

5. This section shall not be construed to limit or otherwise discourage the use of generic equivalent drugs approved by the United States food and drug administration, whenever available and appropriate. This section, when a brand name drug is requested by a covered individual and a suitable generic equivalent is available and appropriate, shall not be construed to prohibit a third-party payor from requiring the covered individual to pay a deductible, coinsurance, or copayment consistent with subsection 3, in addition to the difference of the cost of the brand name drug less the maximum covered amount for a generic equivalent.

6. A person who provides an individual policy or contract providing for third-party payment or prepayment of health or medical expenses shall make available a coverage provision that satisfies the requirements in subsections 1 through 5 in the same manner as such requirements are applicable to a group policy or contract under those subsections. The policy or contract shall provide that the individual policyholder may reject the coverage provision at the option of the policyholder.

7. a. This section applies to the following classes of third-party payment provider contracts or policies delivered, issued for delivery, continued, or renewed in this state on or after July 1, 2000:

(1) Individual or group accident and sickness insurance providing coverage on an expense-incurred basis.

(2) An individual or group hospital or medical service contract issued pursuant to chapter 509, 514, or 514A.

(3) An individual or group health maintenance organization contract regulated under chapter 514B.

(4) Any other entity engaged in the business of insurance, risk transfer, or risk retention, which is subject to the jurisdiction of the commissioner.

(5) A plan established pursuant to chapter 509A for public employees.

(6) An organized delivery system licensed by the director of public health.

b. This section shall not apply to accident only, specified disease, short-term hospital or medical, hospital confinement indemnity, credit, dental, vision, Medicare supplement, long-term care, basic hospital and medical-surgical expense coverage as defined by the commissioner, disability income insurance coverage, coverage issued as a supplement to liability insurance, workers' compensation or similar insurance, or automobile medical payment insurance.

Approved April 20, 2000

CHAPTER 1121

JUVENILE FACILITY EDUCATION COSTS

S.F. 2294

AN ACT relating to payment of education costs for certain juvenile facilities and providing an effective date.

Be It Enacted by the General Assembly of the State of Iowa:

Section 1. Section 282.30, subsection 1, paragraph b, unnumbered paragraph 2, Code 1999, is amended to read as follows:

c. An area education agency shall not provide educational services to a facility specified in paragraph "a" unless the facility makes a request for educational services to the area education agency by either of the following dates:

(1) December 1 of the school year prior to the beginning of the school year for which the services are being requested.

(2) Ninety days prior to the beginning of the time for which the services are being requested if the facility is a newly established facility.

Sec. 2. EFFECTIVE DATE — FACILITIES FOR 1999-2000 SCHOOL YEAR. Section 1 of this Act, amending section 282.30 and relating to educational services provided to a facility by an area education agency, being deemed of immediate importance, takes effect upon enactment. A facility described in section 282.30, subsection 1, paragraph “a”, that was initially established and approved or licensed after December 1, 1998, and that made a written request to the area education agency for educational services at least ninety days prior to the placement of children at the facility, shall be reimbursed by the department of revenue and finance for the facility’s costs of providing the appropriate educational services to children placed at the facility for the 1999-2000 school year. The reimbursable costs shall be approved pursuant to section 282.31 and applicable administrative rules. Any amount paid by the department of revenue and finance shall be deducted monthly from the state foundation aid paid under section 257.16 to all school districts in the state during the subsequent fiscal year.

Approved April 20, 2000

CHAPTER 1122

DNA PROFILING

S.F. 2324

AN ACT relating to DNA profiling.

Be It Enacted by the General Assembly of the State of Iowa:

Section 1. Section 13.10, Code 1999, is amended to read as follows:

13.10 PHYSICAL CRIMINAL EVIDENCE — DNA PROFILING.

1. The attorney general shall adopt rules in consultation with the division of criminal investigation, department of public safety, for the purpose of classifying felonies and indictable misdemeanors which shall require the offender to submit a physical specimen for DNA profiling upon confinement in or prior to release from a county jail, upon commitment to the custody of the director of the department of corrections or, prior to discharge of sentence or, as a condition of probation, parole, or work release. Factors to be considered shall include the deterrent effect of DNA profiling, the likelihood of repeated violations, and the seriousness of the offense. The offenses that require the offender to submit a physical specimen for DNA profiling shall include but are not limited to the following:

- a. Murder in violation of section 707.2 or 707.3.
- b. Attempt to commit murder in violation of section 707.11.
- c. Kidnapping in violation of section 710.1, 710.2, or 710.3.
- d. Sexual abuse in violation of sections 709.2, 709.3, or 709.4.
- e. Assault with intent to commit sexual abuse in violation of section 709.11.
- f. Assault while participating in a felony in violation of section 708.3.
- g. Burglary in the first degree in violation of section 713.3.