

House Study Bill 588

HOUSE FILE _____
BY (PROPOSED COMMITTEE ON
HUMAN RESOURCES BILL BY
CHAIRPERSON SMITH)

Passed House, Date _____ Passed Senate, Date _____
Vote: Ayes _____ Nays _____ Vote: Ayes _____ Nays _____
Approved _____

A BILL FOR

1 An Act authorizing a chief primary health clinician to file
2 certain periodic court reports on chronic substance abusers
3 and persons with mental illness who do not require full-time
4 placement in a treatment facility.
5 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:
6 TLSB 5192HC 82
7 rh/nh/5

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1 1 Section 1. Section 125.2, Code 2007, is amended by adding
1 2 the following new subsections:
1 3 NEW SUBSECTION. 4A. "Chief primary health clinician"
1 4 means the licensed physician, licensed psychiatrist, or
1 5 psychiatric advanced registered nurse practitioner who has
1 6 been designated as the primary health clinician for a patient.
1 7 NEW SUBSECTION. 13A. "Licensed physician" means an
1 8 individual licensed under chapter 148, 150, or 150A to
1 9 practice medicine and surgery, osteopathy, or osteopathic
1 10 medicine and surgery.
1 11 NEW SUBSECTION. 13B. "Licensed psychiatrist" means an
1 12 individual licensed under chapter 148, 150, or 150A to
1 13 practice medicine and surgery with a specialty in the field of
1 14 psychiatry.
1 15 NEW SUBSECTION. 13C. "Psychiatric advanced registered
1 16 nurse practitioner" means an individual currently licensed as
1 17 a registered nurse under chapter 152 or 152E who holds a
1 18 national certification in psychiatric health care and who is
1 19 registered with the board of nursing as an advanced registered
1 20 nurse practitioner.
1 21 Sec. 2. Section 125.86, subsection 2, Code 2007, is
1 22 amended to read as follows:
1 23 2. No more than sixty days after entry of a court order
1 24 for treatment of a respondent under section 125.84, subsection
1 25 3, and thereafter at successive intervals not to exceed ninety
1 26 days for as long as involuntary treatment continues, the
1 27 administrator of the facility or the chief primary health
1 28 clinician shall report to the court which entered the order.
1 29 The report shall be submitted in the manner required by
1 30 section 125.84, shall state whether in the opinion of the
1 31 chief medical officer or the chief primary health clinician
1 32 the respondent's condition has improved, remains unchanged, or
1 33 has deteriorated, and shall indicate the further length of
1 34 time the respondent will require treatment by the facility.
1 35 If the respondent fails or refuses to submit to treatment as
2 1 ordered by the court, the administrator of the facility or the
2 2 chief primary health clinician shall at once notify the court,
2 3 which shall order the respondent committed for treatment as
2 4 provided by section 125.84, subsection 3, unless the court
2 5 finds that the failure or refusal was with good cause, and
2 6 that the respondent is willing to receive treatment as
2 7 provided in the court's order, or in a revised order if the
2 8 court sees fit to enter one. If the administrator of the
2 9 facility or the chief primary health clinician reports to the
2 10 court that the respondent requires full-time custody, care,
2 11 and treatment in a facility, and the respondent is willing to
2 12 be admitted voluntarily to the facility for these purposes,
2 13 the court may enter an order approving the placement upon
2 14 consultation with the administrator of the facility in which
2 15 the respondent is to be placed. If the respondent is
2 16 unwilling to be admitted voluntarily to the facility, the

2 17 procedure for determining involuntary commitment, as provided
2 18 in section 125.84, subsection 3, shall be followed.

2 19 Sec. 3. Section 229.1, Code 2007, is amended by adding the
2 20 following new subsections:

2 21 NEW SUBSECTION. 5A. "Chief primary health clinician"
2 22 means the licensed physician, licensed psychiatrist, or
2 23 psychiatric advanced registered nurse practitioner who has
2 24 been designated as the primary health clinician for a patient.

2 25 NEW SUBSECTION. 8A. "Licensed psychiatrist" means an
2 26 individual licensed under chapter 148, 150, or 150A to
2 27 practice medicine and surgery with a specialty in the field of
2 28 psychiatry.

2 29 NEW SUBSECTION. 11A. "Psychiatric advanced registered
2 30 nurse practitioner" means an individual currently licensed as
2 31 a registered nurse under chapter 152 or 152E who holds a
2 32 national certification in psychiatric health care and who is
2 33 registered with the board of nursing as an advanced registered
2 34 nurse practitioner.

