

**CIVIL RIGHTS COMMISSION[161]**

**Adopted and Filed Emergency**

**Rule making related to assistance animal as reasonable accommodation in housing**

The Civil Rights Commission hereby amends Chapter 9, “Discrimination in Housing,” Iowa Administrative Code.

*Legal Authority for Rule Making*

This rule making is adopted under the authority provided in 2019 Iowa Acts, Senate File 341.

*State or Federal Law Implemented*

This rule making implements, in whole or in part, 2019 Iowa Acts, Senate File 341.

*Purpose and Summary*

The purpose of the amendment to Chapter 9 is to comply with Iowa Code section 216.8C(3) as enacted by 2019 Iowa Acts, Senate File 341, section 3, which provides requirements pertaining to a request for an assistance animal as a reasonable accommodation for a disability in housing. The legislation requires the Commission to adopt a form for a health care professional, as defined by the statute, to make a written finding regarding whether a patient or client has a disability and whether the need for an assistance animal is related to the disability.

*Reason for Adoption of Rule Making Without  
Prior Notice and Opportunity for Public Participation*

Pursuant to Iowa Code section 17A.4(3), the Commission finds that notice and public participation are unnecessary or impractical because statute so provides. The amendment implements the provisions of 2019 Iowa Acts, Senate File 341, which was signed on May 2, 2019. The amendment is necessary to effect the legislation. The contents of the form are specified in the legislation, and the form conforms to the precise requirements.

*Reason for Waiver of Normal Effective Date*

Pursuant to Iowa Code section 17A.5(2)“b”(1)(a), the Commission also finds that the normal effective date of this rule making, 35 days after publication, should be waived and the rule making made effective on June 26, 2019, because the statute, 2019 Iowa Acts, Senate File 341, section 8, so provides.

*Adoption of Rule Making*

This rule making was adopted by the Commission on June 14, 2019.

*Concurrent Publication of Notice of Intended Action*

In addition to its adoption on an emergency basis, this rule making has been initiated through the normal rule-making process and is published herein under Notice of Intended Action as **ARC 4551C** to allow for public comment.

*Fiscal Impact*

This rule making has no fiscal impact to the State of Iowa.

*Jobs Impact*

After analysis and review of this rule making, no impact on jobs has been found.

*Waivers*

Any person who believes that the application of the discretionary provisions of this rule making would result in hardship or injustice to that person may petition the Commission for a waiver of the discretionary provisions, if any, pursuant to 161—Chapter 15.

*Review by Administrative Rules Review Committee*

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rule making by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rule making at its **regular monthly meeting** or at a special meeting. The Committee’s meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

*Effective Date*

This rule making became effective on June 26, 2019.

The following rule-making action is adopted:

Adopt the following **new** Appendix A in 161—Chapter 9:

**Appendix A  
Form 1**

**Request for Assistance Animal as a Reasonable Accommodation in Housing:  
Health Care Professional Form**

Requester’s Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

I, \_\_\_\_\_, intend to request that \_\_\_\_\_ permit me to keep an assistance animal as a reasonable accommodation in housing for my disability. In connection with that application, I am requesting that you complete this form regarding my disability.

\_\_\_\_\_  
Requester’s Signature Date

**REQUIREMENTS FOR HEALTH CARE PROFESSIONAL**

A health care professional shall only make the findings listed in the next section if all of the following conditions apply:

- 1) The health care professional has met with the patient or client in person or by telemedicine,
- 2) The health care professional is familiar with the patient or client and the disability, and
- 3) The health care professional is legally and professionally qualified to make the finding.

**TO BE COMPLETED BY HEALTH CARE PROFESSIONAL**

- 1. Does the individual identified above have a disability?  
 Yes  No
- 2. If yes, is the need for an assistance animal related to that disability? For example, does or would an assistance animal alleviate one or more of the symptoms or effects of the disability?  
 Yes  No

Health Care Provider’s Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Title: \_\_\_\_\_  
Date: \_\_\_\_\_

References: Iowa Code sections 216.8B and 216.8C

Resources: <https://icrc.iowa.gov/>, 515-281-4121, 1-800-457-4416

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EDITOR'S NOTE: For replacement pages for IAC, see IAC Supplement 7/17/19.