House File 2509 - Introduced

HOUSE FILE 2509

BY COMMITTEE ON HEALTH AND
HUMAN SERVICES

(SUCCESSOR TO HSB 653)

A BILL FOR

- 1 An Act relating to the transition of behavioral health services
- 2 from a mental health and disability services system to
- 3 a behavioral health service system, and the transfer of
- 4 disability services to the division of aging and disability
- 5 services of the department of health and human services,
- 6 making appropriations, and including effective date
- 7 provisions.
- 8 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

l DIVISION I

- 2 BEHAVIORAL HEALTH SERVICE SYSTEM
- 3 Section 1. NEW SECTION. 225A.1 Definitions.
- 4 As used in this chapter unless the context otherwise
- 5 requires:
- 6 1. "Administrative services organization" means an entity
- 7 designated by the department pursuant to section 225A.4, to
- 8 develop and perform planning and administrative services in
- 9 accordance with a district behavioral health service system
- 10 plan.
- 11 2. "Behavioral health condition" means a substantial
- 12 limitation in major life activities due to a mental,
- 13 behavioral, or addictive disorder or condition diagnosed in
- 14 accordance with the criteria provided in the most current
- 15 edition of the diagnostic and statistical manual of mental
- 16 disorders, published by the American psychiatric association.
- 17 3. "Behavioral health district" or "district" means a
- 18 geographic, multicounty, sub-state area as designated by the
- 19 department under section 225A.4.
- 20 4. "Behavioral health provider" or "provider" means an
- 21 individual, firm, corporation, association, or institution
- 22 that, pursuant to this chapter, is providing or has been
- 23 approved by the department to provide services to an individual
- 24 with a behavioral health condition.
- 25 5. "Behavioral health service system" means the behavioral
- 26 health service system established in section 225A.3.
- 27 6. "Caregiver" means an adult family member, or other
- 28 individual, who is providing care to a person outside of a
- 29 formal program.
- 30 7. "Department" means the department of health and human
- 31 services.
- 32 8. "Director" means the director of the department of health
- 33 and human services.
- 34 9. "District behavioral health advisory council" or
- 35 "advisory council" means a council established by an

- 1 administrative services organization under section 225A.5, to
- 2 identify opportunities, address challenges, and advise the
- 3 administrative services organization in accordance with section
- 4 225A.5.
- 5 10. "District behavioral health service system plan" or
- 6 "district behavioral health plan" means a plan developed by
- 7 an administrative services organization and approved by the
- 8 department to outline the services intended to be provided
- 9 within the administrative services organization's behavioral
- 10 health district.
- 11 11. "Indicated prevention" means prevention activities
- 12 designed to prevent the onset of substance use disorders in
- 13 individuals who do not meet the medical criteria for addiction,
- 14 but who show early signs of developing a substance use disorder
- 15 in the future.
- 16 12. "Selective prevention" means prevention activities
- 17 designed to target subsets of the total population who are
- 18 considered at-risk for a substance use disorder by virtue of
- 19 their membership in a particular segment of the population.
- 20 Selective prevention targets the entire subgroup, regardless of
- 21 the degree of risk of any individual within the group.
- 22 13. "State behavioral health service system plan" or
- 23 "state behavioral health plan" means the plan developed by the
- 24 department that describes the key components of the state's
- 25 behavioral health service system.
- 26 14. "Universal prevention" means prevention activities
- 27 designed to address an entire population class for the purpose
- 28 of preventing or delaying the use of alcohol, tobacco, and
- 29 other drugs. Population classes include but are not limited
- 30 to the national population, local populations, community
- 31 populations, school populations, and neighborhood populations.
- 32 Sec. 2. NEW SECTION. 225A.2 State mental health authority
- 33 state agency for substance abuse.
- 34 1. The department is designated as the state mental health
- 35 authority as defined in 42 U.S.C. §201(m) for the purpose of

- 1 directing benefits from the federal community mental health
- 2 services block grant, 42 U.S.C. §300x et seq., and the state
- 3 authority designated for the purpose of directing benefits
- 4 from the federal substance abuse prevention and treatment
- 5 block grant, 42 U.S.C. §300x-21 et seq. This designation
- 6 does not preclude the state board of regents from authorizing
- 7 or directing any institution under the board of regents'
- 8 jurisdiction to carry out educational, prevention, and research
- 9 activities in the areas of mental health and intellectual
- 10 disability.
- 11 2. The department is designated as the single state agency
- 12 for substance abuse for the purposes of 42 U.S.C. §1396a et
- 13 seq.
- 3. For the purposes of effectuating the department's roles
- 15 designated in this section, the department shall have the
- 16 following powers and the authority to take all the following
- 17 actions:
- 18 a. Plan, establish, and maintain prevention, education,
- 19 early intervention, treatment, recovery support, and crisis
- 20 services programs as necessary or desirable in accordance with
- 21 a comprehensive behavioral health service system.
- 22 b. Develop and submit a state plan as required by 42 U.S.C.
- 23 §300x-1, in accordance with 42 C.F.R. §431.10.
- 24 c. Review and approve district behavioral health service
- 25 system plans developed in accordance with the state behavioral
- 26 health service system plan.
- 27 d. Perform all necessary acts to cooperate with any state
- 28 agency, political subdivision, or federal government agency to
- 29 apply for grants.
- 30 e. Solicit and accept for use any gift of money or property
- 31 by will or otherwise, and any grant of money, services,
- 32 or property from the federal government, the state, or any
- 33 political subdivision thereof or any private source.
- 34 f. Collect and maintain records, engage in studies and
- 35 analyses, and gather relevant statistics.

- 1 g. Take any other actions as necessary to execute the
- 2 duties granted to the department in this chapter, or that
- 3 are otherwise required to maintain compliance with federal
- 4 requirements related to the department's roles established in
- 5 this section.
- 6 Sec. 3. NEW SECTION. 225A.3 Behavioral health service
- 7 system department powers and duties.
- 8 l. A behavioral health service system is established
- 9 under the control of the department for the purposes of
- 10 implementing a statewide system of prevention, education, early
- 11 intervention, treatment, recovery support, and crisis services
- 12 related to mental health, substance use, tobacco use, and
- 13 problem gambling.
- 14 2. To the extent funding is available, the department
- 15 shall perform all of the following duties to administer the
- 16 behavioral health service system:
- 17 a. Consistent with the department's agency strategic plan
- 18 adopted pursuant to section 8E.206, prepare and administer
- 19 the state behavioral health service system plan. The state
- 20 behavioral health service system plan shall identify strategies
- 21 and targeted outcomes for the behavioral health service system
- 22 to continuously improve the provision of all of the following:
- 23 (1) Universal prevention, selective prevention, and
- 24 indicated prevention.
- 25 (2) Evidence-based and evidence-informed early intervention
- 26 and treatment services.
- 27 (3) Comprehensive recovery support services with a focus on
- 28 community-based services that avoid, divert, or offset the need
- 29 for acute inpatient services, long-term services provided in
- 30 large institutional settings, law enforcement involvement, and
- 31 incarceration.
- 32 (4) Crisis services with a focus on reducing escalation
- 33 of crisis situations, relieving the immediate distress of
- 34 individuals experiencing a crisis situation, reducing the
- 35 risk that individuals in a crisis situation harm themselves

- 1 or others, and promoting timely access to behavioral health
- 2 services for those who require ongoing treatment.
- 3 b. Administer and distribute state appropriations, federal
- 4 aid, and grants deposited into the behavioral health fund
- 5 established in section 225A.7.
- 6 c. Oversee, provide technical assistance to, and
- 7 monitor administrative services organizations to ensure the
- 8 administrative services organizations' compliance with district
- 9 behavioral health plans.
- 10 d. Oversee behavioral health provider licensure,
- 11 accreditation, and certification, and issue determinations
- 12 to approve, deny, revoke, or suspend a behavioral health
- 13 provider's licensure, accreditation, or certification status.
- 14 e. Establish and maintain a data collection and management
- 15 information system to identify, collect, and analyze service
- 16 outcome and performance data to address the needs of patients,
- 17 providers, the department, and programs operating within the
- 18 behavioral health service system.
- 19 f. Collect, monitor, and utilize information including but
- 20 not limited to behavioral health service system patient records
- 21 and syndromic surveillance data to understand emerging needs,
- 22 and to swiftly deploy information, resources, and technical
- 23 assistance in response.
- 24 g. Adopt rules pursuant to chapter 17A to administer this
- 25 chapter. Such rules shall include but not be limited to rules
- 26 that provide for all of the following:
- 27 (1) Minimum access standards to ensure equitable access to
- 28 services provided through the behavioral health service system
- 29 including but not limited to when services are available, who
- 30 is eligible for services, and where services are available.
- 31 (2) Methods to ensure each individual receives an
- 32 uninterrupted continuum of care for prevention, education,
- 33 early intervention, treatment, recovery support, and crisis
- 34 services.
- 35 (3) Standards for the implementation and maintenance

- 1 of behavioral health programs and services offered by the
- 2 behavioral health service system, and by each administrative
- 3 services organization.
- 4 (4) Procedures for the management and oversight of
- 5 behavioral health providers to ensure provider compliance with
- 6 the terms of the behavioral health providers' contracts and
- 7 with state and federal law and rules.
- 8 (5) Procedures for the termination of an administrative
- 9 services organization's designation as an administrative
- 10 services organization.
- 11 (6) Procedures for the collection, utilization, and
- 12 maintenance of the data necessary to establish a central data
- 13 repository in accordance with section 225A.6.
- 14 (7) Any other requirements the department deems necessary
- 15 to ensure that an administrative services organization
- 16 fulfills the administrative services organization's duties
- 17 as established in this chapter, and as established in the
- 18 administrative services organization's district behavioral
- 19 health plan.
- 20 Sec. 4. NEW SECTION. 225A.4 Behavioral health service
- 21 system districts and administrative services organizations.
- 22 l. a. The department shall divide the entirety of the state
- 23 into designated behavioral health districts. Behavioral health
- 24 prevention, education, early intervention, treatment, recovery
- 25 support, and crisis services shall be made available through
- 26 each behavioral health district in a manner consistent with
- 27 directives each district receives from the department.
- 28 b. For the purpose of providing equitable access to all
- 29 services provided through the behavioral health service
- 30 system, the department shall consider all of the following when
- 31 designating behavioral health districts:
- 32 (1) City and county lines.
- 33 (2) The maximum population size that behavioral health
- 34 services available in an area are able to effectively serve.
- 35 (3) Areas of high need for behavioral health services.

- 1 (4) Patterns various populations exhibit when accessing or 2 receiving behavioral health services.
- 3 c. Notwithstanding chapter 17A, the manner in which the 4 department designates behavioral health districts including but
- 5 not limited to the determination of the boundaries for each
- 6 district shall not be subject to judicial review.
- 7 2. a. The department shall designate an administrative
- 8 services organization for each behavioral health district to
- 9 oversee and organize each district and the behavioral health
- 10 services associated with the district. The department shall
- 11 issue requests for proposals for administrative services
- 12 organization candidates.
- 13 b. At the department's discretion, the department may
- 14 designate any of the following as an administrative services
- 15 organization:
- 16 (1) A mental health and disability services regional
- 17 administrator formed prior to July 1, 2025.
- 18 (2) A public or private agency in a behavioral health
- 19 district, or any separate organizational unit within the
- 20 public or private agency, that has the capabilities to engage
- 21 in the planning or provision of a broad range of behavioral
- 22 health prevention, education, early intervention, treatment,
- 23 recovery support, and crisis services only as directed by the
- 24 department.
- 25 c. The department shall consider all of the following
- 26 factors in determining whether to designate an entity as an
- 27 administrative services organization:
- 28 (1) Whether the entity has demonstrated the capacity to
- 29 manage and utilize available resources in a manner required of
- 30 an administrative services organization.
- 31 (2) Whether the entity has demonstrated the ability to
- 32 ensure the delivery of behavioral health services within the
- 33 district as required by the department by rule.
- 34 (3) Whether the entity has demonstrated the ability to
- 35 fulfill the monitoring, oversight, and provider compliance

- 1 responsibilities as required by the department by rule.
- 2 3. a. Upon designation by the department, an administrative
- 3 services organization shall be considered an instrumentality of
- 4 the state and shall adhere to all state and federal mandates
- 5 and prohibitions applicable to an instrumentality of the state.
- 6 b. The designation as an administrative services
- 7 organization shall continue until the designation is removed
- 8 by the department, the administrative services organization
- 9 withdraws, or a change in state or federal law necessitates the
- 10 removal of the designation.
- 11 4. Each administrative services organization shall function
- 12 as a subrecipient for the purposes of the federal community
- 13 mental health services block grant, 42 U.S.C. §300x et seq.,
- 14 and the federal substance abuse prevention and treatment block
- 15 grant, 42 U.S.C. §300x-21 et seq., and shall comply with all
- 16 federal requirements applicable to subrecipients under the
- 17 block grants.
- 18 5. Each administrative services organization shall perform
- 19 all of the following duties:
- 20 a. Develop and administer a district behavioral health
- 21 plan as approved by the department, and in accordance with the
- 22 standards adopted by the department by rule.
- 23 b. Coordinate the administration of the district behavioral
- 24 health plan with federal, state, and local resources in order
- 25 to develop a comprehensive and coordinated local behavioral
- 26 health service system.
- 27 c. Enter into contracts necessary to provide services under
- 28 the district behavioral health plan.
- 29 d. Oversee, provide technical assistance to, and monitor
- 30 the compliance of providers contracted by the administrative
- 31 services organization to provide behavioral health services in
- 32 accordance with the district behavioral health plan.
- 33 e. Establish a district behavioral health advisory council
- 34 pursuant to section 225A.5.
- 35 Sec. 5. NEW SECTION. 225A.5 District behavioral health

1 advisory councils.

- 2 l. Each administrative services organization shall
- 3 establish a district behavioral health advisory council that
- 4 shall do all of the following:
- 5 a. Identify opportunities and address challenges based on
- 6 updates received from the administrative services organization
- 7 regarding the implementation of the district behavioral health
- 8 plan.
- 9 b. Advise the administrative services organization while
- 10 the administrative services organization is developing a
- 11 comprehensive behavioral health policy.
- 12 c. Advise the administrative services organization on how to
- 13 best provide access to behavioral health prevention, education,
- 14 early intervention, treatment, recovery support, and crisis
- 15 services throughout the district as directed by the department.
- 16 2. An advisory council shall consist of nine members.
- 17 Members shall be appointed by the administrative services
- 18 organization subject to the following requirements:
- 19 a. Three members shall be elected public officials
- 20 currently holding office, or the public official's designated
- 21 representative. However, if the number of elected public
- 22 officials available and willing to serve is less than three
- 23 members, this requirement shall be waived until an elected
- 24 public official currently holding office is willing to serve.
- 25 b. Three members shall be chosen in accordance with
- 26 procedures established by the administrative services
- 27 organization to ensure representation of the populations served
- 28 within the behavioral health district.
- 29 c. Three members shall be chosen who have experience
- 30 or education related to core behavioral health functions,
- 31 essential behavioral health services, behavioral health
- 32 prevention, behavioral health treatment, population-based
- 33 behavioral health services, or community-based behavioral
- 34 health initiatives.
- 35 Sec. 6. NEW SECTION. 225A.6 Behavioral health service

1 system — data collection and use.