2 35 Sec. 4. Section 229.15, subsection 2, Code 2007, is
3 1 amended to read as follows:

3 2 2. Not more than sixty days after the entry of a court
3 3 order for treatment of a patient pursuant to a report issued
3 4 under section 229.14, subsection 1, paragraph "c", and
3 5 thereafter at successive intervals as ordered by the court but
3 6 not to exceed ninety days so long as that court order remains
3 7 in effect, the medical director of the facility or the chief

3 8 primary health clinician treating the patient shall report to
3 9 the court which entered the order. The report shall state
3 10 whether the patient's condition has improved, remains
3 11 unchanged, or has deteriorated, and shall indicate if possible
3 12 the further length of time the patient will require treatment
3 13 by the facility. If at any time the patient without good
3 14 cause fails or refuses to submit to treatment as ordered by
3 15 the court, the medical director or the chief primary health

3 16 clinician shall at once so notify the court, which shall order
3 17 the patient hospitalized as provided by section 229.14,
3 18 subsection 2, paragraph "d", unless the court finds that the
3 19 failure or refusal was with good cause and that the patient is
3 20 willing to receive treatment as provided in the court's order,
3 21 or in a revised order if the court sees fit to enter one. If
3 22 at any time the medical director or the chief primary health

3 23 clinician reports to the court that in the director's or
3 24 clinician's opinion the patient requires full-time custody,
3 25 care and treatment in a hospital, and the patient is willing
3 26 to be admitted voluntarily to the hospital for these purposes,
3 27 the court may enter an order approving hospitalization for
3 28 appropriate treatment upon consultation with the chief medical
3 29 officer of the hospital in which the patient is to be
3 30 hospitalized. If the patient is unwilling to be admitted
3 31 voluntarily to the hospital, the procedure for determining
3 32 involuntary hospitalization, as set out in section 229.14,
3 33 subsection 2, paragraph "d", shall be followed.

3 34 EXPLANATION

3 35 This bill authorizes a chief primary health clinician to
4 1 file certain periodic court reports on chronic substance
4 2 abusers and persons with mental illness who do not require
4 3 full-time placement in a treatment facility.

4 4 The bill provides that no more than 60 days after entry of
4 5 a court order for treatment of a respondent who is either a
4 6 chronic substance abuser or who is mentally ill who does not
4 7 require full-time placement in a treatment facility and
4 8 thereafter at successive intervals not to exceed 90 days for
4 9 as long as the involuntary treatment continues, the chief
4 10 primary health clinician shall have the authority, along with
4 11 the administrator of the treatment facility or the chief
4 12 medical officer of the treatment facility, to report to the
4 13 court which entered the order and shall state whether in the
4 14 opinion of the chief primary health clinician the respondent's
4 15 condition has improved, remains unchanged, or has
4 16 deteriorated, and shall indicate the further length of time
4 17 the respondent will require treatment by the facility. If the
4 18 respondent fails or refuses to submit to treatment as ordered
4 19 by the court, the chief primary health clinician shall notify
4 20 the court, which shall order the respondent committed for
4 21 treatment unless the court finds that the failure or refusal
4 22 was with good cause, and that the respondent is willing to
4 23 receive treatment as provided in the court's order, or in a
4 24 revised order if the court sees fit to enter one. If the
4 25 chief primary health clinician reports to the court that the
4 26 respondent requires full-time custody, care, and treatment in
4 27 a facility, and the respondent is willing to be admitted

4 28 voluntarily to the facility for these purposes, the court may
4 29 enter an order approving the placement upon consultation with
4 30 the administrator of the facility in which the respondent is
4 31 to be placed.

4 32 The bill defines "chief primary health clinician" as the
4 33 licensed physician, licensed psychiatrist, or psychiatric
4 34 advanced registered nurse practitioner who has been designated
4 35 as the primary health clinician for a patient. "Licensed
5 1 physician" is defined as an individual licensed under Code
5 2 chapter 148, 150, or 150A to practice medicine and surgery,
5 3 osteopathy, or osteopathic medicine and surgery, "licensed
5 4 psychiatrist" is defined as an individual licensed under Code
5 5 chapter 148, 150, or 150A to practice medicine and surgery
5 6 with a specialty in the field of psychiatry, and "psychiatric
5 7 advanced registered nurse practitioner" is defined as an
5 8 individual currently licensed as a registered nurse under Code
5 9 chapter 152 or 152E who holds a national certification in
5 10 psychiatric health care and who is registered with the board
5 11 of nursing as an advanced registered nurse practitioner.
5 12 LSB 5192HC 82
5 13 rh/nh/5.1