



Iowa Department of
INSPECTIONS, APPEALS, & LICENSING



November 2023

Hospital License Renewals

License renewal applications for 2024 will be sent in mid-November 2023, and must be returned to the Department of Inspections, Appeals, and Licensing (DIAL) no later than Dec. 8, 2023. Once completed, the administrator and the individual completing the application should sign it in the designated areas, and return it to DIAL with the licensure fee. It is not necessary to return the old license to the department. Current hospital licenses expire Dec. 31, 2023.

What is the difference between total bed count, staffed bed count, and average daily census?

The total bed count should be reported as the hospital's total bed capacity, as authorized by the hospital's Certificate of Need (CON). This number may exceed the number of beds physically located at the hospital.

The staffed bed count is the number of beds currently available to treat patients, given the normal number of staff members on duty. The staffed bed count may not be the same number as the total bed count, as hospitals often only utilize a fraction of the beds authorized by their CON. The staffed bed count should include beds with a staff member available to provide care to the patient on an average day. The staffed bed count should only include the number of beds with a staff member available without resorting to bringing in additional staff members.

The average daily census is the total number of patients at the hospital on an average day. The number does not include any patients who live in a hospital-owned long-term care facility.

Does the total bed count need to equal the number of beds in acute care, observation, etc.?

The total bed count does not need to equal the number of beds in acute care, observation, etc. The total bed count is the number of beds authorized by the Certificate of Need. The breakdown of beds lists several types of common units and is not an all-inclusive list. Beds may be used for several different types of patients.

What is the difference between swing beds and a long-term care facility?

Swing beds are hospital patient rooms that can be used for patients in acute/observation status or in a skilled-care status. The patient can “swing” between being an acute patient and skilled-status patient without changing rooms. Patients in a swing bed often receive rehabilitative therapy following a major medical or surgical event.

A long-term care (LTC) facility is a distinct and separately certified part of the hospital. The LTC facility will have a different Centers for Medicare and Medicaid Services (CMS) Certification Number (CCN) or Provider Transaction Access Number (PTAN) than the hospital, and will be surveyed separately from the hospital.

How should I list services the hospital provides versus contracted services?

The services section asks two separate questions. The first question is if the hospital provides the service to their patients. The second question is if the service is provided through a contracted service. For example, one hospital may choose to provide acute, inpatient dialysis services to their patients through the use of hospital employees to provide acute, inpatient dialysis. The hospital would only check the “Yes” box on the application in this case.

Another hospital may also choose to provide acute, inpatient dialysis services to their patients, but instead of using hospital employees to provide care, the hospital contracts with an outside dialysis company to provide acute, inpatient dialysis services to the hospital's patients. In this case, the hospital would check “Yes” AND “Contracted Service.” Generally, the use of physicians who are employed by an outside company or practice independently does not qualify as a “contracted service.”

What is an accrediting organization, and is DIAL an accrediting organization?

An accrediting organization is an outside organization, such as [The Joint Commission](#), which provides hospitals with the option to have the outside organization perform the hospital's recertification surveys instead of DIAL. Hospitals pay the outside organization to perform the recertification surveys. DIAL is not an accrediting organization. DIAL contracts with CMS to provide recertification surveys and enforces the CMS' Conditions of Participation. If your organization does not utilize an accrediting organization to perform

the recertification surveys, and instead relies on DIAL, please check the “Not Accredited” box.

Rural Emergency Hospitals (REH) Legislation

The Department of Inspections, Appeals, and Licensing has submitted a regulatory analysis and proposed repromulgation of Chapter 51, "Hospitals," to implement the REH legislation (2023 Iowa Acts, [Senate File 75](#)) and [Executive Order 10](#). The regulatory analysis will be published in the "[Iowa Administrative Bulletin](#)" on Nov. 29, 2023.

DIAL Has a New Address

The Iowa Department of Inspections, Appeals, and Licensing’s address has changed. Please update your records.

Iowa Department of Inspections, Appeals, and Licensing
Health and Safety Division
6200 Park Ave., Suite 100
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Meet DIAL's New Hospital Program Coordinator

Renee Andrews is DIAL's new program coordinator for hospitals. You can reach her at renee.andrews@dia.iowa.gov.

Renee has been a registered nurse since 1994 and has worked for the State of Iowa since 1999. She earned her bachelor's degree in the science of psychology from Western Illinois University and obtained an associate's degree in nursing from Southeastern Community College. Renee has more than 10 years experience as a health facilities surveyor for long-term care facilities, home health, hospice, rural health clinics, federally qualified health centers, and community mental health centers. Her past experience includes social work services for the State and psychiatric hospital nursing.



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