedic level must also be accredited by, or must have submitted a self-study application to, the CAAHEP.
   d. An out-of-state training program shall be limited to utilization of clinical sites or field sites, or both, within Iowa.
   e. An authorized out-of-state training program shall provide the department with a current roster of students who will be participating in the clinical or field experience within the state of Iowa and, for
each program, the sites where the students will be participating. This roster will be provided prior to commencement of any clinical or field experience.

f. An out-of-state training program shall provide documentation of liability insurance for each student participating in the clinical or field setting within the state of Iowa.

g. Failure to comply with these requirements may lead to disciplinary action or denial of utilization of clinical or field sites in Iowa.

h. The department may perform an on-site inspection of the out-of-state training program’s facilities and clinical and field resources as part of the initial or renewal review process.

i. The department without prior notification may make inspections at times, places and under such circumstances as it deems necessary to ensure compliance with Iowa Code chapter 147A and these rules.

j. No person shall interfere with the inspection activities of the department or its agents.

k. Interference with or failure to allow an inspection may be cause for disciplinary action regarding training program approval.

l. Representatives of the training program may be required to meet with the department at the time the application and inspection report are discussed.

m. A written report of department action and the department inspection report shall be sent to the training program.

n. A training program shall notify the department, in writing, of any change in ownership or control within 30 days.

139.5(2) Out-of-state students.

a. An out-of-state student shall be registered in good standing in an approved out-of-state training program.

b. An out-of-state student may perform any procedures and skills for which the student is receiving training provided that the procedure or skill is within the Iowa scope of practice of a comparable Iowa emergency medical care provider. The student shall be under the direct supervision of a physician or physician designee or under the remote supervision of a physician or physician designee with direct supervision by a preceptor designated and approved by the training program.

c. An out-of-state student shall not be substituted for personnel of any affiliated medical facility or service program.

d. An out-of-state student is not eligible to continue functioning as a student of the approved out-of-state training program in the clinical or field setting (1) if the student is not in good standing with the approved out-of-state training program, (2) once the student has met the training program’s requirements, or (3) once the student has been approved for certification testing.

e. Once all training requirements are met and the out-of-state student acquires a valid NREMT certification, the student may apply for initial Iowa EMS certification as described in rule 641—131.3(147A).

[ARC 5143C; IAB 8/12/20, effective 9/16/20; Editorial change: IAC Supplement 11/18/20]

641—139.6(147A) Failure to comply with rules. Failure of a training program to comply with these rules may result in disciplinary action according to rule 641—139.9(147A).

[ARC 5143C; IAB 8/12/20, effective 9/16/20]

641—139.7(147A) Temporary waivers. If during a period of authorization there is some occurrence that temporarily causes a training program to be in noncompliance with these rules, the department may grant a temporary waiver.

139.7(1) Waivers of these rules may be granted by the department to a currently authorized training program.

139.7(2) Requests for waivers shall apply only to the training program requesting the waiver and shall apply only to those requirements and standards for which the department is responsible.

139.7(3) A training program shall apply for a waiver in accordance with 641—Chapter 178.

[ARC 5143C; IAB 8/12/20, effective 9/16/20; ARC 5525C, IAB 3/24/21, effective 4/28/21]

641—139.8(147A) Continuing education providers—approval, record keeping and inspection.
139.8(1) A training program may conduct continuing education courses utilizing training program instructors.

139.8(2) Each training program shall assign a sponsor number to each core continuing education course using an assignment system approved by the department.

139.8(3) Course approval shall be completed prior to the course’s being offered.

139.8(4) Each training program shall maintain a participant record that includes, as a minimum:

a. Name.
b. Address.
c. Certification number.
d. Course sponsor number.
e. Course instructor.
f. Date of course.
g. CEHs awarded.

139.8(5) The department may request additional information or inspect the records of any continuing education provider who is currently approved or who is seeking approval.

[ARC 5143C, IAB 8/12/20, effective 9/16/20]

641—139.9(147A) Discipline—denial, citation and warning, probation, suspension, or revocation of training program approval or renewal.

139.9(1) This rule is not subject to waiver pursuant to 641—Chapter 178 or any other provision of law.

139.9(2) Method of discipline. The department has the authority to impose the following disciplinary sanctions against a training program:

a. Issue a citation and warning.
b. Impose a period of probation under specific conditions.
c. Prohibit permanently, until further order of the department, or for a specific period, a program’s ability to engage in specific procedures, methods, acts or activities incident to the practice of the profession.
d. Suspend an authorization until further order of the department or for a specific period.
e. Deny an application for authorization.
f. Revoke an authorization.
g. Impose such other sanctions as allowed by law and as may be appropriate.

139.9(3) The department may impose any of the disciplinary sanctions provided in subrule 139.9(2) when it finds that the training program or applicant has failed to meet the applicable provisions of these rules or has committed any of the following acts or offenses:

a. Fraud in procuring approval or renewal.
b. Falsification or failure to document training or continuing education records.
c. Suspension or revocation of approval to provide emergency medical care training or other disciplinary action taken pursuant to Iowa Code chapter 147A. A certified copy of the record or order of suspension, revocation or disciplinary action is conclusive or prima facie evidence.
d. Engaging in any conduct that subverts or attempts to subvert a department investigation.
e. Failure to respond within 30 days of receipt of communication from the department which was sent by registered or certified mail.
f. Failure to comply with a subpoena issued by the department or failure to cooperate with an investigation of the department.
g. Failure to comply with the terms of a department order or the terms of a settlement agreement or consent order.
h. Submission of a false report of continuing education or failure to submit the quarterly report of continuing education.
i. Knowingly aiding, assisting or advising a person to unlawfully practice EMS.
Representing itself as an approved training program or continuing education provider when approval has been suspended or revoked or when approval has lapsed or has been placed on inactive status.

