

CHAPTER 222

PERSONS WITH AN INTELLECTUAL DISABILITY

Referred to in §225C.6, 235B.2, 235B.3, 235E.1, 235E.2, 235F.1, 252.16, 252.23, 331.381, 331.394

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222.1 Purpose of chapter — state resource centers — special unit at state mental health institute.

1. **This chapter** addresses the public and private services available in this state to meet the needs of persons with an intellectual disability. The responsibility of the mental health and disability services regions formed by counties and of the state for the costs and administration of publicly funded services shall be as set out in [section 222.60](#) and other pertinent sections of [this chapter](#).

2. The Glenwood state resource center and the Woodward state resource center are established and shall be maintained as the state's regional resource centers for the purpose of providing treatment, training, instruction, care, habilitation, and support of persons with an intellectual disability or other disabilities in this state, and providing facilities, services, and other support to the communities located in the region being served by a state resource center. In addition, the state resource centers are encouraged to serve as a training resource for community-based program staff, medical students, and other participants in professional education programs. A resource center may request the approval of the council on human

services to change the name of the resource center for use in communication with the public, in signage, and in other forms of communication.

3. A special intellectual disability unit may be maintained at one of the state mental health institutes for the purposes set forth in [sections 222.88 to 222.91](#).

[S13, §2727-a93, -a95; SS15, §2727-a93, -a96; C24, 27, 31, 35, 39, §3465, 3468; C46, 50, 54, 58, 62, §223.1, 223.4; C66, 71, 73, 75, 77, 79, 81, §222.1]

[95 Acts, ch 82, §6](#); [98 Acts, ch 1155, §8](#); [2000 Acts, ch 1112, §46](#); [2012 Acts, ch 1019, §22](#); [2015 Acts, ch 69, §2](#)

Referred to in [§222.73](#)

222.2 Definitions.

When used in [this chapter](#), unless the context otherwise requires:

1. “Administrator” means the person assigned by the director of human services, in accordance with [section 218.1](#), to control the state resource centers.

2. “Auditor” means the county auditor or the auditor’s designee.

3. “Department” means the department of human services.

4. “Intellectual disability” means the same as defined in [section 4.1](#).

5. “Mental health and disability services region” means a mental health and disability services region formed in accordance with [section 331.389](#).

6. “Regional administrator” means the regional administrator of a mental health and disability services region, as defined in [section 331.388](#).

7. “Special unit” means a special intellectual disability unit established at a state mental health institute pursuant to [sections 222.88 to 222.91](#).

8. “State resource centers” or “resource centers” means the Glenwood state resource center and the Woodward state resource center.

9. “Superintendents” means the superintendents of the state resource centers.

[C97, §2699; C24, 27, 31, 35, 39, §3411; C46, 50, 54, 58, 62, §222.1; C66, 71, 73, 75, 77, 79, 81, §222.2; [81 Acts, ch 78, §20, 30](#)]

[83 Acts, ch 96, §157, 159](#); [94 Acts, ch 1170, §35](#); [96 Acts, ch 1183, §1](#); [97 Acts, ch 169, §14](#); [2000 Acts, ch 1112, §47 – 50](#); [2001 Acts, ch 155, §14](#); [2004 Acts, ch 1090, §33](#); [2012 Acts, ch 1019, §23](#); [2015 Acts, ch 69, §3, 4](#)

222.3 Superintendents.

The administrator shall appoint a qualified superintendent for each of the resource centers who shall receive such salary as the administrator shall determine.

[SS15, §2727-a96; C24, 27, 31, 35, 39, §3466; C46, 50, 54, 58, 62, §223.2; C66, 71, 73, 75, 77, 79, 81, §222.3]

[2000 Acts, ch 1112, §51](#)

222.4 Duties.

The superintendents shall:

1. Perform all duties required by law and by the administrator not inconsistent with law.

2. Oversee and insure individual treatment and professional care of each patient in the resource centers.

3. Maintain a full and complete record of the condition of each patient in the resource centers.

4. Have custody, control, and management of all patients in such manner as deemed best subject to the regulations of the administrator.

[SS15, §2727-a96; C24, 27, 31, 35, 39, §3467; C46, 50, 54, 58, 62, §223.3; C66, 71, 73, 75, 77, 79, 81, §222.4]

[2000 Acts, ch 1112, §51](#)

Referred to in [§222.90](#)

222.5 Preadmission diagnostic evaluation.

No person shall be eligible for admission to a resource center or a special unit until a preadmission diagnostic evaluation has been made by a resource center or a special unit which confirms or establishes the need for admission.

[C24, 27, 31, 35, 39, §3444; C46, 50, 54, 58, 62, §222.34; C66, 71, 73, 75, 77, 79, 81, §222.5]
2000 Acts, ch 1112, §51

222.6 State districts.

The administrator shall divide the state into two districts in such manner that one of the resource centers shall be located within each of the districts. Such districts may from time to time be changed. After such districts have been established, the administrator shall notify all boards of supervisors, regional administrators, and clerks of the district courts of the action. Thereafter, unless the administrator otherwise orders, all admissions of persons with an intellectual disability from a district shall be to the resource center located within such district.

[C24, 27, 31, 35, 39, §3476; C46, 50, 54, 58, 62, §223.10; C66, 71, 73, 75, 77, 79, 81, §222.6]
96 Acts, ch 1129, §113; 2000 Acts, ch 1112, §51; 2012 Acts, ch 1019, §24; 2013 Acts, ch 130, §17, 35; 2015 Acts, ch 69, §5; 2016 Acts, ch 1073, §66

222.7 Transfers.

The administrator may transfer patients from one state resource center to the other and may at any time transfer patients from the resource centers to the hospitals for persons with mental illness, or transfer patients in the resource centers to a special unit or vice versa. The administrator may also transfer patients from a hospital for persons with mental illness to a resource center if:

1. In the case of a patient who entered the hospital for persons with mental illness voluntarily, consent is given in advance by the patient or, if the patient is a minor or is incompetent, the person responsible for the patient.

2. In the case of a patient hospitalized pursuant to [sections 229.6 to 229.15](#), the consent of the court which hospitalized the patient is obtained in advance, rather than afterward as otherwise permitted by [section 229.15, subsection 4](#).