- 2 l. The department shall take all of the following actions
- 3 for data related to the behavioral health service system:
- 4 a. Collect and analyze the data, including but not
- 5 limited to Medicaid and community services network data, as
- 6 necessary to issue cost estimates for serving populations,
- 7 providing treatment, making and receiving payments, conducting
- 8 operations, and performing duties related to the behavioral
- 9 health service system. In doing so, the department shall
- 10 maintain compliance with applicable federal and state
- 11 privacy laws to ensure the confidentiality and integrity
- 12 of individually identifiable data. The department may
- 13 periodically assess the status of the department's compliance
- 14 to ensure that data collected by and stored with the department
- 15 is protected.
- 16 b. Establish and administer a central data repository for
- 17 collecting and analyzing state, behavioral health district, and
- 18 contracted behavioral health provider data.
- c. Establish a record for each individual receiving publicly
- 20 funded services from an administrative services organization.
- 21 Each record shall include a unique client identifier for the
- 22 purposes of identifying and tracking the individual's record.
- d. Consult with administrative services organizations,
- 24 behavioral health service providers, and other behavioral
- 25 health service system stakeholders on an ongoing basis to
- 26 implement and maintain the central data repository.
- 27 e. Engage with all entities that maintain information the
- 28 department is required to collect pursuant to this section in
- 29 order to integrate all data concerning individuals receiving
- 30 services within the behavioral health service system.
- 31 f. Engage with all entities that maintain general population
- 32 data relating to behavioral health in order to develop action
- 33 plans, create projections relating to a population's behavioral
- 34 health needs, develop policies concerning behavioral health,
- 35 and otherwise perform acts as necessary to enhance the state's

- 1 overall behavioral health.
- 2 2. Administrative services organizations shall report all
- 3 data required to be maintained in the central data repository
- 4 to the department in a manner as established by the department
- 5 by rule. For the purpose of making such data reports, an
- 6 administrative services organization shall do one of the
- 7 following:
- 8 a. Utilize a data system that integrates with the data
- 9 systems used by the department.
- 10 b. Utilize a data system that has the capacity to securely
- 11 exchange information with the department, other behavioral
- 12 health districts, contractors, and other entities involved with
- 13 the behavioral health service system who are authorized to
- 14 access the central data repository.
- 15 3. Data and information maintained by and exchanged between
- 16 an administrative services organization and the department
- 17 shall be labeled consistently, share the same definitions,
- 18 utilize the same common coding and nomenclature, and be in a
- 19 form and format as required by the department by rule.
- 4. Administrative services organizations shall report,
- 21 to the department in a manner specified by the department,
- 22 information including but not limited to demographic
- 23 information, expenditure data, and data concerning the
- 24 behavioral health services and other support provided to
- 25 individuals in the administrative service organization's
- 26 district.
- 27 5. The department shall ensure that administrative services
- 28 organizations, behavioral health providers, and contracting
- 29 entities operating within the behavioral health service system
- 30 maintain uniform methods for keeping statistical information
- 31 relating to behavioral health service system outcomes and
- 32 performance.
- 33 6. The department shall develop and implement a means to
- 34 provide key outcome and performance data to the public and to
- 35 persons involved with the behavioral health service system.

- 1 Sec. 7. NEW SECTION. 225A.7 Behavioral health fund.
- 2 l. For purposes of this section:
- 3 a. "Population" means, as of July 1 of the fiscal year
- 4 preceding the fiscal year in which the population figure is
- 5 applied, the population shown by the latest preceding certified
- 6 federal census or the latest applicable population estimate
- 7 issued by the United States census bureau, whichever is most
- 8 recent.
- 9 b. "State growth factor" for a fiscal year means an amount
- 10 equal to the dollar amount used to calculate the appropriation
- 11 under this section for the immediately preceding fiscal year
- 12 multiplied by the percent increase, if any, in the amount of
- 13 sales tax revenue deposited into the general fund of the state
- 14 under section 423.2A, subsection 1, paragraph "a", less the
- 15 transfers required under section 423.2A, subsection 2, between
- 16 the fiscal year beginning three years prior to the applicable
- 17 fiscal year and the fiscal year beginning two years prior
- 18 to the applicable year, but not to exceed one and one-half
- 19 percent.
- 20 2. A behavioral health fund is established in the state
- 21 treasury under the control of the department. The fund shall
- 22 consist of moneys deposited into the fund pursuant to this
- 23 section and section 426B.1, gifts of money or property accepted
- 24 by the state or the department to support any services under
- 25 this chapter or chapter 231, and moneys otherwise appropriated
- 26 by the general assembly. Moneys in the fund are appropriated
- 27 to the department to implement and administer the behavioral
- 28 health service system and related programs including but not
- 29 limited to all of the following:
- 30 a. Distributions to administrative services organizations
- 31 to provide services as outlined in the organizations' district
- 32 behavioral health plan.
- 33 b. Distributions to providers of tobacco use services,
- 34 substance use disorder services, and problem gambling services.
- 35 c. Funding of disability services pursuant to chapter 231.

- 1 d. Payment of administrative costs associated with services 2 described under paragraphs "a", "b", and "c".
- For the fiscal year beginning July 1, 2025, there
- 4 is transferred from the general fund of the state to the
- 5 behavioral health fund an amount equal to forty-two dollars
- 6 multiplied by the state's population for the fiscal year.
- 7 4. For the fiscal year beginning July 1, 2026, and each
- 8 succeeding fiscal year, there is transferred from the general
- 9 fund of the state to the behavioral health fund an amount equal
- 10 to the state's population for the fiscal year multiplied by
- 11 the sum of the dollar amount used to calculate the transfer
- 12 from the general fund to the behavioral health fund for the
- 13 immediately preceding fiscal year, plus the state growth factor
- 14 for the fiscal year for which the transfer is being made.
- 15 5. For each fiscal year, an administrative services
- 16 organization shall not spend on administrative costs an amount
- 17 more than seven percent of the total amount distributed to the
- 18 administrative services organization through this section and
- 19 other appropriations for that fiscal year.
- 20 6. Moneys in the behavioral health fund may be used by the
- 21 department for cash flow purposes, provided that any moneys so
- 22 allocated are returned to the behavioral health fund by the end
- 23 of each fiscal year.
- 7. Notwithstanding section 12C.7, subsection 2, interest
- 25 or earnings on moneys deposited in the behavioral health fund
- 26 shall be credited to the behavioral health fund.
- 27 8. Notwithstanding section 8.33, moneys appropriated in
- 28 this section that remain unencumbered or unobligated at the
- 29 close of the fiscal year shall not revert but shall remain
- 30 available for expenditure for the purposes designated until the
- 31 close of the succeeding fiscal year.
- 32 Sec. 8. CODE EDITOR DIRECTIVE. The Code editor is directed
- 33 to do all of the following:
- 34 1. Designate sections 225A.1 through 225A.7, as enacted
- 35 in this division of this Act, as Code chapter 225A entitled

- 1 "Department of Health and Human Services Behavioral Health
 2 Service System".
- 2. Correct internal references in the Code and in any 4 enacted legislation as necessary due to the enactment of this 5 division of this Act.
- 6 Sec. 9. EFFECTIVE DATE. This division of this Act takes 7 effect July 1, 2025.
- 8 DIVISION II
- 9 BEHAVIORAL HEALTH SERVICE SYSTEM CONFORMING CHANGES
- 10 Sec. 10. Section 11.6, subsection 1, paragraph b, Code 2024,
- ll is amended to read as follows:
- 12 b. The financial condition and transactions of community
- 13 mental health centers organized under chapter 230A, substance
- 14 use disorder programs organized licensed under chapter 125, and
- 15 community action agencies organized under chapter 216A, shall
- 16 be audited at least once each year.
- 17 Sec. 11. Section 35D.9, Code 2024, is amended to read as 18 follows:
- 19 35D.9 County of residence upon discharge.
- 20 1. A member of the home does not acquire residency in
- 21 the county in which the home is located unless the member is
- 22 voluntarily or involuntarily discharged from the home and the
- 23 member meets county of residence requirements.
- 24 2. For purposes of this section, "county of residence"
- 25 means the same as defined in section 225C.61 the county in
- 26 this state in which, at the time a person applies for or
- 27 receives services, the person is living and has established
- 28 an ongoing presence with the declared, good faith intention
- 29 of living for a permanent or indefinite period of time. The
- 30 county of residence of a homeless person is the county in
- 31 which the homeless person usually sleeps. A person maintains
- 32 residency in the county or state in which the person last
- 33 resided during the time period that the person is present in
- 34 a different county or state receiving services in a hospital,
- 35 a correctional facility, a halfway house for community-based

- 1 corrections or substance use disorder treatment, a nursing
- 2 facility, an intermediate care facility for persons with an
- 3 intellectual disability, a residential care facility, or for
- 4 the purpose of attending a college or university.
- 5 3. a. The dispute resolution process in this subsection
- 6 shall apply to county of residence disputes. The dispute
- 7 resolution process shall not be applicable to any of the
- 8 following:
- 9 (1) Disputes involving persons committed to a state
- 10 facility pursuant to chapter 812.
- 11 (2) Disputes involving Iowa rule of criminal procedure
- 12 2.22(8)(b), commitment for evaluation.
- 13 (3) Disputes involving chapter 12 of Iowa court rules, rules
- 14 for involuntary hospitalization of mentally ill persons.
- 15 b. If a county objects to a billing for services or a
- 16 residency determination and asserts that either the person
- 17 has residency in a different county or the person is not a
- 18 resident of this state, the person's county of residence
- 19 shall be determined as provided in this subsection. If the
- 20 county asserts that the person has residency in a different
- 21 county in this state, the county shall notify that county in
- 22 writing within one hundred twenty calendar days of receiving
- 23 the billing for services or of the county of residence
- 24 determination.
- 25 c. The county that receives the notification under paragraph
- 26 "b" shall respond in writing to the county that provided the
- 27 notification within forty-five calendar days of receiving the
- 28 notification. If the parties cannot agree as to the person's
- 29 county of residence within ninety calendar days of the date of
- 30 notification, on motion of either of the parties, the matter
- 31 shall be referred to the administrative hearings division of
- 32 the department of inspections, appeals, and licensing for
- 33 a contested case proceeding under chapter 17A, before an
- 34 administrative law judge assigned in accordance with section
- 35 10A.801, to determine the person's county of residence.

- 1 d. (1) Notwithstanding section 17A.15, the administrative
- 2 law judge's determination of a person's county of residence
- 3 shall be considered final agency action. Judicial review of
- 4 the determination may be sought in accordance with section
- 5 17A.19.
- 6 (2) If following the determination of a person's county of
- 7 residence under this subsection additional evidence becomes
- 8 available that merits a change in the determination of the
- 9 person's county of residence, the affected parties may change
- 10 the determination of county of residence by mutual agreement.
- 11 Otherwise, a party may move that the matter be reconsidered
- 12 by the county, or by an administrative law judge assigned in
- 13 accordance with section 10A.801.
- 14 e. Unless a petition is filed for judicial review, the
- 15 administrative law judge's determination of the person's county
- 16 of residence shall result in one of the following:
- 17 (1) If a county is determined to be the person's county
- 18 of residence, that county shall pay any amounts due and shall
- 19 reimburse the other county for any amounts paid for services
- 20 provided to the person by the other county prior to the county
- 21 of residence determination.
- 22 (2) If it is determined that the person is not a resident of
- 23 this state, neither the state nor either county shall be liable
- 24 for payment of amounts due for services provided to the person
- 25 prior to the determination of the person's county of residence.
- 26 f. (1) The party that does not prevail in a contested
- 27 case proceeding or a subsequent judicial review pursuant to
- 28 this subsection shall be liable for costs associated with
- 29 the proceeding or judicial review, including reimbursement
- 30 of the administrative hearings division of the department of
- 31 inspections, appeals, and licensing's actual costs associated
- 32 with the administrative proceeding, court costs, and reasonable
- 33 attorney fees.
- 34 (2) A payment or reimbursement pursuant to this subsection
- 35 shall be remitted within forty-five calendar days of the

- 1 date the county of residence determination is issued by the
- 2 administrative law judge or the date the court files an order
- 3 determining the person's county of residence, whichever is
- 4 later. After forty-five calendar days, the prevailing party
- 5 $\underline{\text{may}}$ add a penalty of up to one percent per month to any amounts
- 6 due.
- 7 Sec. 12. Section 97B.1A, subsection 8, paragraph a,
- 8 subparagraph (13), Code 2024, is amended by striking the
- 9 subparagraph.
- 10 Sec. 13. Section 123.17, subsections 5 and 8, Code 2024, are
- 11 amended to read as follows:
- 12 5. After any transfer provided for in subsection 3 is
- 13 made, the department shall transfer into a special revenue
- 14 account in the general fund of the state, a sum of money at
- 15 least equal to seven percent of the gross amount of sales
- 16 made by the department from the beer and liquor control fund
- 17 on a monthly basis but not less than nine million dollars
- 18 annually. Of the amounts transferred, two million dollars,
- 19 plus an additional amount determined by the general assembly,
- 20 shall be appropriated to the department of health and human
- 21 services for use by the staff who administer the comprehensive
- 22 substance use disorder program under chapter 125 for substance
- 23 use disorder treatment and prevention programs the purposes of
- 24 planning, establishing, and maintaining prevention, education,
- 25 early intervention, treatment, and recovery support services
- 26 programs for substance use. Any amounts received in excess of
- 27 the amounts appropriated to the department of health and human
- 28 services for use by the staff who administer the comprehensive
- 29 substance use disorder program under chapter 125 the purposes
- 30 of planning, establishing, and maintaining prevention,
- 31 education, early intervention, treatment, and recovery support
- 32 services programs for substance use shall be considered part of
- 33 the general fund balance.
- 34 8. After any transfers provided for in subsections 3, 5,
- 35 6, and 7, and before any other transfer to the general fund,

