

CHAPTER 225A

DEPARTMENT OF HEALTH AND HUMAN SERVICES — BEHAVIORAL HEALTH SERVICE SYSTEM

Referred to in §256.25

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225A.1 Definitions.

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

1. “Administrative services organization” means an entity designated by the department pursuant to [section 225A.4](#), to develop and perform planning and administrative services in accordance with a district behavioral health service system plan.

2. “Behavioral health condition” means a substantial limitation in major life activities due to a mental, behavioral, or addictive disorder or condition diagnosed in accordance with the criteria provided in the most current edition of the diagnostic and statistical manual of mental disorders, published by the American psychiatric association.

3. “Behavioral health district” or “district” means a geographic, multicounty, sub-state area as designated by the department under [section 225A.4](#).

4. “Behavioral health provider” or “provider” means an individual, firm, corporation, association, or institution that, pursuant to [this chapter](#), is providing or has been approved by the department to provide services to an individual with a behavioral health condition.

5. “Behavioral health service system” means the behavioral health service system established in [section 225A.3](#).

6. “Caregiver” means an adult family member, or other individual, who is providing care to a person outside of a formal program.

7. “Community mental health center” means an entity designated by the department to address the mental health needs of one or more counties.

8. “Department” means the department of health and human services.

9. “Director” means the director of the department of health and human services.

10. “District behavioral health advisory council” or “advisory council” means a council established by an administrative services organization under [section 225A.5](#), to identify opportunities, address challenges, and advise the administrative services organization in accordance with [section 225A.5](#).

11. “District behavioral health service system plan” or “district behavioral health plan” means a plan developed by an administrative services organization and approved by the department to outline the services intended to be provided within the administrative services organization’s behavioral health district.

12. “Indicated prevention” means prevention activities designed to prevent the onset of substance use disorders in individuals who do not meet the medical criteria for addiction, but who show early signs of developing a substance use disorder in the future.

13. “Selective prevention” means prevention activities designed to target subsets of the total population who are considered at-risk for a substance use disorder by virtue of their membership in a particular segment of the population. Selective prevention targets the entire subgroup, regardless of the degree of risk of any individual within the group.

14. “State behavioral health service system plan” or “state behavioral health plan” means the plan developed by the department that describes the key components of the state’s behavioral health service system.

15. “*Universal prevention*” means prevention activities designed to address an entire population class for the purpose of preventing or delaying the use of alcohol, tobacco, and other drugs. Population classes include but are not limited to the national population, local populations, community populations, school populations, and neighborhood populations.

2024 Acts, ch 1161, §1, 11

Referred to in §12.51, 97B.1A, 222.2, 225.1, 226.1, 229.1, 230.1, 256.25, 321J.25, 331.910

Section effective July 1, 2025; 2024 Acts, ch 1161, §11

NEW section

225A.2 State mental health authority — state agency for substance abuse.

1. The department is designated as the state mental health authority as defined in 42 U.S.C. §201(m) for the purpose of directing benefits from the federal community mental health services block grant, 42 U.S.C. §300x et seq., and the state authority designated for the purpose of directing benefits from the federal substance abuse prevention and treatment block grant, 42 U.S.C. §300x-21 et seq. This designation does not preclude the state board of regents from authorizing or directing any institution under the board of regents’ jurisdiction to carry out educational, prevention, and research activities in the areas of mental health and intellectual disability.

2. The department is designated as the single state agency for substance abuse for the purposes of 42 U.S.C. §1396a et seq.

3. For the purposes of effectuating the department’s roles designated in [this section](#), the department shall have the following powers and the authority to take all of the following actions:

a. Plan, establish, and maintain prevention, education, early intervention, treatment, recovery support, and crisis services programs as necessary or desirable for the behavioral health service system established in [section 225A.3](#).

b. Develop and submit a state plan as required by, and in accordance with, 42 U.S.C. §300x-1.

c. Review and approve district behavioral health service system plans developed in accordance with the state behavioral health service system plan.

d. Perform all necessary acts to cooperate with any state agency, political subdivision, or federal government agency to apply for grants.

e. Solicit and accept for use any gift of money by will or otherwise, and any grant of money or services from the federal government, the state, or any political subdivision thereof, or any private source.

f. Collect and maintain records, engage in studies and analyses, and gather relevant statistics.

g. Take any other actions as necessary to execute the duties granted to the department in [this chapter](#), or that are otherwise required to maintain compliance with federal requirements related to the department’s roles as designated in [this section](#).

2024 Acts, ch 1161, §2, 11

Section effective July 1, 2025; 2024 Acts, ch 1161, §11

NEW section

225A.3 Behavioral health service system — department powers and duties.