[SS15, §2727-a96; C24, 27, 31, 35, 39, §3456, 3472, 3477; C46, 50, 54, 58, 62, §222.46, 223.8, 223.11; C66, 71, 73, 75, 77, 79, 81, §222.7]

83 Acts, ch 96, §71, 159; 96 Acts, ch 1129, §113; 2000 Acts, ch 1112, §51

Referred to in [§226.8](#)

222.8 Communications by patients.

Persons admitted to the resource centers or a special unit shall have all reasonable opportunity and facility for communication with their friends. Such persons shall be permitted to write and send letters, provided the letters contain nothing of an offensive character. Letters written by any patient to the administrator or to any state or county official shall be forwarded unopened.

[C24, 27, 31, 35, 39, §3445; C46, 50, 54, 58, 62, §222.35; C66, 71, 73, 75, 77, 79, 81, §222.8]
2000 Acts, ch 1112, §51

222.9 Unauthorized departures.

If any person with an intellectual disability shall depart without proper authorization from a resource center or a special unit, it shall be the duty of the superintendent and the superintendent's assistants and all peace officers of any county in which such patient may be found to take and detain the patient without a warrant or order and to immediately report such detention to the superintendent who shall immediately provide for the return of such patient to the resource center or special unit.

[C24, 27, 31, 35, 39, §3460; C46, 50, 54, 58, 62, §222.50; C66, 71, 73, 75, 77, 79, 81, §222.9]
96 Acts, ch 1129, §113; 2000 Acts, ch 1112, §51; 2012 Acts, ch 1019, §25

222.10 Duty of peace officer.

When any person with an intellectual disability departs without proper authority from an institution in another state and is found in this state, any peace officer in any county in which such patient is found may take and detain the patient without warrant or order and shall report such detention to the administrator. The administrator shall provide for the return of the patient to the authorities in the state from which the unauthorized departure was made. Pending return, such patient may be detained temporarily at one of the institutions of this state governed by the administrator or by the administrator of the division of child and family services of the department of human services. The provisions of [this section](#) relating to the administrator shall also apply to the return of other nonresident persons with an intellectual disability having legal residency outside the state of Iowa.

[C58, 62, §222.55; C66, 71, 73, 75, 77, 79, 81, §222.10]

[83 Acts, ch 96, §157, 159; 96 Acts, ch 1129, §113; 2012 Acts, ch 1019, §26; 2012 Acts, ch 1120, §69, 130](#)

222.11 Expense.

All actual and necessary expenses incurred in the taking into protective custody, restraint, and transportation of such patients to the resource centers shall be paid on itemized vouchers, sworn to by the claimants, and approved by the superintendent and the administrator from any money in the state treasury not otherwise appropriated.

[C24, 27, 31, 35, 39, §3461; C46, 50, 54, 58, 62, §222.51; C66, 71, 73, 75, 77, 79, 81, §222.11]

[2000 Acts, ch 1112, §51](#)

222.12 Deaths investigated.

1. Upon the death of a patient of a resource center or special unit, a preliminary investigation of the death shall be conducted as required by [section 218.64](#) by the county medical examiner as provided in [section 331.802](#). Such a preliminary investigation shall also be conducted in the event of a sudden or mysterious death of a patient in a private institution for persons with an intellectual disability. The chief administrative officer of any private institution may request an investigation of the death of any patient by the county medical examiner.

2. Notice of the death of the patient, and the cause of death, shall be sent to the regional administrator for the patient's county of residence. The fact of death with the time, place, and alleged cause shall be entered upon the docket of the court.

3. The parent, guardian, or other person responsible for the admission of a patient to a private institution for persons with an intellectual disability may also request such a preliminary investigation by the county medical examiner in the event of the death of the patient that is not sudden or mysterious. The person or persons making the request are liable for the expense of such preliminary investigation and payment for the expense may be required in advance.

[C24, 27, 31, 35, 39, §3447; C46, 50, 54, 58, 62, §222.37; C66, 71, 73, 75, 77, 79, 81, §222.12]

[96 Acts, ch 1129, §113; 2000 Acts, ch 1112, §51; 2008 Acts, ch 1187, §135; 2012 Acts, ch 1019, §27; 2013 Acts, ch 130, §18, 35; 2015 Acts, ch 69, §6; 2016 Acts, ch 1073, §67](#)

222.13 Voluntary admissions.

1. If an adult person is believed to be a person with an intellectual disability, the adult person or the adult person's guardian may apply to the department and the superintendent of any state resource center for the voluntary admission of the adult person either as an inpatient or an outpatient of the resource center. If the expenses of the person's admission or placement are payable in whole or in part by the person's county of residence, application for the admission shall be made through the regional administrator. An application for admission to a special unit of any adult person believed to be in need of any of the services provided by the special unit under [section 222.88](#) may be made in the same manner. The superintendent shall accept the application if a preadmission diagnostic evaluation confirms or establishes the need for admission, except that an application shall not be accepted if the institution

does not have adequate facilities available or if the acceptance will result in an overcrowded condition.

2. If the resource center does not have an appropriate program for the treatment of an adult or minor person with an intellectual disability applying under [this section](#) or [section 222.13A](#), the regional administrator for the person's county of residence or the department, as applicable, shall arrange for the placement of the person in any public or private facility within or without the state, approved by the director of human services, which offers appropriate services for the person. If the expenses of the placement are payable in whole or in part by a county, the placement shall be made by the regional administrator for the county.

3. If the expenses of an admission of an adult to a resource center or a special unit, or of the placement of the person in a public or private facility are payable in whole or in part by a mental health and disability services region, the regional administrator shall make a full investigation into the financial circumstances of the person and those liable for the person's support under [section 222.78](#) to determine whether or not any of them are able to pay the expenses arising out of the admission of the person to a resource center, special unit, or public or private facility. If the regional administrator finds that the person or those legally responsible for the person are presently unable to pay the expenses, the regional administrator shall pay the expenses. The regional administrator may review such a finding at any subsequent time while the person remains at the resource center, or is otherwise receiving care or treatment for which [this chapter](#) obligates the region to pay. If the regional administrator finds upon review that the person or those legally responsible for the person are presently able to pay the expenses, the finding shall apply only to the charges incurred during the period beginning on the date of the review and continuing thereafter, unless and until the regional administrator again changes such a finding. If the regional administrator finds that the person or those legally responsible for the person are able to pay the expenses, the regional administrator shall collect the charges to the extent required by [section 222.78](#), and the regional administrator shall be responsible for the payment of the remaining charges.