- 1 the department shall transfer from the beer and liquor control
- 2 fund one million dollars to the department of health and human
- 3 services for distribution pursuant to section 125.59 behavioral
- 4 health fund established under section 225A.7.
- 5 Sec. 14. Section 124.409, subsection 2, Code 2024, is
- 6 amended by striking the subsection.
- 7 Sec. 15. Section 125.2, subsections 4, 5, and 10, Code 2024,
- 8 are amended by striking the subsections.
- 9 Sec. 16. Section 125.91, subsection 1, Code 2024, is amended
- 10 to read as follows:
- 1. The procedure prescribed by this section shall only
- 12 be used for a person with a substance use disorder due to
- 13 intoxication or substance-induced incapacitation who has
- 14 threatened, attempted, or inflicted physical self-harm or harm
- 15 on another, and is likely to inflict physical self-harm or harm
- 16 on another unless immediately detained, or who is incapacitated
- 17 by a chemical substance, if an application has not been filed
- 18 naming the person as the respondent pursuant to section 125.75
- 19 and the person cannot be ordered into immediate custody and
- 20 detained pursuant to section 125.81.
- 21 Sec. 17. Section 125.93, Code 2024, is amended to read as
- 22 follows:
- 23 125.93 Commitment records confidentiality.
- 24 Records of the identity, diagnosis, prognosis, or treatment
- 25 of a person which are maintained in connection with the
- 26 provision of substance use disorder treatment services are
- 27 confidential, consistent with the requirements of section
- 28 125.37, and with the federal confidentiality regulations
- 29 authorized by the federal Drug Abuse Office and Treatment Act,
- 30 42 U.S.C. §290ee and the federal Comprehensive Alcohol Abuse
- 31 and Alcoholism Prevention, Treatment and Rehabilitation Act, 42
- 32 U.S.C. §290dd-2. However, such records may be disclosed to an
- 33 employee of the department of corrections, if authorized by the
- 34 director of the department of corrections, or to an employee
- 35 of a judicial district department of correctional services, if

- 1 authorized by the director of the judicial district department
- 2 of correctional services.
- 3 Sec. 18. Section 135.11, subsection 11, Code 2024, is
- 4 amended to read as follows:
- 5 11. Administer chapters 125, 136A, 136C, 139A, 142, 142A,
- 6 144, and 147A.
- 7 Sec. 19. Section 135C.2, subsection 5, unnumbered paragraph
- 8 1, Code 2024, is amended to read as follows:
- 9 The department shall establish a special classification
- 10 within the residential care facility category in order to
- 11 foster the development of residential care facilities which
- 12 serve persons with an intellectual disability, chronic mental
- 13 illness, a developmental disability, or brain injury, as
- 14 described under section 225C.26, and which contain five or
- 15 fewer residents. A facility within the special classification
- 16 established pursuant to this subsection is exempt from the
- 17 requirements of section 10A.713. The department shall adopt
- 18 rules which are consistent with rules previously developed for
- 19 the waiver demonstration waiver project pursuant to 1986 Iowa
- 20 Acts, ch. 1246, §206, and which include all of the following
- 21 provisions:
- Sec. 20. Section 135C.6, subsection 1, Code 2024, is amended
- 23 to read as follows:
- 24 1. A person or governmental unit acting severally or
- 25 jointly with any other person or governmental unit shall not
- 26 establish or operate a health care facility in this state
- 27 without a license for the facility. A supported community
- 28 living service, as defined in section 225C.21 249A.38A, is not
- 29 required to be licensed under this chapter, but is subject to
- 30 approval under section 225C.21 249A.38A in order to receive
- 31 public funding.
- 32 Sec. 21. Section 135C.23, subsection 1, unnumbered
- 33 paragraph 1, Code 2024, is amended to read as follows:
- 34 Each resident shall be covered by a contract executed at
- 35 the time of admission or prior thereto by the resident, or the

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1 resident's legal representative, and the health care facility,
 2 except as otherwise provided by subsection 5 with respect to
 3 residents admitted at public expense to a county care facility
 4 operated under chapter 347B. Each party to the contract shall
 5 be entitled to a duplicate original thereof, and the health
 6 care facility shall keep on file all contracts which it has
 7 with residents and shall not destroy or otherwise dispose of
 8 any such contract for at least one year after its expiration.
 9 Each such contract shall expressly set forth:
10
      Sec. 22. Section 135C.23, subsection 2, paragraph b, Code
11 2024, is amended to read as follows:
         This section does not prohibit the admission of a
13 patient with a history of dangerous or disturbing behavior to
14 an intermediate care facility for persons with mental illness,
15 intermediate care facility for persons with an intellectual
16 disability, or nursing facility, or county care facility when
17 the intermediate care facility for persons with mental illness,
18 intermediate care facility for persons with an intellectual
19 disability, or nursing facility, or county care facility has a
20 program which has received prior approval from the department
21 to properly care for and manage the patient. An intermediate
22 care facility for persons with mental illness, intermediate
23 care facility for persons with an intellectual disability,
24 or nursing facility, or county care facility is required to
25 transfer or discharge a resident with dangerous or disturbing
26 behavior when the intermediate care facility for persons with
27 mental illness, intermediate care facility for persons with an
28 intellectual disability, or nursing facility, or county care
29 facility cannot control the resident's dangerous or disturbing
30 behavior. The department, in coordination with the state
31 mental health and disability services commission created in
32 section 225C.5, shall adopt rules pursuant to chapter 17A for
33 programs to be required in intermediate care facilities for
34 persons with mental illness, intermediate care facilities
35 for persons with an intellectual disability, and nursing
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- 1 facilities, and county care facilities that admit patients
- 2 or have residents with histories of dangerous or disturbing
- 3 behavior.
- 4 Sec. 23. Section 135C.23, subsection 5, Code 2024, is
- 5 amended by striking the subsection.
- 6 Sec. 24. Section 135C.24, subsection 5, Code 2024, is
- 7 amended by striking the subsection.
- 8 Sec. 25. Section 135G.1, subsection 12, Code 2024, is
- 9 amended to read as follows:
- 10 12. a. "Subacute mental health services" means the same
- 11 as defined in section 225C.6 services that provide all of the
- 12 following:
- 13 (1) A comprehensive set of wraparound services for a
- 14 person who has had, or is at imminent risk of having, acute or
- 15 crisis mental health symptoms that do not permit the person to
- 16 remain in or threatens removal of the person from the person's
- 17 home and community, but who has been determined by a mental
- 18 health professional and a licensed health care professional,
- 19 subject to the professional's scope of practice, not to need
- 20 inpatient acute hospital services. For the purposes of this
- 21 subparagraph, "licensed health care professional" means a person
- 22 licensed under chapter 148, an advanced registered nurse
- 23 practitioner, or a physician assistant.
- 24 (2) Intensive, recovery-oriented treatment and monitoring
- 25 of a person. Treatment may be provided directly or remotely
- 26 by a licensed psychiatrist or an advanced registered nurse
- 27 practitioner.
- 28 (3) An outcome-focused, interdisciplinary approach designed
- 29 to return a person to living successfully in the community.
- 30 b. Subacute mental health services may include services
- 31 provided in a wide array of settings ranging from a person's
- 32 home to a specialized facility with restricted means of egress.
- 33 c. Subacute mental health services shall be limited to a
- 34 period not to exceed ten calendar days or another time period
- 35 determined in accordance with rules adopted by the department

- 1 for this purpose, whichever is longer. Section 142.1, Code 2024, is amended to read as 2 Sec. 26. 3 follows: 142.1 Delivery of bodies. 5 The body of every person dying who died in a public asylum, 6 hospital, county care facility, penitentiary, or reformatory 7 in this state, or found dead within the state, or which who 8 is to be buried at public expense in this state, except those 9 buried under the provisions of chapter 144C or 249, and which 10 is suitable for scientific purposes, shall be delivered to the 11 medical college of the state university, or some osteopathic 12 or chiropractic college or school located in this state, which 13 has been approved under the law regulating the practice of 14 osteopathic medicine or chiropractic; but no such body shall 15 be delivered to any such college or school if the deceased 16 person expressed a desire during the person's last illness 17 that the person's body should be buried or cremated, nor if 18 such is the desire of the person's relatives. Such bodies 19 shall be equitably distributed among said colleges and schools 20 according to their needs for teaching anatomy in accordance 21 with such rules as may be adopted by the department of health 22 and human services. The expense of transporting said bodies to 23 such college or school shall be paid by the college or school 24 receiving the same. If the deceased person has not expressed 25 a desire during the person's last illness that the person's 26 body should be buried or cremated and no person authorized to 27 control the deceased person's remains under section 144C.5 28 requests the person's body for burial or cremation, and if a 29 friend objects to the use of the deceased person's body for 30 scientific purposes, said deceased person's body shall be 31 forthwith delivered to such friend for burial or cremation at
- 35 Sec. 27. Section 142.3, Code 2024, is amended to read as

34 be used for scientific purposes under this chapter.

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32 no expense to the state or county. Unless such friend provides 33 for burial and burial expenses within five days, the body shall

- 1 follows:
- 2 142.3 Notification of department.
- 3 Every county medical examiner, funeral director or embalmer,
- 4 and the managing officer of every public asylum, hospital,
- 5 county care facility, penitentiary, or reformatory, as soon as
- 6 any dead body shall come into the person's custody which may be
- 7 used for scientific purposes as provided in sections 142.1 and
- 8 142.2, shall at once notify the nearest relative or friend of
- 9 the deceased, if known, and the department of health and human
- 10 services, and hold such body unburied for forty-eight hours.
- 11 Upon receipt of notification, the department shall issue verbal
- 12 or written instructions relative to the disposition to be made
- 13 of said body. Complete jurisdiction over said bodies is vested
- 14 exclusively in the department of health and human services. No
- 15 autopsy or post mortem, except as are legally ordered by county
- 16 medical examiners, shall be performed on any of said bodies
- 17 prior to their delivery to the medical schools.
- 18 Sec. 28. Section 218.30, Code 2024, is amended to read as
- 19 follows:
- 20 218.30 Investigation of other facilities.
- 21 The director may investigate or cause the investigation of
- 22 charges of abuse, neglect, or mismanagement on the part of an
- 23 officer or employee of a private facility which is subject to
- 24 the director's supervision or control. The director shall also
- 25 investigate or cause the investigation of charges concerning
- 26 county care facilities in which persons with mental illness are
- 27 served.
- 28 Sec. 29. Section 218.78, subsection 1, Code 2024, is amended
- 29 to read as follows:
- 30 1. All institutional receipts of the department, including
- 31 funds received from client participation at the state resource
- 32 centers under section 222.78 and at the state mental health
- 33 institutes under section 230.20, shall be deposited in the
- 34 general fund except for reimbursements for services provided
- 35 to another institution or state agency, for receipts deposited

- 1 in the revolving farm fund under section 904.706, for deposits
- 2 into the medical assistance fund under section 249A.11, and for
- 3 rentals charged to employees or others for room, apartment, or
- 4 house and meals, which shall be available to the institutions.
- 5 Sec. 30. Section 222.1, subsection 1, Code 2024, is amended
- 6 to read as follows:
- 7 l. This chapter addresses the public and private services
- 8 available in this state to meet the needs of persons with an
- 9 intellectual disability. The responsibility of the mental
- 10 health and disability services regions formed by counties and
- 11 of the state for the costs and administration of publicly
- 12 funded services shall be as set out in section 222.60 and other
- 13 pertinent sections of this chapter.
- 14 Sec. 31. Section 222.2, Code 2024, is amended by adding the
- 15 following new subsection:
- 16 NEW SUBSECTION. 01. "Administrative services organization"
- 17 means the same as defined in section 225A.1.
- 18 Sec. 32. Section 222.2, subsections 6 and 7, Code 2024, are
- 19 amended by striking the subsections.
- 20 Sec. 33. Section 222.12, subsection 2, Code 2024, is amended
- 21 by striking the subsection.
- Sec. 34. Section 222.13, Code 2024, is amended to read as
- 23 follows:
- 24 222.13 Voluntary admissions.
- 25 l. If an adult person is believed to be a person with an
- 26 intellectual disability, the adult person or the adult person's
- 27 guardian may apply to the department and the superintendent of
- 28 any state resource center for the voluntary admission of the
- 29 adult person either as an inpatient or an outpatient of the
- 30 resource center. If the expenses of the person's admission
- 31 or placement are payable in whole or in part by the person's
- 32 county of residence, application for the admission shall be
- 33 made through the regional administrator. An application for
- 34 admission to a special unit of any adult person believed to be
- 35 in need of any of the services provided by the special unit

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1 under section 222.88 may be made in the same manner. The
 2 superintendent shall accept the application if a preadmission
 3 diagnostic evaluation confirms or establishes the need for
 4 admission, except that an application shall not be accepted if
 5 the institution does not have adequate facilities available or
 6 if the acceptance will result in an overcrowded condition.
          If the resource center does not have an appropriate
 8 program for the treatment of an adult or minor person with an
 9 intellectual disability applying under this section or section
10 222.13A, the regional administrator for the person's county
11 of residence or the department, as applicable, shall arrange
12 for the placement of the person in any public or private
13 facility within or without outside of the state, approved by
14 the director, which offers appropriate services for the person.
15 If the expenses of the placement are payable in whole or in
16 part by a county, the placement shall be made by the regional
17 administrator for the county.
18
      3. If the expenses of an admission of an adult to a resource
19 center or a special unit, or of the placement of the person
20 in a public or private facility are payable in whole or in
21 part by a mental health and disability services region, the
22 regional administrator shall make a full investigation into
23 the financial circumstances of the person and those liable for
24 the person's support under section 222.78 to determine whether
25 or not any of them are able to pay the expenses arising out of
26 the admission of the person to a resource center, special unit,
27 or public or private facility. If the regional administrator
28 finds that the person or those legally responsible for
29 the person are presently unable to pay the expenses, the
30 regional administrator shall pay the expenses. The regional
31 administrator may review such a finding at any subsequent
32 time while the person remains at the resource center, or is
33 otherwise receiving care or treatment for which this chapter
34 obligates the region to pay. If the regional administrator
35 finds upon review that the person or those legally responsible
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- 1 for the person are presently able to pay the expenses, the
- 2 finding shall apply only to the charges incurred during the
- 3 period beginning on the date of the review and continuing
- 4 thereafter, unless and until the regional administrator again
- 5 changes such a finding. If the regional administrator finds
- 6 that the person or those legally responsible for the person
- 7 are able to pay the expenses, the regional administrator shall
- 8 collect the charges to the extent required by section 222.78,
- 9 and the regional administrator shall be responsible for the
- 10 payment of the remaining charges.
- 11 Sec. 35. Section 222.13A, subsections 3 and 4, Code 2024,
- 12 are amended to read as follows:
- 3. During the preadmission diagnostic evaluation, the
- 14 minor shall be informed both orally and in writing that the
- 15 minor has the right to object to the voluntary admission. If
- 16 Notwithstanding section 222.33, if the preadmission diagnostic
- 17 evaluation determines that the voluntary admission is
- 18 appropriate but the minor objects to the admission, the minor
- 19 shall not be admitted to the state resource center unless the
- 20 court approves of the admission. A petition for approval of
- 21 the minor's admission may be submitted to the juvenile court by
- 22 the minor's parent, guardian, or custodian.
- 23 4. As soon as practicable after the filing of a petition for
- 24 approval of the voluntary admission, the court shall determine
- 25 whether the minor has an attorney to represent the minor in the
- 26 proceeding. If the minor does not have an attorney, the court
- 27 shall assign to the minor an attorney. If the minor is unable
- 28 to pay for an attorney, the attorney shall be compensated by
- 29 the mental health and disability services region applicable
- 30 administrative services organization at an hourly rate to be
- 31 established by the regional administrator in substantially the
- 32 same manner as provided in section 815.7.
- 33 Sec. 36. Section 222.14, Code 2024, is amended to read as
- 34 follows:
- 35 222.14 Care by region pending admission.