1. a. A behavioral health service system is established under the control of the department for the purposes of implementing a statewide system of prevention, education, early intervention, treatment, recovery support, and crisis services related to mental health and addictive disorders, including but not limited to alcohol use, substance use, tobacco use, and problem gambling.

b. The behavioral health service system shall support equitable statewide access to all services offered through the behavioral health service system and offer specialized services with a focus on at-risk populations including but not limited to children, youth, young adults, individuals with disabilities, pregnant and parenting women, older adults, and people with limited access to financial resources.

c. Services offered through the behavioral health service system shall, at a minimum, include all of the following:

(1) Prevention intervention services and education programs designed to reduce and mitigate behavioral health conditions and future behavioral health conditions. Prevention intervention programs shall incorporate indicated prevention, selective prevention, and universal prevention activities.

(2) Evidence-based and evidence-informed early intervention and treatment services.

(3) Comprehensive recovery support services with a focus on community-based services that avoid, divert, or offset the need for long-term inpatient services, law enforcement involvement, or incarceration.

(4) Crisis services with a focus on reducing the escalation of crisis situations, relieving the immediate distress of individuals experiencing a crisis situation, and reducing the risk that individuals in a crisis situation harm themselves.

2. To the extent funding is available, the department shall perform all of the following duties to develop and administer the behavioral health service system:

a. (1) Develop a state behavioral health service system plan that accomplishes all of the following:

(a) Identifies the goals, objectives, and targeted outcomes for the behavioral health service system.

(b) Identifies the strategies to meet system objectives and ensure equitable access statewide to prevention, education, early intervention, treatment, recovery support, and crisis services.

(c) Is consistent with the state health improvement plan developed under [section 217.17](#).

(d) Is consistent with the department's agency strategic plan adopted pursuant to [section 8E.206](#).*

(2) The department shall do all of the following when developing the state behavioral health service system plan:

(a) Collaborate with stakeholders including but not limited to county supervisors and other local elected officials, experienced behavioral health providers, and organizations that represent populations, including but not limited to children, served by the behavioral health service system.

(b) Publish the proposed state behavioral health service system plan on the department's internet site and allow the public to review and comment on the proposed state behavioral health system plan prior to the adoption of the proposed state behavioral health plan.

b. Administer and distribute state appropriations, federal aid, and grants that have been deposited into the behavioral health fund established in [section 225A.7](#).

c. Oversee, provide technical assistance to, and monitor administrative services organizations to ensure the administrative services organizations' compliance with district behavioral health plans.

d. Collaborate with the department of inspections, appeals, and licensing on the accreditation, certification, and licensure of behavioral health providers including but not limited to the approval, denial, revocation, or suspension of a behavioral health provider's accreditation, certification, or licensure.

e. Develop and adopt minimum accreditation standards for the maintenance and operation of community mental health centers to ensure that each community mental health center, and each entity that provides services under contract with a community mental health center, furnishes high-quality mental health services to the community that the community mental health center serves in accordance with rules adopted by the department.

f. Designate community mental health centers.

g. Conduct formal accreditation reviews of community mental health centers based on minimum accreditation standards adopted by the department pursuant to paragraph "e".

h. Establish and maintain a data collection and management information system to identify, collect, and analyze service outcome and performance data to address the needs of patients, providers, the department, and programs operating within the behavioral health service system.

i. Collect, monitor, and utilize information including but not limited to behavioral health service system patient records and syndromic surveillance data to understand emerging needs, and to deploy information, resources, and technical assistance in response.

j. Collaborate with the department of revenue for enforcement of tobacco laws, regulations, and ordinances and engage in tobacco control activities.

k. Adopt rules pursuant to [chapter 17A](#) to administer [this chapter](#). Such rules shall include but not be limited to rules that provide for all of the following:

(1) Minimum access standards to ensure equitable access to services provided through the behavioral health service system including but not limited to when services are available, who is eligible for services, and where services are available.

(2) Methods to ensure each individual who is eligible for services receives an uninterrupted continuum of care for prevention, education, early intervention, treatment, recovery support, and crisis services.

(3) Standards for the implementation and maintenance of behavioral health programs and services offered by the behavioral health service system, and by each administrative services organization.

(4) Procedures for the management and oversight of behavioral health providers to ensure compliance with the terms of the behavioral health providers' contracts relating to the behavioral health service system, and with state and federal law and rules.

(5) Procedures for the suspension of an administrative services organization's services due to the administrative services organization's failure to comply with the terms and conditions of its contract with the department.