[C24, 27, 31, 35, 39, §3464, 3477.2; C46, 50, 54, 58, 62, §222.54, 223.13; C66, 71, 73, 75, 77, 79, 81, §222.13]

[83 Acts, ch 96, §157, 159; 95 Acts, ch 82, §7; 96 Acts, ch 1183, §2; 97 Acts, ch 169, §2; 2000 Acts, ch 1112, §51; 2004 Acts, ch 1090, §33; 2012 Acts, ch 1019, §28; 2012 Acts, ch 1120, §70, 130; 2013 Acts, ch 90, §45; 2015 Acts, ch 69, §7](#)

Referred to in [§222.14, 222.15, 222.59, 331.381, 331.502](#)

222.13A Voluntary admissions — minors.

1. If a minor is believed to be a person with an intellectual disability, the minor's parent, guardian, or custodian may apply to the department for admission of the minor as a voluntary patient in a state resource center. If the resource center does not have appropriate services for the minor's treatment, the department may arrange for the admission of the minor in a public or private facility within or without the state, approved by the director of human services, which offers appropriate services for the minor's treatment.

2. Upon receipt of an application for voluntary admission of a minor, the department shall provide for a preadmission diagnostic evaluation of the minor to confirm or establish the need for the admission. The preadmission diagnostic evaluation shall be performed by a person who meets the qualifications of a qualified intellectual disability professional who is designated by the department.

3. During the preadmission diagnostic evaluation, the minor shall be informed both orally and in writing that the minor has the right to object to the voluntary admission. If the preadmission diagnostic evaluation determines that the voluntary admission is appropriate but the minor objects to the admission, the minor shall not be admitted to the state resource center unless the court approves of the admission. A petition for approval of the minor's admission may be submitted to the juvenile court by the minor's parent, guardian, or custodian.

4. As soon as practicable after the filing of a petition for approval of the voluntary admission, the court shall determine whether the minor has an attorney to represent the minor in the proceeding. If the minor does not have an attorney, the court shall assign to

the minor an attorney. If the minor is unable to pay for an attorney, the attorney shall be compensated by the mental health and disability services region at an hourly rate to be established by the regional administrator in substantially the same manner as provided in [section 815.7](#).

5. The court shall order the admission of a minor who objects to the admission, only after a hearing in which it is shown by clear and convincing evidence that both of the following circumstances exist:

a. The minor needs and will substantially benefit from treatment or habilitation.

b. A placement which involves less restriction of the minor's liberties for the purposes of treatment or habilitation is not feasible.

[95 Acts, ch 82, §8; 96 Acts, ch 1183, §3; 99 Acts, ch 135, §15; 2000 Acts, ch 1112, §51; 2004 Acts, ch 1090, §33; 2012 Acts, ch 1019, §29; 2015 Acts, ch 69, §8](#)

Referred to in [§222.13, 222.15, 222.59](#)

222.14 Care by region pending admission.

If the institution is unable to receive a patient, the superintendent shall notify the regional administrator for the county of residence of the prospective patient. Until such time as the patient is able to be received by the institution, or when application has been made for admission to a public or private facility as provided in [section 222.13](#) and the application is pending, the care of the patient shall be provided as arranged by the regional administrator.

[C24, 27, 31, 35, 39, §3433; C46, 50, 54, 58, 62, §222.23; C66, 71, 73, 75, 77, 79, 81, §222.14]
[2015 Acts, ch 69, §9](#)

Referred to in [§331.381](#)

222.15 Discharge of patients admitted voluntarily.

[This section](#) applies to any person who was voluntarily admitted to a state resource center or other facility in accordance with the provisions of [section 222.13](#) or [222.13A](#). Except as otherwise provided by [this section](#), if the person or the person's parent, guardian, or custodian submits a written request for the person's release, the person shall be immediately released.

1. If the person is an adult and was admitted pursuant to an application by the person or the person's guardian and the request for release is made by a different person, the release is subject to the agreement of the person voluntarily admitted or the person's guardian, if the guardian submitted the application.

2. If the person is a minor who was admitted pursuant to the provisions of [section 222.13A](#), the person's release prior to becoming eighteen years of age is subject to the consent of the person's parent, guardian, or custodian, or to the approval of the court if the admission was approved by the court.

[SS15, §2727-a96; C24, 27, 31, 35, 39, §3473; C46, 50, 54, 58, 62, §223.9; C66, 71, 73, 75, 77, 79, 81, §222.15]

[95 Acts, ch 82, §9; 2000 Acts, ch 1112, §51; 2013 Acts, ch 130, §19, 35](#)

Referred to in [§222.59](#)

222.16 through 222.32 Repealed by 2013 Acts, ch 130, §34, 35.

222.33 Reserved.

222.34 Guardianship proceedings.

If a guardianship is proposed for a person with an intellectual disability, guardianship proceedings shall be initiated and conducted as provided in [chapter 633](#).

[C24, 27, 31, 35, 39, §3431; C46, 50, 54, 58, 62, §222.21; C66, 71, 73, 75, 77, 79, 81, §222.34]
[84 Acts, ch 1299, §4; 96 Acts, ch 1129, §113; 2012 Acts, ch 1019, §40](#)

222.35 Reserved.

222.36 through 222.49 Repealed by 2013 Acts, ch 130, §34, 35.

222.50 County of residence or state to pay.

When the proceedings are instituted in a county in which the person who is alleged to have an intellectual disability was found but which is not the county of residence of the person, and the costs are not taxed to the petitioner, the person's county of residence or the state, as determined in accordance with [section 222.60](#), shall, on presentation of a properly itemized bill for such costs, repay the costs to the former county.

[C24, 27, 31, 35, 39, §3451; C46, 50, 54, 58, 62, §222.41; C66, 71, 73, 75, 77, 79, 81, §222.50]
[96 Acts, ch 1129, §49](#); [2012 Acts, ch 1019, §46](#); [2012 Acts, ch 1120, §73, 130](#)
Referred to in [§331.502](#)

222.51 Costs collected. Repealed by [2013 Acts, ch 130, §34, 35](#).

222.52 Proceedings against delinquent — hearing on intellectual disability.

When in proceedings against an alleged delinquent or dependent child, the court is satisfied from any evidence that such child has an intellectual disability, the court may order a continuance of such proceeding, and may direct an officer of the court or some other proper person to file a petition against such child permitted under the provisions of [this chapter](#). Pending hearing of the petition the court may by order provide proper custody for the child.