- 1 If the institution is unable to receive a patient, the
- 2 superintendent shall notify the regional administrator for
- 3 the county of residence of the prospective patient applicable
- 4 administrative services organization. Until such time as the
- 5 patient is able to be received by the institution, or when
- 6 application has been made for admission to a public or private
- 7 facility as provided in section 222.13 and the application
- 8 is pending, the care of the patient shall be provided as
- 9 arranged by the regional administrator administrative services
- 10 organization.
- 11 Sec. 37. NEW SECTION. 222.33 State resource center and
- 12 special units admissions and discharge.
- 13 1. The department shall make all final determinations
- 14 concerning whether a person may be admitted to a state resource
- 15 center or to a special unit.
- 16 2. If a patient is admitted to a state resource center or a
- 17 special unit pursuant to section 222.13, or a state resource
- 18 center pursuant to section 222.13A, and the patient wishes to
- 19 be placed outside of the state resource center or the special
- 20 unit, the discharge of the patient shall be made in accordance
- 21 with section 222.15.
- 22 Sec. 38. NEW SECTION. 222.35 State payor of last resort.
- 23 The department shall implement services and adopt rules
- 24 pursuant to this chapter in a manner that ensures that the
- 25 state is the payor of last resort, and that the department
- 26 shall not make any payments for services that have been
- 27 provided until the department has determined that the services
- 28 provided are not payable by a third-party source.
- 29 Sec. 39. Section 222.73, subsections 2 and 4, Code 2024, are
- 30 amended by striking the subsections.
- 31 Sec. 40. Section 222.77, Code 2024, is amended to read as
- 32 follows:
- 33 222.77 Patients on leave.
- 34 The cost of support of patients placed on convalescent leave
- 35 or removed as a habilitation measure from a resource center,

- 1 or a special unit, except when living in the home of a person
- 2 legally bound for the support of the patient, shall be paid by
- 3 the county of residence or the state as provided in section
- 4 222.60.
- 5 Sec. 41. Section 222.78, subsection 1, Code 2024, is amended
- 6 to read as follows:
- 7 l. The father and mother of any patient admitted to a
- 8 resource center or to a special unit, as either an inpatient
- 9 or an outpatient, and any person, firm, or corporation bound
- 10 by contract made for support of the patient are liable for the
- 11 support of the patient. The patient and those legally bound
- 12 for the support of the patient shall be liable to the county
- 13 or state, as applicable, for all sums advanced in accordance
- 14 with the provisions of sections 222.60 and 222.77 relating to
- 15 reasonable attorney fees and court costs for the patient's
- 16 admission to the resource center or special unit, and for the
- 17 treatment, training, instruction, care, habilitation, support,
- 18 transportation, or other expenditures made on behalf of the
- 19 patient pursuant to this chapter.
- 20 Sec. 42. Section 222.79, Code 2024, is amended to read as
- 21 follows:
- 22 222.79 Certification statement presumed correct.
- 23 In actions to enforce the liability imposed by section
- 24 222.78, the superintendent or the county of residence, as
- 25 applicable, shall submit a certification statement stating
- 26 the sums charged, and the certification statement shall be
- 27 considered presumptively correct.
- 28 Sec. 43. Section 222.80, Code 2024, is amended to read as
- 29 follows:
- 30 222.80 Liability to county or state.
- 31 A person admitted to a county institution or home or admitted
- 32 at county or state expense to a private hospital, sanitarium,
- 33 or other facility for treatment, training, instruction, care,
- 34 habilitation, and support as a patient with an intellectual
- 35 disability shall be liable to the county or state, as

- 1 applicable, for the reasonable cost of the support as provided
- 2 in section 222.78.
- 3 Sec. 44. Section 222.82, Code 2024, is amended to read as
- 4 follows:
- 5 222.82 Collection of liabilities and claims.
- 6 If liabilities and claims exist as provided in section
- 7 222.78 or any other provision of this chapter, the county of
- 8 residence or the state, as applicable, may proceed as provided
- 9 in this section. If the liabilities and claims are owed to
- 10 a county of residence, the county's board of supervisors may
- 11 direct the county attorney to proceed with the collection of
- 12 the liabilities and claims as a part of the duties of the
- 13 county attorney's office when the board of supervisors deems
- 14 such action advisable. If the liabilities and claims are owed
- 15 to the state, the state shall proceed with the collection.
- 16 The board of supervisors or the state, as applicable, may
- 17 compromise any and all liabilities to the county or state
- 18 arising under this chapter when such compromise is deemed to be
- 19 in the best interests of the county or state. Any collections
- 20 and liens shall be limited in conformance to section 614.1,
- 21 subsection 4.
- 22 Sec. 45. Section 222.85, subsection 2, Code 2024, is amended
- 23 to read as follows:
- 24 2. Moneys paid to a resource center from any source other
- 25 than state appropriated funds and intended to pay all or a
- 26 portion of the cost of care of a patient, which cost would
- 27 otherwise be paid from state or county funds or from the
- 28 patient's own funds, shall not be deemed "funds belonging to a
- 29 patient" for the purposes of this section.
- 30 Sec. 46. Section 222.86, Code 2024, is amended to read as
- 31 follows:
- 32 222.86 Payment for care from fund.
- 33 If a patient is not receiving medical assistance under
- 34 chapter 249A and the amount in the account of any patient
- 35 in the patients' personal deposit fund exceeds two hundred

- 1 dollars, the department may apply any amount of the excess to
- 2 reimburse the county of residence or the state for liability
- 3 incurred by the county or the state for the payment of care,
- 4 support, and maintenance of the patient, when billed by the
- 5 county or state, as applicable.
- 6 Sec. 47. Section 222.92, subsection 1, Code 2024, is amended
- 7 to read as follows:
- 8 1. The department shall operate the state resource centers
- 9 on the basis of net appropriations from the general fund of
- 10 the state. The appropriation amounts shall be the net amounts
- 11 of state moneys projected to be needed for the state resource
- 12 centers for the fiscal year of the appropriations. The purpose
- 13 of utilizing net appropriations is to encourage the state
- 14 resource centers to operate with increased self-sufficiency, to
- 15 improve quality and efficiency, and to support collaborative
- 16 efforts between the state resource centers and counties and
- 17 other providers of funding for the services available from
- 18 the state resource centers. The state resource centers shall
- 19 not be operated under the net appropriations in a manner that
- 20 results in a cost increase to the state or in cost shifting
- 21 between the state, the medical assistance program, counties, or
- 22 other sources of funding for the state resource centers.
- 23 Sec. 48. Section 222.92, subsection 3, paragraph a, Code
- 24 2024, is amended by striking the paragraph.
- Sec. 49. Section 225.1, subsection 2, Code 2024, is amended
- 26 to read as follows:
- 27 2. For the purposes of this chapter, unless the context
- 28 otherwise requires:
- 29 a. "Mental health and disability services region" means
- 30 a mental health and disability services region approved in
- 31 accordance with section 225C.56. "Administrative services
- 32 organization" means the same as defined in section 225A.1.
- 33 b. "Regional administrator" means the administrator of a
- 34 mental health and disability services region, as defined in
- 35 section 225C.55. "Department" means the department of health

- 1 and human services.
- 2 c. "Respondent" means the same as defined in section 229.1.
- 3 Sec. 50. <u>NEW SECTION</u>. **225.4** State psychiatric hospital 4 admissions.
- 5 The department shall make all final determinations
- 6 concerning whether a person may be admitted to the state
- 7 psychiatric hospital.
- 8 Sec. 51. Section 225.11, Code 2024, is amended to read as
- 9 follows:
- 10 225.11 Initiating commitment procedures.
- 11 When a court finds upon completion of a hearing held pursuant
- 12 to section 229.12 that the contention that a respondent is
- 13 seriously mentally impaired has been sustained by clear and
- 14 convincing evidence, and the application filed under section
- 15 229.6 also contends or the court otherwise concludes that it
- 16 would be appropriate to refer the respondent to the state
- 17 psychiatric hospital for a complete psychiatric evaluation and
- 18 appropriate treatment pursuant to section 229.13, the judge
- 19 may order that a financial investigation be made in the manner
- 20 prescribed by section 225.13. If the costs of a respondent's
- 21 evaluation or treatment are payable in whole or in part by
- 22 a county an administrative services organization, an order
- 23 under this section shall be for referral of the respondent
- 24 through the regional administrator for the respondent's county
- 25 of residence administrative services organization for an
- 26 evaluation and referral of the respondent to an appropriate
- 27 placement or service, which may include the state psychiatric
- 28 hospital for additional evaluation or treatment.
- Sec. 52. Section 225.12, Code 2024, is amended to read as
- 30 follows:
- 31 225.12 Voluntary public patient physician's or physician
- 32 assistant's report.
- 33 A physician or a physician assistant who meets the
- 34 qualifications set forth in the definition of a mental health
- 35 professional in section 228.1 filing information under

- 1 section 225.10 shall include a written report to the regional
- 2 administrator for the county of residence of the person named
- 3 in the information, giving shall submit a detailed history of
- 4 the case to the applicable administrative services organization
- 5 as will be likely to aid in the observation, treatment, and
- 6 hospital care of the person and describing the history in
- 7 detail.
- 8 Sec. 53. Section 225.13, Code 2024, is amended to read as
- 9 follows:
- 10 225.13 Financial condition.
- 11 The regional administrator for the county of residence
- 12 applicable administrative services organization of a person
- 13 being admitted to the state psychiatric hospital is responsible
- 14 for investigating the financial condition of the person and of
- 15 those legally responsible for the person's support.
- 16 Sec. 54. Section 225.15, Code 2024, is amended to read as
- 17 follows:
- 18 225.15 Examination and treatment.
- 19 1. When a respondent arrives at the state psychiatric
- 20 hospital, the admitting physician, or a physician assistant
- 21 who meets the qualifications set forth in the definition of a
- 22 mental health professional in section 228.1, shall examine the
- 23 respondent and determine whether or not, in the physician's
- 24 or physician assistant's judgment, the respondent is a fit
- 25 subject for observation, treatment, and hospital care. If,
- 26 upon examination, the physician or physician assistant who
- 27 meets the qualifications set forth in the definition of a
- 28 mental health professional in section 228.1 decides that the
- 29 respondent should be admitted to the hospital, the respondent
- 30 shall be provided a proper bed in the hospital. The physician
- 31 or physician assistant who meets the qualifications set forth
- 32 in the definition of a mental health professional in section
- 33 228.1 who has charge of the respondent shall proceed with
- 34 observation, medical treatment, and hospital care as in the
- 35 physician's or physician assistant's judgment are proper and

1 necessary, in compliance with sections 229.13, 229.14, this 2 section, and section 229.16. After the respondent's admission, 3 the observation, medical treatment, and hospital care of the 4 respondent may be provided by a mental health professional, 5 as defined in section 228.1, who is licensed as a physician, 6 advanced registered nurse practitioner, or physician assistant. 2. A proper and competent nurse shall also be assigned to 8 look after and care for the respondent during observation, 9 treatment, and care. Observation, treatment, and hospital 10 care under this section which are payable in whole or in part 11 by a county shall only be provided as determined through 12 the regional administrator for the respondent's county of 13 residence. 14 Section 225.16, subsection 1, Code 2024, is amended Sec. 55. 15 to read as follows: 16 If the regional administrator for a person's county of 17 residence department finds from the physician's information 18 or from the information of a physician assistant who 19 meets the qualifications set forth in the definition of 20 a mental health professional in section 228.1 which was 21 filed under the provisions of section 225.10 225.12 that it 22 would be appropriate for the person to be admitted to the 23 state psychiatric hospital, and the report of the regional 24 administrator made pursuant to section 225.13 shows the 25 department finds that the person and those who are legally 26 responsible for the person are not able to pay the expenses 27 incurred at the hospital, or are able to pay only a part of 28 the expenses, the person shall be considered to be a voluntary 29 public patient and the regional administrator shall direct that 30 the person shall be sent to the state psychiatric hospital at 31 the state university of Iowa for observation, treatment, and 32 hospital care. 33 Sec. 56. Section 225.17, subsection 2, Code 2024, is amended

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2. When the respondent arrives at the hospital, the

34 to read as follows:

35

- 1 respondent shall receive the same treatment as is provided for
- 2 committed public patients in section 225.15, in compliance
- 3 with sections 229.13 through 229.16. However, observation,
- 4 treatment, and hospital care under this section of a respondent
- 5 whose expenses are payable in whole or in part by a county
- 6 shall only be provided as determined through the regional
- 7 administrator for the respondent's county of residence.
- 8 Sec. 57. Section 225.18, Code 2024, is amended to read as
- 9 follows:
- 10 225.18 Attendants.
- 11 The regional administrator An administrative services
- 12 organization may appoint an attendant to accompany the
- 13 committed public patient or the voluntary public patient
- 14 or the committed private patient from the place where the
- 15 patient may be to the state psychiatric hospital, or to
- 16 accompany the patient from the hospital to a place as may
- 17 be designated by the regional administrator administrative
- 18 services organization. If a patient is moved pursuant to this
- 19 section, at least one attendant shall be of the same gender as
- 20 the patient.
- 21 Sec. 58. Section 225.22, Code 2024, is amended to read as
- 22 follows:
- 23 225.22 Liability of private patients payment.
- 24 Every committed private patient, if the patient has an
- 25 estate sufficient for that purpose, or if those legally
- 26 responsible for the patient's support are financially able,
- 27 shall be liable to the county and state for all expenses paid
- 28 by them in the state on behalf of such patient. All bills
- 29 for the care, nursing, observation, treatment, medicine, and
- 30 maintenance of such patients shall be paid by the director of
- 31 the department of administrative services in the same manner as
- 32 those of committed and voluntary public patients as provided in
- 33 this chapter, unless the patient or those legally responsible
- 34 for the patient make such settlement with the state psychiatric
- 35 hospital.

