

141A.2 Lead agency.

1. The department is designated as the lead agency in the coordination and implementation of the Iowa comprehensive HIV plan.

2. The department shall adopt rules pursuant to [chapter 17A](#) to implement and enforce [this chapter](#). The rules may include procedures for taking appropriate action with regard to health facilities or health care providers which violate [this chapter](#) or the rules adopted pursuant to [this chapter](#).

3. The department shall adopt rules pursuant to [chapter 17A](#) which require that if a health care provider attending a person prior to the person's death determines that the person suffered from or was suspected of suffering from a contagious or infectious disease, the health care provider shall place with the remains written notification of the condition for the information of any person handling the body of the deceased person subsequent to the person's death. For purposes of [this subsection](#), "*contagious or infectious disease*" means hepatitis in any form, meningococcal disease, tuberculosis, and any other disease including AIDS or HIV infection, determined to be life-threatening to a person exposed to the disease as established by rules adopted by the department based upon a determination by the state epidemiologist and in accordance with guidelines of the centers for disease control and prevention of the United States department of health and human services.

4. The department shall provide consultation services to all care providers, including paramedics, ambulance personnel, physicians, nurses, hospital personnel, first responders, peace officers, and fire fighters, who provide care services to a person, and to all persons who attend dead bodies regarding standard precautions to prevent the transmission of contagious and infectious diseases.

5. The department shall coordinate efforts with local health officers to investigate sources of HIV infection and use every appropriate means to prevent the spread of HIV.

6. The department may conduct blinded epidemiological studies and nonblinded epidemiological studies to determine the incidence and prevalence of HIV infection. Initiation of any new blinded epidemiological studies or nonblinded epidemiological studies shall be contingent upon the receipt of funding sufficient to cover all the costs associated with the studies. The informed consent, reporting, and counseling requirements of [this chapter](#) shall not apply to blinded epidemiological studies.

[99 Acts, ch 181, §6; 2007 Acts, ch 70, §3; 2011 Acts, ch 63, §24; 2023 Acts, ch 19, §226; 2024 Acts, ch 1043, §61; 2024 Acts, ch 1170, §402](#)

Referred to in [§356.48](#)