[C24, 27, 31, 35, 39, §3453; C46, 50, 54, 58, 62, §222.43; C66, 71, 73, 75, 77, 79, 81, §222.52]
[2012 Acts, ch 1019, §48](#)
Referred to in [§222.53](#)

222.53 Conviction — suspension.

If on the conviction in the district court of any person for any crime or for any violation of any municipal ordinance, or if on the determination in the court that a child is dependent, neglected, or delinquent and it appears from any evidence presented to the court before sentence, that such person has an intellectual disability within the meaning of [this chapter](#), the court may suspend sentence or order, and may order any officer of the court or some other proper person to file a petition permitted under the provisions of [this chapter](#) against such person. Pending hearing of the petition, the court shall provide for the custody of such person as directed in [section 222.52](#).

[C24, 27, 31, 35, 39, §3454; C46, 50, 54, 58, 62, §222.44; C66, 71, 73, 75, 77, 79, 81, §222.53]
[2012 Acts, ch 1019, §49](#)

222.54 through 222.58 Repealed by [2013 Acts, ch 130, §34, 35](#).

222.59 Alternative to state resource center placement.

1. Upon receiving a request from an authorized requester, the superintendent of a state resource center shall coordinate with the regional administrator for the person's county of residence or the department, as applicable, in assisting the requester in identifying available community-based services as an alternative to continued placement of a patient in the state resource center. For the purposes of [this section](#), "authorized requester" means the parent, guardian, or custodian of a minor patient, the guardian of an adult patient, or an adult patient who does not have a guardian. The assistance shall identify alternatives to continued placement which are appropriate to the patient's needs and shall include but are not limited to any of the following:

- a. Providing information on currently available services that are an alternative to residence in the state resource center.
- b. Referring the patient to an appropriate case management agency or other provider of service.

2. If a patient was admitted pursuant to [section 222.13](#) or [section 222.13A](#) and the patient

wishes to be placed outside of the state resource center, the discharge for the placement shall be made in accordance with the provisions of [section 222.15](#).

[C97, §2698; C24, 27, 31, 35, 39, §3405, 3446; C46, §221.4; C46, 50, 54, 58, 62, §222.36, 223.19; C66, 71, 73, 75, 77, 79, 81, §222.59]

83 Acts, ch 96, §157, 159; 90 Acts, ch 1271, §1502; 95 Acts, ch 82, §11; 96 Acts, ch 1183, §5; 2000 Acts, ch 1112, §51; 2004 Acts, ch 1090, §33; 2009 Acts, ch 133, §217; 2013 Acts, ch 130, §20, 35; 2015 Acts, ch 69, §10

Referred to in §331.381

222.60 Costs paid by county or state — diagnosis and evaluation.

1. All necessary and legal expenses for the cost of admission or for the treatment, training, instruction, care, habilitation, support, and transportation of persons with an intellectual disability, as provided for in the applicable regional service system management plan implemented pursuant to [section 331.393](#) in a state resource center, or in a special unit, or any public or private facility within or without the state, approved by the director of human services, shall be paid by either:

a. The regional administrator for the person's county of residence.

b. The state when the person is a resident in another state or in a foreign country, or when the person's residence is unknown. The payment responsibility shall be deemed to be a state case.

2. a. Prior to the regional administrator for a county of residence approving the payment of expenses for a person under [this section](#), the regional administrator may require that the person be diagnosed to determine if the person has an intellectual disability or that the person be evaluated to determine the appropriate level of services required to meet the person's needs relating to an intellectual disability. The diagnosis and the evaluation may be performed concurrently and shall be performed by an individual or individuals approved by the regional administrator for the person's county who are qualified to perform the diagnosis or the evaluation. Following the initial approval for payment of expenses, the regional administrator may require that an evaluation be performed at reasonable time periods.

b. The cost of a regional administrator-required diagnosis and an evaluation is at the mental health and disability services region's expense. For a state case, the state may apply the diagnosis and evaluation provisions of [this subsection](#) at the state's expense.

c. A diagnosis or an evaluation under [this section](#) may be part of a diagnosis and assessment process implemented by the applicable regional administrator, provided that a diagnosis is performed only by an individual qualified as provided in [this section](#).

3. a. A diagnosis of an intellectual disability under [this section](#) shall be made only when the onset of the person's condition was prior to the age of eighteen years and shall be based on an assessment of the person's intellectual functioning and level of adaptive skills. The diagnosis shall be made by an individual who is a psychologist or psychiatrist who is professionally trained to administer the tests required to assess intellectual functioning and to evaluate a person's adaptive skills.

b. A diagnosis of an intellectual disability shall be made in accordance with the criteria provided in the diagnostic and statistical manual of mental disorders, published by the American psychiatric association, as provided in the definition of intellectual disability in [section 4.1](#).

[C39, §3477.3, 3477.4, 3477.7; C46, 50, 54, 58, 62, §223.14, 223.15, 223.18; C66, 71, 73, 75, 77, 79, 81, §222.60]

83 Acts, ch 96, §157, 159; 95 Acts, ch 82, §12; 95 Acts, ch 190, §1; 95 Acts, ch 206, §13; 2000 Acts, ch 1112, §51; 2004 Acts, ch 1090, §33; 2009 Acts, ch 41, §223; 2012 Acts, ch 1019, §53 – 55; 2012 Acts, ch 1120, §74, 75, 130; 2013 Acts, ch 130, §21, 35; 2015 Acts, ch 69, §11

Referred to in §222.1, 222.50, 222.65, 222.77, 222.78, 249A.12, 331.381

222.60A Cost of assessment.

Notwithstanding any provision of [this chapter](#) to the contrary, any amount attributable to any assessment pursuant to [section 249A.21](#) that would otherwise be the liability of any county shall be paid by the state. The department may transfer funds from the appropriation

for medical assistance to pay any amount attributable to any assessment pursuant to [section 249A.21](#) that is a liability of the state.

[2004 Acts, ch 1085, §3, 10, 11; 2016 Acts, ch 1139, §50](#)

Referred to in [§331.381](#)

222.61 Residency determined.

When a county receives an application on behalf of any person for admission to a resource center or a special unit, the application shall be forwarded to the regional administrator for the county to determine and certify that the residence of the person is in one of the following:

1. In the county in which the application is received.
2. In some other county of the state.
3. In another state or in a foreign country.
4. Unknown.