- 1 Sec. 59. Section 225.24, Code 2024, is amended to read as 2 follows:
- 3 225.24 Collection of preliminary expense.
- 4 Unless a committed private patient or those legally
- 5 responsible for the patient's support offer to settle the
- 6 amount of the claims, the regional administrator for the
- 7 person's county of residence department shall collect, by
- 8 action if necessary, the amount of all claims for per diem and
- 9 expenses that have been approved by the regional administrator
- 10 for the county an administrative services organization and
- 11 paid by the regional administrator as provided under section
- 12 225.21 administrative services organization. Any amount
- 13 collected shall be credited to the mental health and disability
- 14 services region combined account created behavioral health fund
- 15 established in accordance with section 225C.58 225A.7.
- Sec. 60. Section 225.27, Code 2024, is amended to read as
- 17 follows:
- 18 225.27 Discharge transfer.
- 19 The state psychiatric hospital may, at any time, discharge
- 20 any patient as recovered, as improved, or as not likely to
- 21 be benefited by further treatment. If the patient being so
- 22 discharged was involuntarily hospitalized, the hospital shall
- 23 notify the committing judge or court of the discharge as
- 24 required by section 229.14 or section 229.16, whichever is as
- 25 applicable, and the applicable regional administrator. Upon
- 26 receiving the notification, the court shall issue an order
- 27 confirming the patient's discharge from the hospital or from
- 28 care and custody, as the case may be, and shall terminate the
- 29 proceedings pursuant to which the order was issued. The court
- 30 or judge shall, if necessary, appoint a person to accompany the
- 31 discharged patient from the state psychiatric hospital to such
- 32 place as the hospital or the court may designate, or authorize
- 33 the hospital to appoint such attendant.
- 34 Sec. 61. Section 226.1, subsection 4, Code 2024, is amended
- 35 by adding the following new paragraph:

- 1 NEW PARAGRAPH. Oa. "Administrative services organization"
- 2 means the same as defined in section 225A.1.
- 3 Sec. 62. Section 226.1, subsection 4, paragraphs d and f,
- 4 Code 2024, are amended by striking the paragraphs.
- 5 Sec. 63. Section 226.8, subsection 2, Code 2024, is amended
- 6 to read as follows:
- 7 2. Charges for the care of any person with a diagnosis of
- 8 an intellectual disability admitted to a state mental health
- 9 institute shall be made by the institute in the manner provided
- 10 by chapter 230, but the liability of any other person to any
- 11 mental health and disability services region the state for the
- 12 cost of care of such person with a diagnosis of an intellectual
- 13 disability shall be as prescribed by section 222.78.
- Sec. 64. Section 226.32, Code 2024, is amended to read as
- 15 follows:
- 16 226.32 Overcrowded conditions.
- 17 The director shall order the discharge or removal from the
- 18 mental health institute of incurable and harmless patients
- 19 whenever it is necessary to make room for recent cases. If
- 20 a patient who is to be discharged entered the mental health
- 21 institute voluntarily, the director shall notify the regional
- 22 administrator for the county interested at least ten days in
- 23 advance of the day of actual discharge.
- 24 Sec. 65. Section 226.34, subsection 2, paragraph d, Code
- 25 2024, is amended to read as follows:
- 26 d. The regional administrator for the county from which
- 27 the patient was committed applicable administrative services
- 28 organization.
- Sec. 66. Section 228.6, subsection 1, Code 2024, is amended
- 30 to read as follows:
- 31 1. A mental health professional or an employee of or
- 32 agent for a mental health facility may disclose mental health
- 33 information if and to the extent necessary, to meet the
- 34 requirements of section 229.24, 229.25, 230.20, 230.21, 230.25,
- 35 230.26, 230A.108, 232.74, or 232.147, or to meet the compulsory

- 1 reporting or disclosure requirements of other state or federal
- 2 law relating to the protection of human health and safety.
- 3 Sec. 67. Section 229.1, Code 2024, is amended by adding the
- 4 following new subsection:
- 5 NEW SUBSECTION. 01. "Administrative services organization"
- 6 means the same as defined in section 225A.1.
- 7 Sec. 68. Section 229.1, subsections 11, 18, and 19, Code
- 8 2024, are amended by striking the subsections.
- 9 Sec. 69. Section 229.1B, Code 2024, is amended to read as
- 10 follows:
- 11 229.1B Regional administrator Administrative services
- 12 organization.
- 13 Notwithstanding any provision of this chapter to the
- 14 contrary, any person whose hospitalization expenses are
- 15 payable in whole or in part by a mental health and disability
- 16 services region an administrative services organization
- 17 shall be subject to all administrative requirements of the
- 18 regional administrator for the county administrative services
- 19 organization.
- Sec. 70. Section 229.2, subsection 1, paragraph b,
- 21 subparagraph (3), Code 2024, is amended to read as follows:
- 22 (3) As soon as is practicable after the filing of a
- 23 petition for juvenile court approval of the admission of the
- 24 minor, the juvenile court shall determine whether the minor
- 25 has an attorney to represent the minor in the hospitalization
- 26 proceeding, and if not, the court shall assign to the minor
- 27 an attorney. If the minor is financially unable to pay for
- 28 an attorney, the attorney shall be compensated by the mental
- 29 health and disability services region administrative services
- 30 organization responsible for the minor's behavioral health
- 31 care at an hourly rate to be established by the regional
- 32 administrator for the county in which the proceeding is held
- 33 administrative services organization in substantially the same
- 34 manner as provided in section 815.7.
- 35 Sec. 71. Section 229.2, subsection 2, paragraph a, Code

- 1 2024, is amended to read as follows:
- 2 a. The chief medical officer of a public hospital shall
- 3 receive and may admit the person whose admission is sought,
- 4 subject in cases other than medical emergencies to availability
- 5 of suitable accommodations and to the provisions of sections
- 6 section 229.41 and 229.42.
- 7 Sec. 72. Section 229.8, subsection 1, Code 2024, is amended
- 8 to read as follows:
- 9 1. Determine whether the respondent has an attorney
- 10 who is able and willing to represent the respondent in the
- 11 hospitalization proceeding, and if not, whether the respondent
- 12 is financially able to employ an attorney and capable of
- 13 meaningfully assisting in selecting one. In accordance with
- 14 those determinations, the court shall if necessary allow the
- 15 respondent to select, or shall assign to the respondent, an
- 16 attorney. If the respondent is financially unable to pay an
- 17 attorney, the attorney shall be compensated by the mental
- 18 health and disability services region administrative services
- 19 organization responsible for the respondent's behavioral health
- 20 care at an hourly rate to be established by the regional
- 21 administrator for the county in which the proceeding is held
- 22 administrative services organization in substantially the same
- 23 manner as provided in section 815.7.
- Sec. 73. Section 229.10, subsection 1, paragraph a, Code
- 25 2024, is amended to read as follows:
- 26 a. An examination of the respondent shall be conducted by
- 27 one or more licensed physicians or mental health professionals,
- 28 as required by the court's order, within a reasonable time.
- 29 If the respondent is detained pursuant to section 229.11,
- 30 subsection 1, paragraph "b", the examination shall be conducted
- 31 within twenty-four hours. If the respondent is detained
- 32 pursuant to section 229.11, subsection 1, paragraph "a" or
- 33 "c'', the examination shall be conducted within forty-eight
- 34 hours. If the respondent so desires, the respondent shall be
- 35 entitled to a separate examination by a licensed physician or

1 mental health professional of the respondent's own choice.

2 reasonable cost of the examinations shall, if the respondent 3 lacks sufficient funds to pay the cost, be paid by the regional 4 administrator from mental health and disability services region 5 funds an administrative services organization upon order of the 6 court. Section 229.11, subsection 1, unnumbered paragraph Sec. 74. 8 1, Code 2024, is amended to read as follows: If the applicant requests that the respondent be taken into 10 immediate custody and the judge, upon reviewing the application 11 and accompanying documentation, finds probable cause to believe 12 that the respondent has a serious mental impairment and is 13 likely to injure the respondent or other persons if allowed 14 to remain at liberty, the judge may enter a written order 15 directing that the respondent be taken into immediate custody 16 by the sheriff or the sheriff's deputy and be detained until 17 the hospitalization hearing. The hospitalization hearing shall 18 be held no more than five days after the date of the order, 19 except that if the fifth day after the date of the order is 20 a Saturday, Sunday, or a holiday, the hearing may be held 21 on the next succeeding business day. If the expenses of a 22 respondent are payable in whole or in part by a mental health 23 and disability services region an administrative services 24 organization, for a placement in accordance with paragraph "a", 25 the judge shall give notice of the placement to the regional 26 administrator for the county in which the court is located 27 applicable administrative services organization, and for a 28 placement in accordance with paragraph "b'' or "c'', the judge 29 shall order the placement in a hospital or facility designated 30 through by the regional administrator applicable administrative 31 services organization. The judge may order the respondent 32 detained for the period of time until the hearing is held, 33 and no longer, in accordance with paragraph "a", if possible, 34 and if not then in accordance with paragraph b'', or, only if 35 neither of these alternatives is available, in accordance with

- 1 paragraph c. Detention may be in any of the following:
- 2 Sec. 75. Section 229.13, subsection 1, paragraph a, Code
- 3 2024, is amended to read as follows:
- 4 a. The court shall order a respondent whose expenses are
- 5 payable in whole or in part by a mental health and disability
- 6 services region an administrative services organization
- 7 placed under the care of an appropriate hospital or facility
- 8 designated through by the regional administrator for the
- 9 county administrative services organization on an inpatient or
- 10 outpatient basis.
- 11 Sec. 76. Section 229.13, subsection 7, paragraph b, Code
- 12 2024, is amended to read as follows:
- 13 b. A region An administrative services organization shall
- 14 contract with mental health professionals to provide the
- 15 appropriate treatment including treatment by the use of oral
- 16 medicine or injectable antipsychotic medicine pursuant to this
- 17 section.
- 18 Sec. 77. Section 229.14, subsection 2, paragraph a, Code
- 19 2024, is amended to read as follows:
- 20 a. For a respondent whose expenses are payable in whole
- 21 or in part by a mental health and disability services
- 22 region an administrative services organization, placement
- 23 as designated through the regional administrator for the
- 24 county administrative services organization in the care of an
- 25 appropriate hospital or facility on an inpatient or outpatient
- 26 basis, or other appropriate treatment, or in an appropriate
- 27 alternative placement.
- 28 Sec. 78. Section 229.14A, subsections 7 and 9, Code 2024,
- 29 are amended to read as follows:
- 30 7. If a respondent's expenses are payable in whole or in
- 31 part by a mental health and disability services region through
- 32 the regional administrator for the county an administrative
- 33 services organization, notice of a placement hearing shall be
- 34 provided to the county attorney and the regional administrator
- 35 administrative services organization. At the hearing, the

- 1 county may present evidence regarding appropriate placement.
- 9. A placement made pursuant to an order entered under
- 3 section 229.13 or 229.14 or this section shall be considered to
- 4 be authorized through the regional administrator for the county
- 5 applicable administrative services organization.
- 6 Sec. 79. Section 229.15, subsection 4, Code 2024, is amended
- 7 to read as follows:
- 8 4. When a patient has been placed in an alternative facility
- 9 other than a hospital pursuant to a report issued under section
- 10 229.14, subsection 1, paragraph "d", a report on the patient's
- 11 condition and prognosis shall be made to the court which placed
- 12 the patient, at least once every six months, unless the court
- 13 authorizes annual reports. If an evaluation of the patient is
- 14 performed pursuant to section 227.2, subsection 4, a copy of
- 15 the evaluation report shall be submitted to the court within
- 16 fifteen days of the evaluation's completion. The court may in
- 17 its discretion waive the requirement of an additional report
- 18 between the annual evaluations. If the department exercises
- 19 the authority to remove residents or patients from a county
- 20 care facility or other county or private facility under section
- 21 227.6, the department shall promptly notify each court which
- 22 placed in that facility any resident or patient removed.
- 23 Sec. 80. Section 229.19, subsection 1, paragraphs a and b,
- 24 Code 2024, are amended to read as follows:
- 25 a. In each county the board of supervisors shall appoint
- 26 an individual who has demonstrated by prior activities an
- 27 informed concern for the welfare and rehabilitation of persons
- 28 with mental illness, and who is not an officer or employee of
- 29 the department, an officer or employee of a region, an officer
- 30 or employee of a county performing duties for a region, or
- 31 an officer or employee of any agency or facility providing
- 32 care or treatment to persons with mental illness, to act as an
- 33 advocate representing the interests of patients involuntarily
- 34 hospitalized by the court, in any matter relating to the
- 35 patients' hospitalization or treatment under section 229.14 or

1 229.15.

- 2 b. The committing court shall assign the advocate for the
- 3 county where the patient is located. A county or region may
- 4 seek reimbursement from the patient's county of residence or
- 5 from the region in which the patient's county of residence is
- 6 located applicable administrative services organization.
- 7 Sec. 81. Section 229.19, subsection 4, unnumbered paragraph
- 8 1, Code 2024, is amended to read as follows:
- 9 The state mental health and disability services commission
- 10 council on health and human services created in section 225C.5
- 11 217.2, in consultation with advocates and county and judicial
- 12 branch representatives, shall adopt rules pursuant to chapter
- 13 17A relating to advocates that include but are not limited to
- 14 all of the following topics:
- 15 Sec. 82. Section 229.22, subsection 2, paragraph b, Code
- 16 2024, is amended to read as follows:
- 17 b. If the magistrate orders that the person be detained,
- 18 the magistrate shall, by the close of business on the next
- 19 working day, file a written order with the clerk in the county
- 20 where it is anticipated that an application may be filed
- 21 under section 229.6. The order may be filed by facsimile if
- 22 necessary. A peace officer from the law enforcement agency
- 23 that took the person into custody, if no request was made
- 24 under paragraph "a", may inform the magistrate that an arrest
- 25 warrant has been issued for or charges are pending against the
- 26 person and request that any written order issued under this
- 27 paragraph require the facility or hospital to notify the law
- 28 enforcement agency about the discharge of the person prior to
- 29 discharge. The order shall state the circumstances under which
- 30 the person was taken into custody or otherwise brought to a
- 31 facility or hospital, and the grounds supporting the finding
- 32 of probable cause to believe that the person is seriously
- 33 mentally impaired and likely to injure the person's self or
- 34 others if not immediately detained. The order shall also
- 35 include any law enforcement agency notification requirements if

1 applicable. The order shall confirm the oral order authorizing 2 the person's detention including any order given to transport 3 the person to an appropriate facility or hospital. A peace 4 officer from the law enforcement agency that took the person 5 into custody may also request an order, separate from the 6 written order, requiring the facility or hospital to notify the 7 law enforcement agency about the discharge of the person prior 8 to discharge. The clerk shall provide a copy of the written 9 order or any separate order to the chief medical officer of 10 the facility or hospital to which the person was originally 11 taken, to any subsequent facility to which the person was 12 transported, and to any law enforcement department, ambulance 13 service, or transportation service under contract with a 14 mental health and disability services region an administrative 15 services organization that transported the person pursuant 16 to the magistrate's order. A transportation service that 17 contracts with a mental health and disability services region 18 an administrative services organization for purposes of this 19 paragraph shall provide a secure transportation vehicle and 20 shall employ staff that has received or is receiving mental 21 health training. 22 Sec. 83. Section 229.24, subsection 3, unnumbered paragraph 23 1, Code 2024, is amended to read as follows: 24 If all or part of the costs associated with hospitalization 25 of an individual under this chapter are chargeable to a county 26 of residence an administrative services organization, the 27 clerk of the district court shall provide to the regional 28 administrator for the county of residence and to the regional 29 administrator for the county in which the hospitalization 30 order is entered administrative services organization the 31 following information pertaining to the individual which would 32 be confidential under subsection 1: 33 Sec. 84. Section 229.38, Code 2024, is amended to read as

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229.38 Cruelty or official misconduct.