(6) Procedures for the reallocation of funds from an administrative services organization that is not in compliance with the terms of its contract with the department to an alternative administrative services organization or a behavioral health provider to provide for services the noncompliant administrative services organization failed to provide.

(7) Procedures for the termination of an administrative services organization's designation as an administrative services organization.

(8) Procedures for the collection, utilization, and maintenance of the data necessary to establish a central data repository in accordance with [section 225A.6](#).

(9) Any other requirements the department deems necessary to ensure that an administrative services organization fulfills the administrative services organization's duties as established in [this chapter](#), and as established in the administrative services organization's district behavioral health plan.

2024 Acts, ch 1161, §3, 11

Referred to in §217.37, 225A.1, 225A.2, 225A.9, 249N.8, 252.24, 347.16, 423.3, 602.8102(39)

*Section 8E.206 repealed by 2024 Acts, ch 1082, §14; corrective legislation is pending

Section effective July 1, 2025; 2024 Acts, ch 1161, §11

NEW section

225A.4 Behavioral health service system — districts and administrative services organizations.

1. a. The department shall divide the entirety of the state into designated behavioral health districts. Behavioral health prevention, education, early intervention, treatment, recovery support, and crisis services related to mental health and addictive disorders, including but not limited to alcohol use, substance use, tobacco use, and problem gambling, shall be made available through each behavioral health district in a manner consistent with directives each district receives from the department.

b. For the purpose of providing equitable access to all services provided through the behavioral health service system, the department shall consider all of the following when designating behavioral health districts:

(1) City and county lines.

(2) The maximum population size that behavioral health services available in an area are able to effectively serve.

(3) Areas of high need for behavioral health services.

(4) Patterns various populations exhibit when accessing or receiving behavioral health services.

c. Notwithstanding [chapter 17A](#), the manner in which the department designates behavioral health districts including but not limited to the determination of the boundaries for each district shall not be subject to judicial review.

2. a. The department shall designate an administrative services organization for each behavioral health district to oversee and organize each district and the behavioral health services associated with the district. The department shall issue requests for proposals for administrative services organization candidates.

b. At the department's discretion, the department may designate any of the following entities as an administrative services organization:

(1) An organization that coordinated administrative services or mental health and disability services for a mental health and disability services region formed on or before June 30, 2024.

(2) A public or private nonprofit agency located in a behavioral health district, or any separate organizational unit within the public or private nonprofit agency, that has the capabilities to engage in the planning or provision of a broad range of behavioral health prevention, education, early intervention, treatment, recovery support, and crisis services related to mental health and addictive disorders, including but not limited to alcohol use, substance use, tobacco use, and problem gambling, only as directed by the department.

c. The department shall consider all of the following factors in determining whether to designate an entity as an administrative services organization:

(1) Whether the entity has demonstrated the capacity to manage and utilize available resources in a manner required of an administrative services organization.

(2) Whether the entity has demonstrated the ability to ensure the delivery of behavioral health services within the district as required by the department by rule.

(3) Whether the entity has demonstrated the ability to fulfill the monitoring, oversight, and provider compliance responsibilities as required by the department by rule.

(4) Whether the entity has demonstrated the capacity to function as a subrecipient for the purposes of the federal community mental health services block grant, 42 U.S.C. §300x et seq., and the federal substance abuse prevention and treatment block grant, 42 U.S.C. §300x-21 et seq., and the ability to comply with all federal requirements applicable to subrecipients under the block grants.

3. a. Upon designation by the department, an administrative services organization shall be considered an instrumentality of the state and shall adhere to all state and federal mandates and prohibitions applicable to an instrumentality of the state.

b. An entity's designation as an administrative services organization shall continue until the designation is removed by the department, the administrative services organization withdraws, or a change in state or federal law necessitates the removal of the designation.

4. Each administrative services organization shall function as a subrecipient for the purposes of the federal community mental health services block grant, 42 U.S.C. §300x et seq., and the federal substance abuse prevention and treatment block grant, 42 U.S.C. §300x-21 et seq., and shall comply with all federal requirements applicable to subrecipients under the block grants.

5. Each administrative services organization shall perform all of the following duties:

a. Develop and administer a district behavioral health plan in accordance with the standards adopted by the department by rule.

b. Coordinate the administration of the district behavioral health plan with federal, state, and local resources in order to develop a comprehensive and coordinated local behavioral health service system.

c. Enter into contracts necessary to provide services under the district behavioral health plan.

d. Oversee, provide technical assistance to, and monitor the compliance of providers contracted by the administrative services organization to provide behavioral health services in accordance with the district behavioral health plan.

e. Establish a district behavioral health advisory council pursuant to [section 225A.5](#).