[C66, 71, 73, 75, 77, 79, 81, §222.61]

[97 Acts, ch 169, §3; 2000 Acts, ch 1112, §51; 2004 Acts, ch 1090, §33, 37; 2012 Acts, ch 1120, §76, 130; 2014 Acts, ch 1092, §156; 2015 Acts, ch 69, §12](#)

Referred to in [§331.381, 331.502](#)

222.62 Residency in another county.

When the regional administrator for the county determines that the residency of the person is other than in the county in which the application is received, the determination shall be certified to the superintendent of the resource center or the special unit where the person is a patient. The certification shall be accompanied by a copy of the evidence supporting the determination. If the person is not eligible for the medical assistance program, the superintendent shall charge the expenses already incurred and unadjusted to the mental health and disability services region for the county of the person's residency.

[C66, 71, 73, 75, 77, 79, 81, §222.62]

[97 Acts, ch 169, §4; 2000 Acts, ch 1112, §51; 2004 Acts, ch 1090, §33, 38; 2012 Acts, ch 1120, §77, 130; 2015 Acts, ch 69, §13](#)

Referred to in [§331.381, 331.502](#)

222.63 Finding of residency — objection.

A certification through the regional administrator for a county that a person's residency is in another county shall be sent to the regional administrator for the county of residence. The certification shall be accompanied by a copy of the evidence supporting the determination. The regional administrator for the county of residence shall submit the certification to the regional administrator for the county and it shall be conclusively presumed that the patient has residency in that county unless the regional administrator for that county disputes the determination of residency as provided in [section 331.394](#).

[C66, 71, 73, 75, 77, 79, 81, §222.63]

[2004 Acts, ch 1090, §33, 39; 2012 Acts, ch 1120, §78, 130; 2015 Acts, ch 69, §14](#)

Referred to in [§331.381, 331.502](#)

222.64 Foreign state or country or unknown residency.

If the residency of the person is determined by a regional administrator on behalf of a county or by the state to be in a foreign state or country or is determined to be unknown, the regional administrator or the state shall certify the determination. The certification shall be accompanied by a copy of the evidence supporting the determination. The care of the person shall be as arranged by the regional administrator or the state. Application for admission may be made pending investigation by the administrator.

[C66, 71, 73, 75, 77, 79, 81, §222.64]

[97 Acts, ch 169, §5; 2004 Acts, ch 1090, §33, 40; 2012 Acts, ch 1120, §79, 130; 2013 Acts, ch 130, §23, 35; 2014 Acts, ch 1092, §157; 2015 Acts, ch 69, §15](#)

Referred to in [§331.381, 331.502](#)

222.65 Investigation.

If an application is made for placement of a person in a state resource center or special unit, the department's administrator shall immediately investigate the residency of the person and proceed as follows:

1. If the administrator concurs with a certified determination as to residency of the person so that the person is deemed a state case under [section 222.60](#), the administrator shall cause the person either to be transferred to a resource center or a special unit or to be transferred to the place of foreign residency.

2. If the administrator disputes a certified determination of residency, the administrator shall order the person transferred to a state resource center or a special unit until the dispute is resolved.

3. If the administrator disputes a certified determination of residency, the administrator shall utilize the procedure provided in [section 331.394](#) to resolve the dispute. A determination of the person's residency status made pursuant to [section 331.394](#) is conclusive.

[C66, 71, 73, 75, 77, 79, 81, §222.65]

[2000 Acts, ch 1112, §51; 2004 Acts, ch 1090, §41; 2012 Acts, ch 1120, §80, 130](#)

Referred to in [§331.381, 331.502](#)

222.66 Transfers — state cases — expenses.

1. The transfer to a resource center or a special unit or to the place of residency of a person with an intellectual disability who has no residence in this state or whose residency is unknown, shall be made in accordance with such directions as shall be prescribed by the administrator and when practicable by employees of the state resource center or the special unit. The actual and necessary expenses of such transfers shall be paid by the department on itemized vouchers sworn to by the claimants and approved by the administrator and the approved amount is appropriated to the department from any funds in the state treasury not otherwise appropriated.

2. The case of a person with an intellectual disability who is determined to have no residence in this state or whose residence is unknown shall be considered a state case.

[C66, 71, 73, 75, 77, 79, 81, §222.66]

[96 Acts, ch 1129, §113; 2000 Acts, ch 1112, §51; 2012 Acts, ch 1019, §56; 2012 Acts, ch 1120, §81, 130](#)

Referred to in [§331.381, 331.502](#)

222.67 Charge on finding of residency.

If a person has been received into a resource center or a special unit as a patient whose residency is unknown and the administrator determines that the residency of the patient was at the time of admission in a county of this state, the administrator shall certify the determination and charge all legal costs and expenses pertaining to the admission and support of the patient to the county of residence. The certification shall be sent to the county of residence. The certification shall be accompanied by a copy of the evidence supporting the determination. If the person's residency status has been determined in accordance with [section 331.394](#), the legal costs and expenses shall be charged to the county or as a state case in accordance with that determination. The costs and expenses shall be collected as provided by law in other cases.

[C66, 71, 73, 75, 77, 79, 81, §222.67]

[2000 Acts, ch 1112, §51; 2004 Acts, ch 1090, §42; 2012 Acts, ch 1120, §82, 130; 2013 Acts, ch 130, §24, 35](#)

Referred to in [§331.381](#)

222.68 Costs paid in first instance.

All necessary and legal expenses for the cost of admission of a person to a resource center or a special unit when the person's residency is found to be in another county of this state shall in the first instance be paid by the county from which the person was admitted. The county of residence shall reimburse the county which pays for all such expenses. If a county fails to make such reimbursement within forty-five days following submission of a properly

itemized bill to the county of residence, a penalty of not greater than one percent per month on and after forty-five days from submission of the bill may be added to the amount due.

[C24, 27, 31, 35, 39, §3451; C46, 50, 54, 58, 62, §222.41; C66, 71, 73, 75, 77, 79, 81, §222.68] 98 Acts, ch 1218, §68; 2000 Acts, ch 1112, §51; 2012 Acts, ch 1120, §83, 130; 2013 Acts, ch 130, §25, 35

Referred to in §331.381

222.69 Payment by state.

The amount necessary to pay the necessary and legal expenses of admission of a person to a resource center or a special unit when the person's residence is outside this state or is unknown is appropriated to the department from any money in the state treasury not otherwise appropriated. Such payments shall be made by the department on itemized vouchers executed by the auditor of the county from which the expenses have been paid and approved by the administrator.

