

Senate File 2202

S-5061

1 Amend Senate File 2202 as follows:

2 1. By striking everything after the enacting clause and
3 inserting:

4 <Section 1. Section 135G.1, Code 2026, is amended by adding
5 the following new subsection:

6 NEW SUBSECTION. 3A. *"Health carrier"* means the same as
7 defined in section 514J.102.

8 Sec. 2. Section 135G.1, subsection 12, paragraph c, Code
9 2026, is amended by striking the paragraph.

10 Sec. 3. Section 135G.3, Code 2026, is amended to read as
11 follows:

12 **135G.3 Nature of care — seclusion room — admissions —**
13 **discharge.**

14 1. a. A subacute care facility shall utilize a team of
15 professionals to direct an organized program of diagnostic
16 services, subacute mental health services, social services,
17 and rehabilitative services to meet the needs of residents
18 in accordance with a treatment care plan developed for each
19 resident under the supervision of a mental health professional.

20 b. The goal of a treatment care plan is to transition
21 residents to a less restrictive environment, including a
22 home-based community setting. ~~Social and rehabilitative~~
23 ~~services shall also be provided under the direction of a mental~~
24 ~~health professional.~~

25 c. Within twenty-four hours of a resident's admission to
26 a subacute care facility, the subacute care facility shall
27 develop a written treatment care plan with the resident.

28 2. a. Prior authorization shall not be required for an
29 individual's admission to a subacute care facility or for
30 the first fifteen consecutive calendar days of a resident's
31 treatment.

32 b. Starting from a resident's first day of treatment, on or
33 after a resident's forty-fifth consecutive day of treatment,
34 a managed care organization may review the medical necessity
35 of the resident's treatment. After the initial review of a

SF 2202.3182 (1) 91

(amending this SF 2202 to CONFORM to HF 2543)

1 resident's treatment, a managed care organization may only
2 review the medical necessity of the resident's treatment a
3 maximum of one time within any consecutive thirty-calendar-day
4 period.

5 ~~2.~~ 3. The mental health professional providing supervision
6 of the subacute care facility's treatment care plans shall
7 evaluate the condition of each resident as medically necessary,
8 and shall be available to residents of the facility on an
9 on-call basis at all other times. Additional evaluation and
10 treatment may be provided by a mental health professional. The
11 subacute care facility may employ a seclusion room meeting the
12 conditions described in 42 C.F.R. §483.364(b) with approval
13 of a licensed psychiatrist, or by order of the resident's
14 physician, a physician assistant, or an advanced registered
15 nurse practitioner.

16 4. A managed care organization shall not require a resident
17 to be discharged from a subacute care facility until the mental
18 health professional providing supervision of the resident's
19 treatment care plan has determined that there are proper
20 supports in place prior to the resident's discharge to mitigate
21 the risk of self-harm by the resident, or harm to another
22 individual by the resident.

23 5. Pursuant to section 505.36, a health carrier shall
24 provide coverage for subacute mental health services provided
25 by a subacute care facility.

26 Sec. 4. NEW SECTION. **135H.9A Bed tracking system.**

27 The department of health and human services shall establish
28 an electronic system to track the availability of beds at each
29 psychiatric medical institution for children.

30 Sec. 5. NEW SECTION. **505.36 Health carriers — subacute**
31 **mental health care services.**

32 1. For purposes of this section:

33 a. "Health carrier" means the same as defined in section
34 514J.102.

35 b. "Subacute care facility" means the same as defined in

SF 2202.3182 (1) 91

(amending this SF 2202 to CONFORM to HF 2543)

1 section 135G.1.

2 *c.* "*Subacute mental health services*" means the same as
3 defined in section 135G.1.

4 2. A health carrier shall provide coverage for subacute
5 mental health services provided by a subacute care facility. A
6 health carrier that violates this section shall be subject to
7 penalties pursuant to section 505.7A.

8 Sec. 6. DEPARTMENTS OF HEALTH AND HUMAN SERVICES AND
9 INSPECTIONS, APPEALS, AND LICENSING — ADMINISTRATIVE RULE
10 REVIEW. The department of health and human services and
11 the department of inspections, appeals, and licensing shall
12 collaborate to review each department's administrative rules
13 adopted pursuant to section 135G.10 and eliminate any rule
14 the departments determine impedes any of the following goals
15 without providing an equal or greater benefit:

16 1. Establishment of new subacute mental health care
17 facilities and services.

18 2. Expansion of existing subacute mental health care
19 facilities and services.

20 3. Ease of access to subacute mental health care facilities
21 and services.

22 Sec. 7. DEPARTMENT OF INSPECTIONS, APPEALS, AND LICENSING
23 — SUBACUTE MENTAL HEALTH CARE FACILITIES — BED CAPACITY
24 — FACILITY AND EMPLOYEE REQUIREMENTS. The department of
25 inspections, appeals, and licensing shall adopt rules pursuant
26 to chapter 17A to do the following:

27 1. Increase the maximum number of beds a subacute care
28 facility may have without the subacute care facility being
29 defined as a state mental health institute.

30 2. Provide that requirements applicable to a subacute
31 mental health care facility, and subacute mental health
32 care facility employees, are less stringent than comparable
33 requirements that apply to a state mental health institute or a
34 state mental health institute's employees.

35 Sec. 8. EMERGENCY RULES. The department of health and

SF 2202.3182 (1) 91

(amending this SF 2202 to CONFORM to HF 2543)

1 human services and the department of inspections, appeals,
2 and licensing may adopt emergency rules under section 17A.4,
3 subsection 3, and section 17A.5, subsection 2, paragraph "b",
4 to implement the provisions of this Act and shall submit
5 such rules to the administrative rules coordinator and
6 the administrative code editor pursuant to section 17A.5,
7 subsection 1, within the same period. The rules shall be
8 effective immediately upon filing unless a later date is
9 specified in the rules. Any rules adopted in accordance with
10 this section shall also be published as a notice of intended
11 action as provided in section 17A.4.

12 Sec. 9. EFFECTIVE DATE. This Act, being deemed of immediate
13 importance, takes effect upon enactment.>

14 2. Title page, by striking lines 1 and 2 and inserting <An
15 Act relating to mental health care, including subacute mental
16 health care facility requirements; admission to and discharge
17 from a subacute mental health care facility; employment
18 requirements at a subacute mental health care facility;
19 insurance coverage for subacute mental health care; and the
20 establishment of a psychiatric medical institution for children
21 bed tracking system, and providing penalties and including
22 effective date provisions.>

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