



Fiscal Note

Fiscal Services Division



[HF 2562](#) – Temporary Health Care Placement Decision Makers (LSB5341HV.1)
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Fiscal Note Version – As amended by Senate amendment [H-8387](#)

Description

[House File 2562](#) as amended by Senate amendment [H-8387](#) relates to care facility placement for certain adults.

The Bill as amended is comprised of the following two divisions:

- Division I — Care Facility Placement
- Division II — Persons Authorized to Consent — Contingent on Enactment of Legislation

Division I — Care Facility Placement

Description

Division I of the Bill as amended does the following:

- Allows a physician to certify in a patient's record that the patient is not able to consent, that an authorized representative for the patient has not been located by the physician, and that it is in the patient's best interests to be discharged from the patient's current care facility and transferred or admitted to a care facility recommended by the physician.
- Allows an authorized person to make decisions regarding the patient's care facility placement following physician certification.
- Requires the patient's physician to forward a copy of the certification to the Department of Health and Human Services' (HHS's) Division of Aging and Disability Services.
- Requires a care facility or the patient's physician to forward a copy of a petition for court order to the HHS's Division of Aging and Disability Services at least 10 days prior to submitting the petition.
- Requires a court to forward a copy of the court order to the HHS's Division of Aging and Disability Services upon granting a petition.
- Requires a receiving care facility to notify the HHS's Division of Aging and Disability Services upon completion of the patient's placement at the facility.
- Authorizes the HHS to adopt administrative rules to administer the Bill as amended.

Background and Assumptions

- University of Iowa Health Care (UIHC) provides services to 10 to 12 patients per month who cannot consent to discharge.
- The average unnecessary bed days per patient is 2.6 days.
- The average net daily rate per patient is \$1,663.

Fiscal Impact

According to the Board of Regents, House File 2562 as amended may reduce revenues for UIHC by between \$519,000 and \$623,000 annually.

Division II — Persons Authorized to Consent — Contingent on Enactment of Legislation

Description

Division II of the Bill as amended modifies the definition of “person authorized to consent” provided in Division I of the Bill as amended.

Division II of the Bill as amended is contingent upon the enactment of 2026 Iowa Acts, [House File 2305](#) (Medical Power of Attorney, Hospice Care Bill), or successor legislation, amending Iowa Code section [144A.7\(1\)\(b\)](#).

Fiscal Impact

Division II of the Bill as amended is anticipated to have no fiscal impact.

Sources

Board of Regents
University of Iowa Hospitals and Clinics

/s/ Jennifer Acton
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The Fiscal Note for this Bill was prepared pursuant to [Joint Rule 17](#) and the Iowa Code. Data used in developing this Fiscal Note is available from the Fiscal Services Division of the Legislative Services Agency upon request.