[C66, 71, 73, 75, 77, 79, 81, §222.69]

2000 Acts, ch 1112, §51; 2012 Acts, ch 1120, §84, 130; 2013 Acts, ch 130, §26, 35

Referred to in §331.381, 331.502

222.70 Residency disputes.

If a dispute arises between counties or between the department and a county as to the residency of a person admitted to a resource center, a special unit, or a community-based service, the dispute shall be resolved as provided in [section 331.394](#).

[C66, 71, 73, 75, 77, 79, 81, §222.70]

94 Acts, ch 1170, §1; 2000 Acts, ch 1112, §51; 2004 Acts, ch 1090, §43; 2012 Acts, ch 1120, §85, 130; 2013 Acts, ch 130, §27, 35

Referred to in §331.381

222.71 and 222.72 Repealed by 2004 Acts, ch 1090, §55.

222.73 Billing of patient charges — computation of actual costs — cost settlement.

1. The superintendent of each resource center and special unit shall compute by February 1 the average daily patient charge and outpatient treatment charges for which each county will be billed for services provided to patients chargeable to the county during the fiscal year beginning the following July 1. The department shall certify the amount of the charges and notify the counties of the billing charges.

a. The superintendent shall compute the average daily patient charge for a resource center or special unit for services provided in the following fiscal year, in accordance with generally accepted accounting procedures, by totaling the expenditures of the resource center or special unit for the immediately preceding calendar year, by adjusting the expenditures by a percentage not to exceed the percentage increase in the consumer price index for all urban consumers for the immediately preceding calendar year, and by dividing the adjusted expenditures by the total inpatient days of service provided during the immediately preceding calendar year.

b. The department shall compute the outpatient treatment charges, in accordance with generally accepted accounting procedures, on the basis of the actual cost of the outpatient treatment provided during the immediately preceding calendar year.

2. a. The superintendent shall certify to the department the billings to each county for services provided to patients chargeable to the county during the preceding calendar quarter. The county billings shall be based on the average daily patient charge and outpatient treatment charges computed pursuant to [subsection 1](#), and the number of inpatient days and outpatient treatment service units chargeable to the county. The billings to a county of residence are subject to adjustment for all of the following circumstances:

(1) The county billing for a patient shall be reduced by the amount received for the patient's care from a source other than state appropriated funds.

(2) If more than twenty percent of the cost of a patient's care is initially paid from a source other than state appropriated funds, the amount paid shall be subtracted from the average

per-patient-per-day cost of that patient's care and the patient's county shall be billed for the full balance of the cost so computed.

(3) The county of a patient who is eligible for reimbursement under the medical assistance program shall be responsible for the costs which are not reimbursed by the medical assistance program, regardless of the level of care provided to the patient.

(4) A county shall be responsible for eighty percent of the cost of care of a patient who is not eligible for reimbursement under the medical assistance program.

(5) The billings for counties shall be credited with one hundred percent of the client participation for patients eligible for medical assistance in the calculation of the per diem rate for patients.

(6) A mental health and disability services region shall not be billed for the cost of a patient unless the patient's admission is authorized through the applicable regional administrator. The state resource center and the regional administrator shall work together to locate appropriate alternative placements and services and to educate patients and the family members of patients regarding such alternatives.

b. The per diem costs billed to each mental health and disability services region shall not exceed the per diem costs billed to the region in the fiscal year beginning July 1, 2016.

3. The superintendent shall compute in January the actual per-patient-per-day cost for each resource center or special unit for the immediately preceding calendar year, in accordance with generally accepted accounting procedures, by totaling the actual expenditures of the resource center or special unit for the calendar year and by dividing the total actual expenditures by the total inpatient days of service provided during the calendar year.

4. The department shall certify to the counties by February 1 the actual per-patient-per-day costs, as computed pursuant to [subsection 3](#), and the actual costs owed by each county for the immediately preceding calendar year for patients chargeable to the county. If the actual costs owed by the county are greater than the charges billed to the county pursuant to [subsection 2](#), the department shall bill the county for the difference with the billing for the quarter ending June 30. If the actual costs owed by the county are less than the charges billed to the county pursuant to [subsection 2](#), the department shall credit the county for the difference starting with the billing for the quarter ending June 30.

5. A superintendent of a resource center or special unit may request that the director of human services enter into a contract with a person for the resource center or special unit to provide consultation or treatment services or for fulfilling other purposes which are consistent with the purposes stated in [section 222.1](#). The contract provisions shall include charges which reflect the actual cost of providing the services. Any income from a contract authorized under [this subsection](#) may be retained by the resource center or special unit to defray the costs of providing the services or fulfilling the other purposes. Except for a contract voluntarily entered into by a county under [this subsection](#), the costs or income associated with a contract authorized under [this subsection](#) shall not be considered in computing charges and per diem costs in accordance with the provisions of [subsections 1 through 4](#).

[SS15, §2727-a96; C24, 27, 31, 35, 39, §3469; C46, 50, 54, 58, 62, §223.5; C66, 71, 73, 75, 77, 79, 81, §222.73]

86 Acts, ch 1169, §1; 88 Acts, ch 1249, §6; 88 Acts, ch 1276, §38; 95 Acts, ch 82, §4; 96 Acts, ch 1183, §6 – 8; 98 Acts, ch 1155, §9; 2000 Acts, ch 1112, §51; 2001 Acts, ch 155, §15 – 17; 2004 Acts, ch 1090, §33; 2009 Acts, ch 41, §263; 2012 Acts, ch 1120, §86, 130; 2015 Acts, ch 69, §16, 17; 2017 Acts, ch 109, §1, 20, 21

Referred to in §222.74, 331.381

2017 amendment to subsection 2, paragraph b, takes effect May 5, 2017, and applies to fiscal years beginning on or after July 1, 2017; 2017 Acts, ch 109, §20, 21

Subsection 2, paragraph b amended

222.74 Duplicate to county.

When certifying to the department amounts to be charged against each county as provided in [section 222.73](#), the superintendent shall send to the county auditor of each county against which the superintendent has so certified any amount, a duplicate of the certification statement. The county auditor upon receipt of the duplicate certification statement shall enter

it to the credit of the state in the ledger of state accounts, and shall immediately issue a notice to the county treasurer authorizing the treasurer to transfer the amount from the county fund to the general state revenue. The county treasurer shall file the notice as authority for making the transfer and shall include the amount transferred in the next remittance of state taxes to the treasurer of state, designating the fund to which the amount belongs.