[2024 Acts, ch 1161, §4, 11](#)

Referred to in [§225A.1](#), [321J.25](#), [812.6](#)

Section effective July 1, 2025; 2024 Acts, ch 1161, §11

NEW section

225A.5 District behavioral health advisory councils.

1. Each administrative services organization shall establish a district behavioral health advisory council that shall do all of the following:

a. Identify opportunities and address challenges based on updates received from the administrative services organization regarding the implementation of the district behavioral health plan.

b. Advise the administrative services organization while the administrative services organization is developing behavioral health policies.

c. Advise the administrative services organization on how to best provide access to behavioral health prevention, education, early intervention, treatment, recovery support, and crisis services related to mental health and addictive disorders, including but not limited to alcohol use, substance use, tobacco use, and problem gambling, throughout the district as directed by the department.

2. An advisory council shall consist of ten members. Members shall be appointed by the administrative services organization subject to the following requirements:

a. Three members shall be local elected public officials currently holding office within the behavioral health district, or the public official's designated representative.

b. Three members shall be chosen in accordance with procedures established by the administrative services organization to ensure representation of the populations served within the behavioral health district. At least one member chosen under this paragraph shall represent child and adolescent persons.

c. Three members shall be chosen who have experience or education related to core behavioral health functions, essential behavioral health services, behavioral health prevention, behavioral health treatment, population-based behavioral health services, or community-based behavioral health initiatives.

d. One member shall be a law enforcement representative from within the behavioral health district.

3. An advisory council shall perform the duties required under [this section](#) regardless of whether any seat on the advisory council is vacant.

[2024 Acts, ch 1161, §5, 11](#)

Referred to in [§225A.1, 225A.4](#)

Section effective July 1, 2025; 2024 Acts, ch 1161, §11

NEW section

225A.6 Behavioral health service system — data collection and use.

1. The department shall take all of the following actions for data related to the behavioral health service system:

a. Collect and analyze the data, including but not limited to Medicaid and community services network data, as necessary to issue cost estimates for serving populations, providing treatment, making and receiving payments, conducting operations, and performing prevention and health promotion activities. In doing so, the department shall maintain compliance with applicable federal and state privacy laws to ensure the confidentiality and integrity of individually identifiable data. The department shall periodically assess the status of the department's compliance to ensure that data collected by and stored with the department is protected.

b. Establish and administer a central data repository for collecting and analyzing state, behavioral health district, and contracted behavioral health provider data.

c. Establish a record for each individual receiving publicly funded services from an administrative services organization. Each record shall include a unique client identifier for the purposes of identifying and tracking the individual's record.

d. Consult with administrative services organizations, behavioral health service providers, and other behavioral health service system stakeholders on an ongoing basis to implement and maintain the central data repository.

e. Engage with all entities that maintain information the department is required to collect pursuant to [this section](#) in order to integrate all data concerning individuals receiving services within the behavioral health service system.

f. Engage with all entities that maintain general population data relating to behavioral

health in order to develop action plans, create projections relating to a population's behavioral health needs, develop policies concerning behavioral health, and otherwise perform acts as necessary to enhance the state's overall behavioral health.

2. Administrative services organizations shall report all data required to be maintained in the central data repository to the department in a manner as established by the department by rule. For the purpose of making such data reports, an administrative services organization shall do one of the following:

a. Utilize a data system that integrates with the data systems used by the department.

b. Utilize a data system that has the capacity to securely exchange information with the department, other behavioral health districts, contractors, and other entities involved with the behavioral health service system who are authorized to access the central data repository.

3. Data and information maintained by and exchanged between an administrative services organization and the department shall be labeled consistently, share the same definitions, utilize the same common coding and nomenclature, and be in a form and format as required by the department by rule.

4. Administrative services organizations shall report to the department, in a manner specified by the department, information including but not limited to demographic information, expenditure data, and data concerning the behavioral health services and other support provided to individuals in the administrative service organization's district.

5. The department shall ensure that public and private agencies, organizations, and individuals that operate within the behavioral health service system, or that make formal requests for the release of data collected by the department, maintain uniform methods for keeping statistical information relating to behavioral health service system outcomes and performance.

6. The department shall develop and implement a communication plan that details how outcome and performance data will be shared with stakeholders including but not limited to the public, persons involved with the behavioral health service system, and the general assembly.

[2024 Acts, ch 1161, §6, 11](#)

Referred to in [§225A.3](#)

Section effective July 1, 2025; 2024 Acts, ch 1161, §11

NEW section

225A.7 Behavioral health fund.