34 follows:

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- 1 If any person having the care of a person with mental illness
- 2 who has voluntarily entered a hospital or other facility for
- 3 treatment or care, or who is responsible for psychiatric
- 4 examination care, treatment, and maintenance of any person
- 5 involuntarily hospitalized under sections 229.6 through 229.15,
- 6 whether in a hospital or elsewhere, with or without proper
- 7 authority, shall treat such patient with unnecessary severity,
- 8 harshness, or cruelty, or in any way abuse the patient or if
- 9 any person unlawfully detains or deprives of liberty any person
- 10 with mental illness or any person who is alleged to have mental
- 11 illness, or if any officer required by the provisions of this
- 12 chapter and chapters chapter 226 and 227, to perform any act
- 13 shall willfully refuse or neglect to perform the same, the
- 14 offending person shall, unless otherwise provided, be guilty of
- 15 a serious misdemeanor.
- 16 Sec. 85. Section 230.1, Code 2024, is amended by adding the
- 17 following new subsection:
- 18 NEW SUBSECTION. 01. "Administrative service organization"
- 19 means the same as defined in section 225A.1.
- 20 Sec. 86. Section 230.1, subsections 4 and 5, Code 2024, are
- 21 amended by striking the subsections.
- Sec. 87. Section 230.10, Code 2024, is amended to read as
- 23 follows:
- 24 230.10 Payment of costs.
- 25 All legal costs and expenses for the taking into custody,
- 26 care, investigation, and admission or commitment of a person to
- 27 a state mental health institute under a finding that the person
- 28 has residency in another county of this state shall be charged
- 29 against to the regional administrator of the person's county of
- 30 residence applicable administrative services organization.
- 31 Sec. 88. Section 230.11, Code 2024, is amended to read as
- 32 follows:
- 33 230.11 Recovery of costs from state.
- 34 Costs and expenses for the taking into custody, care, and
- 35 investigation of a person who has been admitted or committed

- 1 to a state mental health institute, United States department
 2 of veterans affairs hospital, or other agency of the United
 3 States government, for persons with mental illness and
- 4 who has no residence in this state or whose residence is
- 5 unknown, including cost of commitment, if any, shall be paid
- 6 as approved by the department. The amount of the costs and
- 7 expenses approved by the department is appropriated to the
- 8 department from any moneys in the state treasury not otherwise
- 9 appropriated. Payment shall be made by the department on
- 10 itemized vouchers executed by the regional administrator of
- 11 the person's county which has paid them, and approved by the
- 12 department.
- 13 Sec. 89. Section 230.15, subsections 1 and 2, Code 2024, are 14 amended to read as follows:
- 1. A person with mental illness and a person legally liable
- 16 for the person's support remain liable for the support of
- 17 the person with mental illness as provided in this section.
- 18 Persons legally liable for the support of a person with mental
- 19 illness include the spouse of the person, and any person
- 20 bound by contract for support of the person. The regional
- 21 administrator of the person's county of residence, subject to
- 22 the direction of the region's governing board, shall enforce
- 23 the obligation created in this section as to all sums advanced
- 24 by the regional administrator. The liability to the regional
- 25 administrator incurred by a person with mental illness or a
- 26 person legally liable for the person's support under this
- 27 section is limited to an amount equal to one hundred percent
- 28 of the cost of care and treatment of the person with mental
- 29 illness at a state mental health institute for one hundred
- 30 twenty days of hospitalization. This limit of liability may
- 31 be reached by payment of the cost of care and treatment of the
- 32 person with mental illness subsequent to a single admission
- 33 or multiple admissions to a state mental health institute or,
- 34 if the person is not discharged as cured, subsequent to a
- 35 single transfer or multiple transfers to a county care facility

1 pursuant to section 227.11. After reaching this limit of 2 liability, a person with mental illness or a person legally 3 liable for the person's support is liable to the regional 4 administrator state for the care and treatment of the person 5 with mental illness at a state mental health institute or, 6 if transferred but not discharged as cured, at a county care 7 facility in an amount not in excess of to exceed the average 8 minimum cost of the maintenance of an individual who is 9 physically and mentally healthy residing in the individual's 10 own home, which standard shall be as established and may be 11 revised by the department by rule. A lien imposed by section 12 230.25 shall not exceed the amount of the liability which may 13 be incurred under this section on account of a person with 14 mental illness. 15 2. A person with a substance use disorder is legally 16 liable for the total amount of the cost of providing care, 17 maintenance, and treatment for the person with a substance 18 use disorder while a voluntary or committed patient. When 19 a portion of the cost is paid by a county an administrative 20 services organization, the person with a substance use disorder 21 is legally liable to the county administrative services 22 organization for the amount paid. The person with a substance 23 use disorder shall assign any claim for reimbursement under any 24 contract of indemnity, by insurance or otherwise, providing 25 for the person's care, maintenance, and treatment in a state 26 mental health institute to the state. Any payments received 27 by the state from or on behalf of a person with a substance use 28 disorder shall be in part credited to the county in proportion 29 to the share of the costs paid by the county. 30 230.23 State — payor of last resort. Sec. 90. NEW SECTION. 31 The department shall implement services and adopt rules 32 pursuant to this chapter in a manner that ensures that the 33 state is the payor of last resort, and that the department 34 shall not make any payments for services that have been 35 provided until the department has determined that the services

- 1 provided are not payable by a third-party source. 2 Sec. 91. Section 230.30, Code 2024, is amended to read as 3 follows: 230.30 Claim against estate. On the death of a person receiving or who has received
- 6 assistance under the provisions of this chapter, and whom the 7 board department has previously found, under section 230.25, 8 is able to pay, there shall be allowed against the estate of 9 such decedent a claim of the sixth class for that portion of 10 the total amount paid for that person's care which exceeds 11 the total amount of all claims of the first through the fifth
- 12 classes, inclusive, as defined in section 633.425, which are 13 allowed against that estate.
- Sec. 92. Section 232.78, subsection 5, unnumbered paragraph 14 15 1, Code 2024, is amended to read as follows:
- 16 The juvenile court, before or after the filing of a petition 17 under this chapter, may enter an ex parte order authorizing 18 a physician or physician assistant or hospital to conduct an 19 outpatient physical examination or authorizing a physician or
- 20 physician assistant, or a psychologist certified under section 21 154B.7, or a community mental health center accredited pursuant
- 22 to chapter 230A to conduct an outpatient mental examination
- 23 of a child if necessary to identify the nature, extent, and
- 24 cause of injuries to the child as required by section 232.71B,
- 25 provided all of the following apply:
- Sec. 93. Section 232.83, subsection 2, unnumbered paragraph
- 27 1, Code 2024, is amended to read as follows:
- Anyone authorized to conduct a preliminary investigation in 29 response to a complaint may apply for, or the court on its own
- 30 motion may enter, an ex parte order authorizing a physician
- 31 or physician assistant or hospital to conduct an outpatient
- 32 physical examination or authorizing a physician or physician
- 33 assistant, or a psychologist certified under section 154B.7, or
- 34 a community mental health center accredited pursuant to chapter
- 35 230A to conduct an outpatient mental examination of a child if

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1 necessary to identify the nature, extent, and causes of any 2 injuries, emotional damage, or other such needs of a child as 3 specified in section 232.96A, subsection 3, 5, or 6, provided 4 that all of the following apply: 5 Sec. 94. Section 232.141, subsections 7 and 8, Code 2024, 6 are amended to read as follows: 7. A county charged with the costs and expenses under 8 subsections 2 and 3 may recover the costs and expenses from 9 the child's custodial parent's county of residence, as defined 10 in section 225C.61 35D.9, by filing verified claims which are 11 payable as are other claims against the county. A detailed 12 statement of the facts upon which a claim is based shall 13 accompany the claim. This subsection applies only to placements in a juvenile 14 15 shelter care home which is publicly owned, operated as a county 16 or multicounty shelter care home, organized under a chapter 17 28E agreement, or operated by a private juvenile shelter care If the actual and allowable costs of a child's shelter 19 care placement exceed the amount the department is authorized 20 to pay, the unpaid costs may be recovered from the child's 21 custodial parent's county of residence. However, the maximum 22 amount of the unpaid costs which may be recovered under this 23 subsection is limited to the difference between the amount 24 the department is authorized to pay and the statewide average 25 of the actual and allowable rates as reasonably determined 26 by the department annually. A home may only be reimbursed 27 for the lesser of the home's actual and allowable costs or 28 the statewide average of the actual and allowable rates as 29 determined by the department in effect on the date the costs 30 were paid. The unpaid costs are payable pursuant to filing of 31 verified claims against the child's custodial parent's county 32 of residence. A detailed statement of the facts upon which a 33 claim is based shall accompany the claim. Any dispute between 34 counties arising from filings of claims filed pursuant to this

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35 subsection shall be settled in the manner provided to determine

- 1 residency county of residence in section 225C.61 35D.9.
- Sec. 95. Section 235.7, subsection 2, Code 2024, is amended
- 3 to read as follows:
- 4 2. Membership. The department may authorize the governance
- 5 boards of decategorization of child welfare and juvenile
- 6 justice funding projects established under section 232.188 to
- 7 appoint the transition committee membership and may utilize
- 8 the boundaries of decategorization projects to establish
- 9 the service areas for transition committees. The committee
- 10 membership may include but is not limited to department staff
- 11 involved with foster care, child welfare, and adult services,
- 12 juvenile court services staff, staff involved with county
- 13 general assistance or emergency relief under chapter 251 or
- 14 252, or a regional administrator of the county mental health
- 15 and disability services region, as defined in section 225C.55,
- 16 in the area, school district and area education agency staff
- 17 involved with special education, and a child's court appointed
- 18 special advocate, quardian ad litem, service providers, and
- 19 other persons knowledgeable about the child.
- 20 Sec. 96. Section 235A.15, subsection 2, paragraph c,
- 21 subparagraphs (5) and (8), Code 2024, are amended by striking
- 22 the subparagraphs.
- 23 Sec. 97. Section 235B.6, subsection 2, paragraph d,
- 24 subparagraph (6), Code 2024, is amended by striking the
- 25 subparagraph.
- 26 Sec. 98. Section 249A.4, subsection 15, Code 2024, is
- 27 amended by striking the subsection.
- Sec. 99. Section 249A.12, subsection 4, paragraph a,
- 29 unnumbered paragraph 1, Code 2024, is amended to read as
- 30 follows:
- 31 The mental health and disability services commission council
- 32 on health and human services created pursuant to section 217.2,
- 33 shall recommend to the department the actions necessary to
- 34 assist in the transition of individuals being served in an
- 35 intermediate care facility for persons with an intellectual

- 1 disability, who are appropriate for the transition, to services
- 2 funded under a medical assistance home and community-based
- 3 services waiver for persons with an intellectual disability in
- 4 a manner which maximizes the use of existing public and private
- 5 facilities. The actions may include but are not limited to
- 6 submitting any of the following or a combination of any of the
- 7 following as a request for a revision of the medical assistance
- 8 home and community-based services waiver for persons with an
- 9 intellectual disability:
- 10 Sec. 100. Section 249A.12, subsection 4, paragraph b, Code
- 11 2024, is amended to read as follows:
- 12 b. In implementing the provisions of this subsection, the
- 13 mental health and disability services commission council on
- 14 health and human services shall consult with other states. The
- 15 waiver revision request or other action necessary to assist
- 16 in the transition of service provision from intermediate care
- 17 facilities for persons with an intellectual disability to
- 18 alternative programs shall be implemented by the department in
- 19 a manner that can appropriately meet the needs of individuals
- 20 at an overall lower cost to counties, the federal government,
- 21 and the state. In addition, the department shall take into
- 22 consideration significant federal changes to the medical
- 23 assistance program in formulating the department's actions
- 24 under this subsection. The department shall consult with the
- 25 mental health and disability services commission council on
- 26 health and human services in adopting rules for oversight of
- 27 facilities converted pursuant to this subsection. A transition
- 28 approach described in paragraph "a" may be modified as necessary
- 29 to obtain federal waiver approval.
- 30 Sec. 101. <u>NEW SECTION</u>. **249A.38A** Supported community living
- 31 services.
- 32 1. As used in this section, "supported community living
- 33 service" means a service provided in a noninstitutional
- 34 setting to adult persons with mental illness, an intellectual
- 35 disability, or developmental disabilities to meet the persons'

- 1 daily living needs.
- The department shall adopt rules pursuant to chapter 17A
- 3 establishing minimum standards for supported community living
- 4 services.
- 5 3. The department shall determine whether to grant, deny, or
- 6 revoke approval for any supported community living service.
- 7 4. Approved supported community living services may receive
- 8 funding from the state, federal and state social services block
- 9 grant funds, and other appropriate funding sources, consistent
- 10 with state legislation and federal regulations. The funding
- 11 may be provided on a per diem, per hour, or grant basis, as
- 12 appropriate.
- 13 Sec. 102. Section 249N.8, Code 2024, is amended by striking
- 14 the section and inserting in lieu thereof the following:
- 15 249N.8 Behavioral health services reports.
- 16 The department shall annually submit a report to the
- 17 governor and the general assembly with details related to the
- 18 department's review of the funds administered by, and the
- 19 outcomes and effectiveness of the behavioral health services
- 20 provided by, the behavioral health service system established
- 21 in chapter 225A.
- 22 Sec. 103. Section 252.24, subsections 1 and 3, Code 2024,
- 23 are amended to read as follows:
- 24 l. The county of residence, as defined in section 225C.61
- 25 35D.9, shall be liable to the county granting assistance for
- 26 all reasonable charges and expenses incurred in the assistance
- 27 and care of a poor person.
- 28 3. This section shall apply to assistance or maintenance
- 29 provided by a county through the county's mental health
- 30 and disability services behavioral health service system
- 31 implemented under established in chapter 225C 225A.
- 32 Sec. 104. Section 256.25, subsections 2 and 3, Code 2024,
- 33 are amended to read as follows:
- 34 2. A school district, which may collaborate and partner
- 35 with one or more school districts, area education agencies,

- 1 accredited nonpublic schools, nonprofit agencies, and
 2 institutions that provide children's mental health services,
 3 located in mental health and disability services regions
 4 providing children's behavioral health services in accordance
 5 with chapter 225C, subchapter VII operating within the state's
 6 behavioral health service system under chapter 225A, may apply
 7 for a grant under this program to establish a therapeutic
 8 classroom in the school district in accordance with this
 9 section.
 10 3. The department shall develop a grant application
 11 and selection and evaluation criteria. Selection criteria
 12 shall include a method for prioritizing grant applications
 13 submitted by school districts. First priority shall be
 14 given to applications submitted by school districts that
- 13 submitted by school districts. First priority shall be 14 given to applications submitted by school districts that 15 submitted an application pursuant to this section for the 16 previous immediately preceding fiscal year. Second priority 17 shall be given to applications submitted by school districts 18 that, pursuant to subsection 2, are collaborating and 19 partnering with one or more school districts, area education 20 agencies, accredited nonpublic schools, nonprofit agencies, 21 or institutions that provide mental health services for 22 children. Third priority shall be given to applications 23 submitted by school districts located in mental health and 24 disability services regions behavioral health districts as 25 defined in section 225A.1, and that are providing behavioral 26 health services for children in accordance with chapter 225C, 27 subchapter VII 225A. Grant awards shall be distributed as 28 equitably as possible among small, medium, and large school 29 districts. For purposes of this subsection, a small school 30 district is a district with an actual enrollment of fewer than 31 six hundred pupils; a medium school district is a district 32 with an actual enrollment that is at least six hundred pupils, 33 but less than two thousand five hundred pupils; and a large 34 school district is a district with an actual enrollment of two 35 thousand five hundred or more pupils.