[C66, 71, 73, 75, 77, 79, 81, §222.74]

[83 Acts, ch 123, §82, 209; 2001 Acts, ch 155, §18](#)

Referred to in [§222.75, 331.381, 331.502](#)

222.75 Delinquent payments — penalty.

If a county fails to pay a billed charge within forty-five days from the date the county auditor received the certification statement from the superintendent pursuant to [section 222.74](#), the department may charge the delinquent county a penalty of not greater than one percent per month on and after forty-five days from the date the county auditor received the certification statement until paid.

[C66, 71, 73, 75, 77, 79, 81, §222.75]

[98 Acts, ch 1218, §69; 2001 Acts, ch 155, §19](#)

Referred to in [§331.381](#)

222.76 Reserved.

222.77 Patients on leave.

The cost of support of patients placed on convalescent leave or removed as a habilitation measure from a resource center, or a special unit, except when living in the home of a person legally bound for the support of the patient, shall be paid by the county of residence or the state as provided in [section 222.60](#).

[C66, 71, 73, 75, 77, 79, 81, §81, §222.77; [81 Acts, ch 117, §1027](#)]

[83 Acts, ch 123, §83, 209; 2000 Acts, ch 1112, §51; 2012 Acts, ch 1120, §87, 130](#)

Referred to in [§222.78, 331.381](#)

222.78 Parents and others liable for support.

1. The father and mother of any patient admitted to a resource center or to a special unit, as either an inpatient or an outpatient, and any person, firm, or corporation bound by contract made for support of the patient are liable for the support of the patient. The patient and those legally bound for the support of the patient shall be liable to the county or state, as applicable, for all sums advanced in accordance with the provisions of [sections 222.60](#) and [222.77](#).

2. The liability of any person, other than the patient, who is legally bound for the support of a patient who is under eighteen years of age in a resource center or a special unit shall not exceed the average minimum cost of the care of a normally intelligent minor without a disability of the same age and sex as the minor patient. The administrator shall establish the scale for this purpose but the scale shall not exceed the standards for personal allowances established by the state division under the family investment program. The father or mother shall incur liability only during any period when the father or mother either individually or jointly receive a net income from whatever source, commensurate with that upon which they would be liable to make an income tax payment to this state. The father or mother of a patient shall not be liable for the support of the patient upon the patient attaining eighteen years of age. Nothing in [this section](#) shall be construed to prevent a relative or other person from voluntarily paying the full actual cost as established by the administrator for caring for the patient with an intellectual disability.

[C39, [§3477.5](#); C46, 50, 54, 58, 62, §223.16, 223.20; C66, 71, 73, 75, 77, 79, 81, §222.78]

[93 Acts, ch 97, §27; 98 Acts, ch 1218, §70; 2000 Acts, ch 1112, §51; 2012 Acts, ch 1019, §57; 2012 Acts, ch 1120, §88, 130; 2013 Acts, ch 130, §28, 35](#)

Referred to in [§218.78, 222.13, 222.79, 222.80, 222.81, 222.82, 226.8, 234.39, 331.381](#)

222.79 Certification statement presumed correct.

In actions to enforce the liability imposed by [section 222.78](#), the superintendent or the county of residence, as applicable, shall submit a certification statement stating the sums charged, and the certification statement shall be considered presumptively correct.

[C66, 71, 73, 75, 77, 79, 81, §222.79]

[2001 Acts, ch 155, §20](#); [2012 Acts, ch 1120, §89, 130](#)

Referred to in [§331.381](#)

222.80 Liability to county or state.

A person admitted to a county institution or home or admitted at county or state expense to a private hospital, sanitarium, or other facility for treatment, training, instruction, care, habilitation, and support as a patient with an intellectual disability shall be liable to the county or state, as applicable, for the reasonable cost of the support as provided in [section 222.78](#).

[C66, 71, 73, 75, 77, 79, 81, §222.80]

[96 Acts, ch 1129, §50](#); [2012 Acts, ch 1019, §58](#); [2012 Acts, ch 1120, §90, 130](#); [2013 Acts, ch 130, §29, 35](#)

Referred to in [§331.381](#)

222.81 Claim against estate.

The total amount of liability provided in [section 222.78](#) shall be allowed as a claim of the sixth class against the estate of the person or against the estate of the father or mother of such person.

[C66, 71, 73, 75, 77, 79, 81, §222.81]

Referred to in [§331.381](#)

222.82 Collection of liabilities and claims.

If liabilities and claims exist as provided in [section 222.78](#) or other provision of [this chapter](#), the county of residence or the state, as applicable, may proceed as provided in [this section](#). If the liabilities and claims are owed to a county of residence, the county's board of supervisors may direct the county attorney to proceed with the collection of the liabilities and claims as a part of the duties of the county attorney's office when the board of supervisors deems such action advisable. If the liabilities and claims are owed to the state, the state shall proceed with the collection. The board of supervisors or the state, as applicable, may compromise any and all liabilities to the county or state arising under [this chapter](#) when such compromise is deemed to be in the best interests of the county or state. Any collections and liens shall be limited in conformance to [section 614.1, subsection 4](#).

[C39, [§3477.6](#); C46, 50, 54, 58, 62, §223.17; C66, 71, 73, 75, 77, 79, 81, §222.82]

[2012 Acts, ch 1120, §91, 130](#)

Referred to in [§331.381, 331.756\(43\)](#)

222.83 Nonresident patients.

The estates of all nonresident patients who are provided treatment, training, instruction, care, habilitation, and support in or by a resource center or a special unit, and all persons legally bound for the support of such persons, shall be liable to the state for the reasonable value of such services. The certificate of the superintendent of the resource center or special unit in which any nonresident is or has been a patient, showing the amounts drawn from the state treasury or due therefrom as provided by law on account of such nonresident patient, shall be presumptive evidence of the reasonable value of such services furnished such patient by the resource center or special unit.

[C66, 71, 73, 75, 77, 79, 81, §222.83]

[2000 Acts, ch 1112, §51](#)

222.84 Patients' personal deposit fund.

There is hereby established at each resource center and special unit a fund which shall be known as the "patients' personal deposit fund"; provided that in the case of a special unit, the director may direct that the patients' personal deposit fund be maintained and administered

as a part of the fund established, pursuant to [sections 226.43 to 226.46](#), by the mental health institute where the special unit is located.