Using an unqualified individual as an instructor or evaluator.

Allowing verbal or physical abuse of a student or staff.

Failing to verify registration of a student with the department within the timeline established by the department or allowing an unregistered student to function in a clinical environment.

A training program provider or continuing education provider shall not sexually harass a patient, student, or coworker. Sexual harassment includes sexual advances, sexual solicitation, requests for sexual favors, and other verbal or physical conduct of a sexual nature communicated in person, in writing, via a third person or through electronic communication.

Betrayal of a professional confidence.

Engaging in a professional conflict of interest.

Discrimination. A training program or continuing education provider shall not practice, condone, or facilitate discrimination against a patient, student, or supervisee on the basis of race, ethnicity, national origin, color, sex, sexual orientation, age, marital status, political belief, religion, mental or physical disability, diagnosis, or social or economic status.

Failure to comply with the 2015 Standards and Guidelines for the Accreditation of Educational Programs in the Emergency Medical Services Professions published by the Commission on Accreditation of Allied Health Education Programs.

641—139.10(147A) Complaints, investigations and appeals.

All complaints regarding an emergency medical care student, training programs or continuing education providers or those purporting to be or operating as the same shall be reported to the department in writing. The address is Iowa Department of Public Health, Bureau of Emergency and Trauma Service, Lucas State Office Building, Des Moines, Iowa 50319-0075.

Any emergency medical care provider, emergency medical care student, training program or continuing education provider who has knowledge of an emergency medical care provider or service program that has violated Iowa Code chapter 147A, 641—Chapter 132 or these rules shall report such information to the department.

Complaint investigations may result in the department’s issuance of a notice of denial, citation and warning, probation, suspension or revocation.

A determination of mental incompetence by a court of competent jurisdiction automatically suspends a certificate for the duration of the certificate unless the department orders otherwise.

Notice of denial, issuance of a citation and warning, probation, suspension or revocation shall be effected in accordance with the requirements of Iowa Code section 17A.12. Notice to the alleged violator of denial, probation, suspension or revocation shall be served by certified mail, return receipt requested, or by personal service.

Any request for a hearing concerning the denial, citation and warning, probation, suspension or revocation shall be submitted by the aggrieved party in writing to the department by certified mail, return receipt requested, within 20 days of the receipt of the department’s notice to take action. The address is Iowa Department of Public Health, Bureau of Emergency and Trauma Services, Lucas State Office Building, Des Moines, Iowa 50319-0075. If the request is made within the 20-day time period, the notice to take action shall be deemed to be suspended pending the hearing. Prior to or at the hearing, the department may rescind the notice upon satisfaction that the reason for the denial, citation and warning, probation, suspension or revocation has been or will be removed. If no request for a hearing is received within the 20-day time period, the department’s notice of denial, citation and warning, probation, suspension or revocation shall become the department’s final agency action.

Upon receipt of a request for hearing, the department shall forward the request within five working days to the department of inspections and appeals pursuant to the rules adopted by that agency.
regarding the transmission of contested cases. The information upon which the adverse action is based and any additional information which may be provided by the aggrieved party shall also be provided to the department of inspections and appeals.

139.10(8) The hearing shall be conducted according to the procedural rules of the department of inspections and appeals found in 481—Chapter 10.

139.10(9) When the administrative law judge makes a proposed decision and order, it shall be served by certified mail, return receipt requested, or delivered by personal service. That proposed decision and order then becomes the department’s final agency action without further proceedings ten days after it is received by the aggrieved party unless an appeal to the director is taken as provided in subrule 139.10(10).

139.10(10) Any appeal to the director for review of the proposed decision and order of the administrative law judge shall be filed in writing and mailed to the director by certified mail, return receipt requested, or delivered by personal service within ten days after the receipt of the administrative law judge’s proposed decision and order by the aggrieved party. A copy of the appeal shall also be mailed to the administrative law judge. Any request for an appeal shall state the reason for appeal.

139.10(11) Upon receipt of an appeal request, the administrative law judge shall prepare the record of the hearing for submission to the director. The record shall include the following:
   a. All pleadings, motions, and rules.
   b. All evidence received or considered and all other submissions by recording or transcript.
   c. A statement of all matters officially noticed.
   d. All questions and offers of proof, objections and rulings on them.
   e. All proposed findings and exceptions.
   f. The proposed decision and order of the administrative law judge.

139.10(12) The decision and order of the director becomes the department’s final agency action upon receipt by the aggrieved party and shall be delivered by certified mail, return receipt requested, or by personal service.

139.10(13) It is not necessary to file an application for a rehearing to exhaust administrative remedies when appealing to the director or the district court as provided in Iowa Code section 17A.19. The aggrieved party to the final agency action of the department who has exhausted all administrative remedies may petition for judicial review of that action pursuant to Iowa Code chapter 17A.

139.10(14) Any petition for judicial review of a decision and order shall be filed in the district court within 30 days after the decision and order becomes final. A copy of the notice of appeal shall be sent to the department by certified mail, return receipt requested, or by personal service. The address is Iowa Department of Public Health, Bureau of Emergency and Trauma Services, Lucas State Office Building, Des Moines, Iowa 50319-0075.

139.10(15) The party who appeals a final agency action to the district court shall pay the cost of the preparation of a transcript of the contested case hearing for the district court.

139.10(16) Final decisions of the department relating to disciplinary proceedings may be transmitted to the appropriate professional associations, the news media or employer.

[ARC 5143C, IAB 8/12/20, effective 9/16/20]

These rules are intended to implement Iowa Code chapter 147A.

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