1. For purposes of [this section](#):

a. "*Population*" means, as of July 1 of the fiscal year preceding the fiscal year in which the population figure is applied, the population shown by the latest preceding certified federal census or the latest applicable population estimate issued by the United States census bureau, whichever is most recent.

b. "*State growth factor*" for a fiscal year means an amount equal to the dollar amount used to calculate the appropriation under [this section](#) for the immediately preceding fiscal year multiplied by the percent increase, if any, in the amount of sales tax revenue deposited into the general fund of the state under [section 423.2A, subsection 1](#), paragraph "a", less the transfers required under [section 423.2A, subsection 2](#), between the fiscal year beginning three years prior to the applicable fiscal year and the fiscal year beginning two years prior to the applicable year, but not to exceed one and one-half percent.

2. A behavioral health fund is established in the state treasury under the control of the department. The fund shall consist of moneys deposited into the fund pursuant to [this section](#) and [section 426B.1](#), gifts of money or property accepted by the state or the department to support any services under [this chapter](#) or [chapter 231](#), and moneys otherwise appropriated by the general assembly. Moneys in the fund are appropriated to the department to implement and administer the behavioral health service system and related programs including but not limited to all of the following:

a. Distributions to administrative services organizations to provide services as outlined in the organizations' district behavioral health plan.

b. Distributions to providers of mental health services and addictive disorder services,

including but not limited to tobacco use services, substance use disorder services, and problem gambling services.

c. Funding of disability services pursuant to [chapter 231](#). This paragraph is repealed July 1, 2028.

3. For the fiscal year beginning July 1, 2025, there is transferred from the general fund of the state to the behavioral health fund an amount equal to forty-two dollars multiplied by the state's population for the fiscal year.

4. For the fiscal year beginning July 1, 2026, and each succeeding fiscal year, there is transferred from the general fund of the state to the behavioral health fund an amount equal to the state's population for the fiscal year multiplied by the sum of the dollar amount used to calculate the transfer from the general fund to the behavioral health fund for the immediately preceding fiscal year, plus the state growth factor for the fiscal year for which the transfer is being made.

5. For each fiscal year, an administrative services organization shall not spend on administrative costs an amount more than seven percent of the total amount distributed to the administrative services organization through [this section](#) and all other appropriations for the same fiscal year.

6. Moneys in the behavioral health fund may be used by the department for cash flow purposes, provided that any moneys so allocated are returned to the behavioral health fund by the end of each fiscal year.

7. Notwithstanding [section 12C.7, subsection 2](#), interest or earnings on moneys deposited in the behavioral health fund shall be credited to the behavioral health fund.

8. Notwithstanding [section 8.33](#), moneys appropriated in [this section](#) that remain unencumbered or unobligated at the close of the fiscal year shall not revert but shall remain available for expenditure for the purposes designated.

[2024 Acts, ch 1161, §7, 11](#)

Referred to in [§123.17](#), [225.24](#), [225A.3](#), [426B.1](#)

Section effective July 1, 2025; 2024 Acts, ch 1161, §11

NEW section

225A.8 Addictive disorders prevention — prohibitions.

1. For purposes of [this section](#), “entity” means a manufacturer, distributor, wholesaler, retailer, or distributing agent, or an agent of a manufacturer, distributor, wholesaler, retailer, or distributing agent as those terms are defined in [section 453A.1](#).

2. To promote comprehensive tobacco use prevention and control initiatives outlined in the state behavioral health service system plan, an entity shall not perform any of the following acts:

a. Give away cigarettes or tobacco products.

b. Provide free articles, products, commodities, gifts, or concessions in any exchange for the purchase of cigarettes or tobacco products.

3. The prohibitions in [this section](#) shall not apply to transactions between manufacturers, distributors, wholesalers, or retailers as those terms are defined in [section 453A.1](#).

[2024 Acts, ch 1161, §8, 11](#)

Section effective July 1, 2025; 2024 Acts, ch 1161, §11

NEW section

225A.9 Application for services — minors.

A minor who is twelve years of age or older shall have the legal capacity to act and give consent to the provision of tobacco cessation coaching services pursuant to a tobacco cessation telephone and internet-based program approved by the department through the behavioral health service system established in [section 225A.3](#). Consent shall not be subject to later disaffirmance by reason of such minority. The consent of another person, including but not limited to the consent of a spouse, parent, custodian, or guardian, shall not be necessary.

[2024 Acts, ch 1161, §9, 11](#)

Section effective July 1, 2025; 2024 Acts, ch 1161, §11

NEW section