[C66, 71, 73, 75, 77, 79, 81, §222.84]

[2000 Acts, ch 1112, §51](#)

222.85 Deposit of moneys — exception to guardians.

Any funds coming into the possession of the superintendent or any employee of a resource center or special unit belonging to any patient in that institution shall be deposited in the name of the patient in the patients' personal deposit fund, except that if a guardian of the property has been appointed for the person, the guardian shall have the right to demand and receive such funds. Funds belonging to a patient deposited in the patients' personal deposit fund may be used for the purchase of personal incidentals, desires, and comforts for the patient.

Money paid to a resource center from any source other than state appropriated funds and intended to pay all or a portion of the cost of care of a patient, which cost would otherwise be paid from state or county funds or from the patient's own funds, shall not be deemed money belonging to the patient for the purposes of [this section](#).

[C66, 71, 73, 75, 77, 79, 81, §222.85]

[2000 Acts, ch 1112, §51](#)

222.86 Payment for care from fund.

If a patient is not receiving medical assistance under [chapter 249A](#) and the amount in the account of any patient in the patients' personal deposit fund exceeds two hundred dollars, the business manager of the resource center or special unit may apply any amount of the excess to reimburse the county of residence or the state for liability incurred by the county or the state for the payment of care, support, and maintenance of the patient, when billed by the county or state, as applicable.

[C66, 71, 73, 75, 77, 79, 81, S81, §222.86; [81 Acts, ch 11, §15](#)]

[2000 Acts, ch 1112, §51](#); [2012 Acts, ch 1120, §92, 130](#)

222.87 Deposit in bank.

The business manager shall deposit the patients' personal deposit fund in a commercial account of a bank of reputable standing. When deposits in the commercial account exceed average monthly withdrawals, the business manager may deposit the excess at interest. The savings account shall be in the name of the patients' personal deposit fund and interest paid thereon may be used for recreational purposes for the patients at the resource center or special unit.

[C66, 71, 73, 75, 77, 79, 81, §222.87]

[2000 Acts, ch 1112, §51](#)

222.88 Special intellectual disability unit.

The director of human services may organize and establish a special intellectual disability unit at an existing institution which may provide:

1. Psychiatric and related services to children with an intellectual disability and adults who are also emotionally disturbed or otherwise mentally ill.
2. Specific programs to meet the needs of such other special categories of persons with an intellectual disability as may be designated by the director.
3. Appropriate diagnostic evaluation services.

[C71, 73, 75, 77, 79, 81, §222.88]

[83 Acts, ch 96, §157, 159](#); [96 Acts, ch 1129, §51, 113](#); [2012 Acts, ch 1019, §59](#)

Referred to in [§222.1](#), [222.2](#), [222.13](#), [222.91](#)

222.89 Location — staff and personnel.

The director may:

1. Designate a portion of the physical facilities of one of the mental health institutes to be occupied by the offices and facilities of the special unit.
2. Determine the extent to which the special unit may effectively utilize services of the

mental health institute staff, and what staff personnel should be employed for and assigned specifically to the special unit.

[C71, 73, 75, 77, 79, 81, §222.89]

Referred to in [§222.1](#), [222.2](#)

222.90 Superintendent.

The director shall appoint a qualified superintendent of the special unit. The superintendent shall employ all staff personnel to be assigned specifically to the special unit, and shall have the same duties with respect to the special unit as are imposed upon superintendents of resource centers by [section 222.4](#).

[C71, 73, 75, 77, 79, 81, §222.90]

[2000 Acts, ch 1112, §51](#)

Referred to in [§222.1](#), [222.2](#)

222.91 Direct referral to special unit.

In addition to any other manner of referral or admission to the special unit provided for by [this chapter](#), persons may be referred directly to the special unit by courts, law enforcement agencies, or state penal or correctional institutions for services under [section 222.88, subsection 2](#), but persons so referred shall not be admitted unless a preadmission diagnostic evaluation indicates that the person would benefit from such services, and the admission of the person to the special unit would not cause the special unit's patient load to exceed its capacity.

[C71, 73, 75, 77, 79, 81, §222.91]

[2013 Acts, ch 130, §30, 35](#)

Referred to in [§222.1](#), [222.2](#)

222.92 Net general fund appropriation — state resource centers.

1. The department shall operate the state resource centers on the basis of net appropriations from the general fund of the state. The appropriation amounts shall be the net amounts of state moneys projected to be needed for the state resource centers for the fiscal year of the appropriations. The purpose of utilizing net appropriations is to encourage the state resource centers to operate with increased self-sufficiency, to improve quality and efficiency, and to support collaborative efforts between the state resource centers and counties and other providers of funding for the services available from the state resource centers. The state resource centers shall not be operated under the net appropriations in a manner that results in a cost increase to the state or in cost shifting between the state, the medical assistance program, counties, or other sources of funding for the state resource centers.

2. The net appropriation made for a state resource center may be used throughout the fiscal year in the manner necessary for purposes of cash flow management, and for purposes of cash flow management, a state resource center may temporarily draw more than the amount appropriated, provided the amount appropriated is not exceeded at the close of the fiscal year.

3. Subject to the approval of the department, except for revenues segregated as provided in [section 249A.11](#), revenues received that are attributed to a state resource center for a fiscal year shall be credited to the state resource center's account and shall be considered repayment receipts as defined in [section 8.2](#), including but not limited to all of the following:

a. Moneys received by the state from billings to counties and regional administrators for the counties.

b. The federal share of medical assistance program revenue received under [chapter 249A](#).

c. Federal Medicare program payments.

d. Moneys received from client financial participation.

e. Other revenues generated from current, new, or expanded services that the state resource center is authorized to provide.

4. For purposes of allocating moneys to the state resource centers from the salary adjustment fund created in [section 8.43](#), the state resource centers shall be considered to be funded entirely with state moneys.

5. Notwithstanding [section 8.33](#), up to five hundred thousand dollars of a state resource center's revenue that remains unencumbered or unobligated at the close of the fiscal year shall not revert but shall remain available for expenditure for purposes of the state resource center until the close of the succeeding fiscal year.

[2005 Acts, ch 175, §94](#); [2012 Acts, ch 1120, §93, 130](#); [2015 Acts, ch 69, §18](#)