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      Sec. 105. Section 321.189, subsection 10, Code 2024, is
 2 amended to read as follows:
      10. Autism spectrum disorder status. A licensee who has
 4 autism spectrum disorder, as defined in section 514C.28, may
 5 request that the license be marked to reflect the licensee's
 6 autism spectrum disorder status on the face of the license
 7 when the licensee applies for the issuance or renewal of a
 8 license. The department may adopt rules pursuant to chapter
 9 17A establishing criteria under which a license may be marked,
10 including requiring the licensee to submit medical proof of the
11 licensee's autism spectrum disorder status. When a driver's
12 license is so marked, the licensee's autism spectrum disorder
13 status shall be noted in the electronic database used by
14 the department and law enforcement to access registration,
15 titling, and driver's license information. The department, in
16 consultation with the mental health and disability services
17 commission department of health and human services, shall
18 develop educational media to raise awareness of a licensee's
19 ability to request the license be marked to reflect the
20 licensee's autism spectrum disorder status.
21
      Sec. 106. Section 321.190, subsection 1, paragraph b,
22 subparagraph (6), Code 2024, is amended to read as follows:
23
      (6) An applicant for a nonoperator's identification
24 card who has autism spectrum disorder, as defined in section
25 514C.28, may request that the card be marked to reflect
26 the applicant's autism spectrum disorder status on the face
27 of the card when the applicant applies for the issuance or
28 renewal of a card. The department may adopt rules pursuant to
29 chapter 17A establishing criteria under which a card may be
30 marked, including requiring the applicant to submit medical
31 proof of the applicant's autism spectrum disorder status.
32 The department, in consultation with the mental health and
33 disability services commission department of health and human
34 services, shall develop educational media to raise awareness of
35 an applicant's ability to request the card be marked to reflect
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- 1 the applicant's autism spectrum disorder status.
- Sec. 107. Section 321J.1, Code 2024, is amended by adding
- 3 the following new subsection:
- 4 NEW SUBSECTION. 01. "Administrative services organization"
- 5 means the same as defined in section 225A.1.
- 6 Sec. 108. Section 321J.3, subsection 1, paragraph e, Code
- 7 2024, is amended to read as follows:
- 8 e. A person committed under this section who does not
- 9 possess sufficient income or estate to make payment of the
- 10 costs of the treatment in whole or in part shall be considered
- ll a state patient and the costs of treatment shall be paid as
- 12 provided in section 125.44 by the applicable administrative
- 13 services organization.
- 14 Sec. 109. Section 321J.3, subsection 2, paragraph c, Code
- 15 2024, is amended to read as follows:
- 16 c. A person committed under this section who does not
- 17 possess sufficient income or estate to make payment of the
- 18 costs of the treatment in whole or in part shall be considered
- 19 a state patient and the costs of treatment shall be paid as
- 20 provided in section 125.44 by the applicable administrative
- 21 services organization.
- 22 Sec. 110. Section 321J.3, subsection 3, Code 2024, is
- 23 amended to read as follows:
- 24 3. The state department of transportation, in cooperation
- 25 with the judicial branch, shall adopt rules, pursuant to the
- 26 procedure in section 125.33 in accordance with procedures
- 27 established by the department of health and human services
- 28 relating to the voluntary treatment of persons with a substance
- 29 use disorder, regarding the assignment of persons ordered under
- 30 section 321J.17 to submit to substance use disorder evaluation
- 31 and treatment. The rules shall be applicable only to persons
- 32 other than those committed to the custody of the director
- 33 of the department of corrections under section 321J.2. The
- 34 rules shall be consistent with the practices and procedures
- 35 of the judicial branch in sentencing persons to substance

1 use disorder evaluation and treatment under section 321J.2. 2 The rules shall include the requirement that the treatment 3 programs utilized by a person pursuant to an order of the 4 department of transportation meet the licensure standards of 5 the department of health and human services for substance use 6 disorder treatment programs under chapter 125. The rules shall 7 also include provisions for payment of costs by the offenders, 8 including insurance reimbursement on behalf of offenders, 9 or other forms of funding, and shall also address reporting 10 requirements of the facility, consistent with the provisions of 11 sections 125.84 and 125.86. The department of transportation 12 shall be entitled to treatment information contained in reports 13 to the department of transportation, notwithstanding any 14 provision of chapter 125 that would restrict department access 15 to treatment information and records. 16 Sec. 111. Section 321J.25, subsection 1, paragraph b, Code 17 2024, is amended to read as follows: b. "Program" means a substance use disorder awareness 18 19 program, licensed under chapter 125, and provided under a 20 contract entered into between the provider and the department 21 of health and human services under chapter 125. 22 Sec. 112. Section 321J.25, subsection 2, unnumbered 23 paragraph 1, Code 2024, is amended to read as follows: A substance use disorder awareness program is established 25 in each of the regions established by the director of health 26 and human services pursuant to section 125.12 behavioral health 27 district designated pursuant to section 225A, subsection The program shall consist of an insight class and a 29 substance use disorder evaluation, which shall be attended by 30 the participant, to discuss issues related to the potential 31 consequences of substance use disorder. The parent or parents 32 of the participant shall also be encouraged to participate 33 in the program. The program provider shall consult with the 34 participant or the parents of the participant in the program 35 to determine the timing and appropriate level of participation

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- 1 for the participant and any participation by the participant's
- 2 parents. The program may also include a supervised educational
- 3 tour by the participant to any or all of the following:
- 4 Sec. 113. Section 331.321, subsection 1, paragraph e, Code
- 5 2024, is amended by striking the paragraph.
- 6 Sec. 114. Section 331.323, subsection 1, paragraph a,
- 7 subparagraph (7), Code 2024, is amended by striking the
- 8 subparagraph.
- 9 Sec. 115. Section 331.381, subsections 4 and 5, Code 2024,
- 10 are amended to read as follows:
- 11 4. Comply with chapter 222, including but not limited to
- 12 sections 222.13, 222.14, 222.59 through 222.70, 222.73 through
- 13 222.75, and 222.77 through 222.82, in regard to the care of
- 14 persons with an intellectual disability.
- 15 5. Comply with chapters 227, 229 and 230, including but not
- 16 limited to sections 227.11, 227.14, 229.42, 230.25, 230.27, and
- 17 $\frac{230.35}{1}$ in regard to the care of persons with mental illness.
- 18 Sec. 116. Section 331.382, subsection 1, paragraphs e, f,
- 19 and g, Code 2024, are amended by striking the paragraphs.
- 20 Sec. 117. Section 331.382, subsection 3, Code 2024, is
- 21 amended by striking the subsection.
- 22 Sec. 118. Section 331.432, subsection 3, Code 2024, is
- 23 amended by striking the subsection.
- 24 Sec. 119. Section 331.502, subsection 10, Code 2024, is
- 25 amended by striking the subsection.
- 26 Sec. 120. Section 331.502, subsection 12, Code 2024, is
- 27 amended to read as follows:
- 28 12. Carry out duties relating to the hospitalization and
- 29 support of persons with mental illness as provided in sections
- 30 229.42, 230.3, 230.11, and 230.15, 230.21, 230.22, 230.25, and
- 31 230.26.
- 32 Sec. 121. Section 331.552, subsection 13, Code 2024, is
- 33 amended to read as follows:
- 34 13. Make transfer payments to the state for school expenses
- 35 for deaf and hard-of-hearing children and support of persons

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- 1 with mental illness behavioral health services as provided in
- 2 section 230.21 chapter 225A.
- 3 Sec. 122. Section 331.756, subsection 25, Code 2024, is
- 4 amended by striking the subsection.
- 5 Sec. 123. Section 331.756, subsection 38, Code 2024, is
- 6 amended to read as follows:
- 7 38. Proceed to collect, as requested by the county,
- 8 the reasonable costs for the care, treatment, training,
- 9 instruction, and support of a person with an intellectual
- 10 disability from parents or other persons who are legally liable
- 11 for the support of the person with an intellectual disability
- 12 as provided in section 222.82.
- 13 Sec. 124. Section 331.756, subsection 41, Code 2024, is
- 14 amended to read as follows:
- 15 41. Carry out duties relating to the collection of the costs
- 16 for the care, treatment, and support of persons with mental
- 17 illness as provided in sections 230.25 and section 230.27.
- 18 Sec. 125. Section 331.910, subsection 2, Code 2024, is
- 19 amended by adding the following new paragraph:
- 20 NEW PARAGRAPH. Oa. "Administrative services organization"
- 21 means the same as defined in section 225A.1.
- Sec. 126. Section 331.910, subsection 2, paragraph d, Code
- 23 2024, is amended by striking the paragraph.
- 24 Sec. 127. Section 331.910, subsection 3, paragraphs a and c,
- 25 Code 2024, are amended to read as follows:
- 26 a. A region An administrative services organization may
- 27 contract with a receiving agency in a bordering state to secure
- 28 substance use disorder or mental health care and treatment
- 29 under this subsection for persons who receive substance use
- 30 disorder or mental health care and treatment pursuant to
- 31 section 125.33, 125.91, 229.2, or 229.22 through a region.
- 32 c. A region An administrative services organization may
- 33 contract with a sending agency in a bordering state to provide
- 34 care and treatment under this subsection for residents of
- 35 the bordering state in approved substance use disorder and

- 1 mental health care and treatment hospitals, centers, and
- 2 facilities in this state, except that care and treatment shall
- 3 not be provided for residents of the bordering state who are
- 4 involved in criminal proceedings substantially similar to the
- 5 involvement described in paragraph "b".
- 6 Sec. 128. Section 347.16, subsection 3, Code 2024, is
- 7 amended to read as follows:
- Care and treatment may be furnished in a county public
- 9 hospital to any sick or injured person who has residence
- 10 outside the county which maintains the hospital, subject to
- 11 such policies and rules as the board of hospital trustees
- 12 may adopt. If care and treatment is provided under this
- 13 subsection to a person who is indigent, the person's county of
- 14 residence, as defined in section 225C.61 35D.9, shall pay to
- 15 the board of hospital trustees the fair and reasonable cost of
- 16 the care and treatment provided by the county public hospital
- 17 unless the cost of the indigent person's care and treatment is
- 18 otherwise provided for. If care and treatment is provided to
- 19 an indigent person under this subsection, the county public
- 20 hospital furnishing the care and treatment shall immediately
- 21 notify, by regular mail, the auditor of the county of residence
- 22 of the indigent person of the provision of care and treatment
- 23 to the indigent person including care and treatment provided
- 24 by a county through the county's mental health and disability
- 25 services system implemented under behavioral health service
- 26 system established in chapter 225C 225A.
- 27 Sec. 129. Section 423.3, subsection 18, paragraph d, Code
- 28 2024, is amended to read as follows:
- 29 d. Community mental health centers accredited by the
- 30 department of health and human services pursuant to chapter
- 31 225C on or before June 30, 2025.
- 32 Sec. 130. Section 426B.1, subsection 2, Code 2024, is
- 33 amended to read as follows:
- 34 2. Moneys shall be distributed from the property tax relief
- 35 fund to the mental health and disability services regional

- 1 service system for mental health and disability services
- 2 behavioral health fund established in section 225A.7, in
- 3 accordance with the appropriations made to the fund and other
- 4 statutory requirements.
- 5 Sec. 131. Section 437A.8, subsection 4, paragraph d, Code
- 6 2024, is amended to read as follows:
- 7 d. (1) Notwithstanding paragraph \tilde{a}'' , a taxpayer who owns
- 8 or leases a new electric power generating plant and who has
- 9 no other operating property in the state of Iowa except for
- 10 operating property directly serving the new electric power
- 11 generating plant as described in section 437A.16 shall pay
- 12 the replacement generation tax associated with the allocation
- 13 of the local amount to the county treasurer of the county in
- 14 which the local amount is located and shall remit the remaining
- 15 replacement generation tax, if any, to the director according
- 16 to paragraph "a" for remittance of the tax to county treasurers.
- 17 The director shall notify each taxpayer on or before August 31
- 18 following a tax year of its remaining replacement generation
- 19 tax to be remitted to the director. All remaining replacement
- 20 generation tax revenues received by the director shall be
- 21 deposited in the property tax relief behavioral health fund
- 22 created established in section 426B.1, and shall be distributed
- 23 as provided in section 426B.2 225A.7.
- 24 (2) If a taxpayer has paid an amount of replacement tax,
- 25 penalty, or interest which was deposited into the property tax
- 26 relief fund and which was not due, all of the provisions of
- 27 section 437A.14, subsection 1, paragraph "b", shall apply with
- 28 regard to any claim for refund or credit filed by the taxpayer.
- 29 The director shall have sole discretion as to whether the
- 30 erroneous payment will be refunded to the taxpayer or credited
- 31 against any replacement tax due, or to become due, from the
- 32 taxpayer that would be subject to deposit in the property tax
- 33 relief fund.
- 34 Sec. 132. Section 437A.15, subsection 3, paragraph f, Code
- 35 2024, is amended to read as follows:

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1
      f. Notwithstanding the provisions of this section, if
 2 a taxpayer is a municipal utility or a municipal owner of
 3 an electric power facility financed under the provisions
 4 of chapter 28F or 476A, the assessed value, other than the
 5 local amount, of a new electric power generating plant shall
 6 be allocated to each taxing district in which the municipal
 7 utility or municipal owner is serving customers and has
 8 electric meters in operation in the ratio that the number of
 9 operating electric meters of the municipal utility or municipal
10 owner located in the taxing district bears to the total number
11 of operating electric meters of the municipal utility or
12 municipal owner in the state as of January 1 of the tax year.
13 If the municipal utility or municipal owner of an electric
14 power facility financed under the provisions of chapter 28F
15 or 476A has a new electric power generating plant but the
16 municipal utility or municipal owner has no operating electric
17 meters in this state, the municipal utility or municipal owner
18 shall pay the replacement generation tax associated with the
19 new electric power generating plant allocation of the local
20 amount to the county treasurer of the county in which the local
21 amount is located and shall remit the remaining replacement
22 generation tax, if any, to the director at the times contained
23 in section 437A.8, subsection 4, for remittance of the tax to
24 the county treasurers. All remaining replacement generation
25 tax revenues received by the director shall be deposited in the
26 property tax relief behavioral health fund created established
27 in section 426B.1, and shall be distributed as provided in
28 section 426B.2 225A.7.
29
      Sec. 133. Section 462A.14, subsection 12, paragraph f, Code
30 2024, is amended to read as follows:
      f. A defendant committed under this section who does not
31
32 possess sufficient income or estate to make payment of the
33 costs of the treatment in whole or in part shall be considered
34 a state patient and the costs of treatment shall be paid as
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35 provided in section 125.44 by the applicable administrative

- 1 services organization designated pursuant to section 225A.4. Sec. 134. Section 462A.14, subsection 13, paragraph c, Code 2 3 2024, is amended to read as follows: A defendant committed under this section who does not 5 possess sufficient income or estate to make payment of the 6 costs of the treatment in whole or in part shall be considered 7 a state patient and the costs of treatment shall be paid as 8 provided in section 125.44 by the applicable administrative 9 services organization designated pursuant to section 225A.4. 10 Sec. 135. Section 483A.24, subsection 7, Code 2024, is 11 amended to read as follows: 12 7. A license shall not be required of minor pupils of the 13 Iowa school for the deaf or of minor residents of other state 14 institutions under the control of the department of health 15 and human services. In addition, a person who is on active 16 duty with the armed forces of the United States, on authorized 17 leave from a duty station located outside of this state, and 18 a resident of the state of Iowa shall not be required to 19 have a license to hunt or fish in this state. The military 20 person shall carry the person's leave papers and a copy of 21 the person's current earnings statement showing a deduction
- 23 carrying the person's earnings statement, the military person 24 may also claim residency if the person is registered to vote

22 for Iowa income taxes while hunting or fishing. In lieu of

- 25 in this state. If a deer or wild turkey is taken, the military
- 26 person shall immediately contact a state conservation officer
- 27 to obtain an appropriate tag to transport the animal. A
- 28 license shall not be required of residents of county care
- 29 facilities or any person who is receiving supplementary
- 30 assistance under chapter 249.
- 31 Sec. 136. Section 602.8102, subsection 39, Code 2024, is
- 32 amended to read as follows:
- 33 39. Refer persons applying for voluntary admission to a
- 34 community mental health center accredited by the department
- 35 of health and human services on or before June 30, 2025, for

1 a preliminary diagnostic evaluation as provided in section 2 225C.16, subsection 2. Sec. 137. Section 714.8, subsection 12, Code 2024, is 4 amended to read as follows: Knowingly transfers or assigns a legal or equitable 6 interest in property, as defined in section 702.14, for less 7 than fair consideration, with the intent to obtain public 8 assistance under chapters 16, 35B, and 35D, and 347B, or Title 9 VI, subtitles 2 through 6, or accepts a transfer of or an 10 assignment of a legal or equitable interest in property, as 11 defined in section 702.14, for less than fair consideration, 12 with the intent of enabling the party transferring the property 13 to obtain public assistance under chapters 16, 35B, and 35D, 14 and 347B, or Title VI, subtitles 2 through 6. A transfer or 15 assignment of property for less than fair consideration within 16 one year prior to an application for public assistance benefits 17 shall be evidence of intent to transfer or assign the property 18 in order to obtain public assistance for which a person is 19 not eligible by reason of the amount of the person's assets. 20 If a person is found guilty of a fraudulent practice in the 21 transfer or assignment of property under this subsection the 22 maximum sentence shall be the penalty established for a serious 23 misdemeanor and sections 714.9, 714.10, and 714.11 shall not 24 apply. 25 Sec. 138. Section 812.6, subsection 1, Code 2024, is amended 26 to read as follows: 27 If the court finds the defendant does not pose a danger 28 to the public peace and safety, is otherwise qualified for 29 pretrial release, and is willing to cooperate with treatment, 30 the court shall order, as a condition of pretrial release, 31 that the defendant obtain mental health treatment designed to 32 restore the defendant to competency. The costs of treatment 33 pursuant to this subsection shall be paid by the mental 34 health and disability services region for the county of the 35 defendant's residency pursuant to chapter 225C applicable

- 1 administrative services organization designated pursuant to 2 section 225A.4, regardless of whether the defendant meets 3 financial eligibility requirements under section 225C.62 or 4 225C.66. 5 Sec. 139. Section 904.201, subsection 8, Code 2024, is 6 amended to read as follows: 8. Chapter 230 governs the determination of costs and 8 charges for the care and treatment of persons with mental 9 illness admitted to the forensic psychiatric hospital, 10 except that charges for the care and treatment of any person 11 transferred to the forensic psychiatric hospital from an adult 12 correctional institution or from a state training school shall 13 be paid entirely from state funds. Charges for all other 14 persons at the forensic psychiatric hospital shall be billed to 15 the respective counties at the same ratio as for patients at 16 state mental health institutes under section 230.20. 17 Sec. 140. REPEAL. Chapters 142A, 225C, 227, 230A, and 347B, 18 Code 2024, are repealed. Sec. 141. REPEAL. Sections 125.1, 125.3, 125.7, 125.9, 20 125.10, 125.12, 125.25, 125.32A, 125.33, 125.34, 125.37, 21 125.38, 125.39, 125.40, 125.41, 125.42, 125.43, 125.43A, 22 125.44, 125.46, 125.48, 125.54, 125.55, 125.58, 125.59, 125.60, 23 135B.18, 218.99, 222.59, 222.60, 222.61, 222.62, 222.63, 24 222.64, 222.65, 222.66, 222.67, 222.68, 222.69, 222.70, 222.74, 25 222.75, 225.10, 225.19, 225.21, 225.24, 226.45, 227.4, 229.42, 26 230.1A, 230.2, 230.3, 230.4, 230.5, 230.6, 230.9, 230.12, 27 230.16, 230.17, 230.18, 230.19, 230.20, 230.21, 230.22, 230.25, 28 230.26, 426B.2, 426B.4, and 426B.5, Code 2024, are repealed. 29 Sec. 142. EFFECTIVE DATE. This division of this Act takes 30 effect July 1, 2025.
- 31 DIVISION III
- 32 AGING AND DISABILITY
- 33 Sec. 143. Section 231.3, Code 2024, is amended to read as
- 34 follows:
- 35 231.3 State policy and objectives.

- 1 l. The general assembly declares that it is the policy of
- 2 the state to work toward attainment of the following objectives
- 3 for Iowa's older individuals and individuals with disabilities:
- 4 1. a. An adequate income.
- 5 2. b. Access to physical and mental health care and
- 6 long-term living and community support services without regard
- 7 to economic status.
- 8 3. c. Suitable and affordable housing that reflects the
- 9 needs of older individuals.
- 10 $\frac{4}{10}$ d. Access to comprehensive information and a community
- ll navigation system providing all available options related to
- 12 long-term living and community support services that assist
- 13 older individuals in the preservation of personal assets and
- 14 the ability to entirely avoid or significantly delay reliance
- 15 on entitlement programs.
- 16 5. e. Full restorative services for those who require
- 17 institutional care, and a comprehensive array of long-term
- 18 living and community support services adequate to sustain older
- 19 people in their communities and, whenever possible, in their
- 20 homes, including support for caregivers.
- 21 6. f. Pursuit of meaningful activity within the widest
- 22 range of civic, cultural, educational, recreational, and
- 23 employment opportunities.
- 24 7. g. Suitable community transportation systems to assist
- 25 in the attainment of independent movement.
- 26 8. h. Freedom, independence, and the free exercise of
- 27 individual initiative in planning and managing their own lives.
- 28 9. i. Freedom from abuse, neglect, and exploitation.
- 29 2. The general assembly declares that the state of Iowa
- 30 recognizes a brain injury as a disability, and each agency and
- 31 subdivision of this state shall recognize a brain injury as a
- 32 distinct disability.
- 33 3. It is the policy of this state that each state agency
- 34 shall make reasonable efforts to identify those persons with
- 35 brain injuries among the persons served by the state agency.

- 1 Sec. 144. Section 231.4, subsection 1, Code 2024, is amended
- 2 by adding the following new paragraph:
- 3 NEW PARAGRAPH. Oc. "Brain injury" means the same as defined
- 4 in section 135.22.
- 5 Sec. 145. Section 231.23, subsections 4, 7, and 9, Code
- 6 2024, are amended to read as follows:
- 7 4. Advocate for older individuals and individuals with
- 8 disabilities by reviewing and commenting upon all state plans,
- 9 budgets, laws, rules, regulations, and policies which affect
- 10 older individuals and individuals with disabilities, and by
- 11 providing technical assistance to any agency, organization,
- 12 association, or individual representing the needs of older
- 13 individuals and individuals with disabilities.
- 14 7. Pursuant to commission department policy, take into
- 15 account the views of older Iowans and Iowans with disabilities.
- 9. Assist the commission in assuring that preference will
- 17 be given to providing services to older individuals with the
- 18 greatest economic or social needs, with particular attention to
- 19 low-income minority older individuals, older individuals with
- 20 limited English proficiency, and older individuals residing in
- 21 rural areas.
- 22 Sec. 146. Section 231.23A, subsections 1 and 3, Code 2024,
- 23 are amended to read as follows:
- 24 l. Services for older individuals, persons with
- 25 disabilities eighteen years of age and older, family
- 26 caregivers, and veterans as defined by the department in the
- 27 most current version of the department's reporting manual and
- 28 pursuant to the federal Act and regulations.
- 29 3. The aging Aging and disability resource center centers.
- 30 Sec. 147. Section 231.23A, Code 2024, is amended by adding
- 31 the following new subsection:
- 32 NEW SUBSECTION. 7A. Services and supports available to
- 33 individuals with disabilities including but not limited to
- 34 individuals with mental illness, an intellectual disability or
- 35 other developmental disability, or a brain injury.

- 1 Sec. 148. Section 231.56, Code 2024, is amended to read as 2 follows:
- 3 231.56 Services and programs.
- 4 The department shall administer long-term living and
- 5 community support services and programs that allow older
- 6 individuals and individuals with disabilities to secure and
- 7 maintain maximum independence and dignity in a home environment
- 8 that provides for self-care with appropriate supportive
- 9 services, assist in removing individual and social barriers
- 10 to economic and personal independence for older individuals
- 11 and individuals with disabilities, and provide a continuum of
- 12 care for older individuals and individuals with disabilities.
- 13 Funds appropriated for this purpose shall be allocated based
- 14 on administrative rules adopted by the commission department
- 15 pursuant to chapter 17A. The department shall require such
- 16 records as needed adopt rules pursuant to chapter 17A that
- 17 allow the department to collect information as necessary from
- 18 long-term living and community support services, program
- 19 providers, and patients to administer this section.
- 20 Sec. 149. Section 231.57, Code 2024, is amended to read as
- 21 follows:
- 22 231.57 Coordination of advocacy.
- 23 The department shall administer a program for the
- 24 coordination of information and assistance provided within
- 25 the state to assist older individuals and individuals with
- 26 disabilities, and their caregivers, in obtaining and protecting
- 27 their rights and benefits. State and local agencies providing
- 28 information and assistance to older individuals and individuals
- 29 with disabilities, and their caregivers, in seeking their
- 30 rights and benefits shall cooperate with the department in
- 31 administering this program.
- 32 Sec. 150. Section 231.58, Code 2024, is amended to read as
- 33 follows:
- 34 231.58 Long-term living coordination.
- 35 The director may convene meetings, as necessary, of the

- 1 director and the director of inspections, appeals, and
- 2 licensing, to assist in the coordination of policy, service
- 3 delivery, and long-range planning relating to the long-term
- 4 living system and older Iowans and Iowans with disabilities
- 5 in the state. The group may consult with individuals,
- 6 institutions, and entities with expertise in the area of the
- 7 long-term living system and older Iowans and Iowans with
- 8 disabilities, as necessary, to facilitate the group's efforts.
- 9 Sec. 151. Section 231.64, Code 2024, is amended to read as 10 follows:
- 231.64 Aging and disability resource center centers.
- 12 1. The aging Aging and disability resource centers
- 13 shall be administered by the department consistent with the
- 14 federal Act. The department shall designate area agencies on
- 15 aging aging and disability resource centers to establish, in
- 16 consultation with other stakeholders including organizations
- 17 representing the disability community, a coordinated system for
- 18 providing all of the following:
- 19 a. Comprehensive information, referral, and assistance
- 20 regarding the full range of available public and private
- 21 long-term living and community support services, options,
- 22 service providers, and resources within a community, including
- 23 information on the availability of integrated long-term care.
- 24 b. Options counseling to assist individuals in assessing
- 25 their existing or anticipated long-term care needs and
- 26 developing and implementing a plan for long-term living and
- 27 community support services designed to meet their specific
- 28 needs and circumstances. The plan for long-term living
- 29 and community support services may include support with
- 30 person-centered care transitions to assist consumers and family
- 31 caregivers with transitions between home and care settings.
- 32 c. Consumer access to the range of publicly-supported
- 33 long-term living and community support services for which
- 34 consumers may be eligible, by serving as a convenient point
- 35 of entry for such services. The aging Aging and disability

- 1 resource center centers shall offer information online and
- 2 be available via a toll-free telephone number, electronic
- 3 communications, and in person.
- 4 2. The aging Aging and disability resource centers
- 5 shall assist older individuals, persons individuals with
- 6 disabilities age eighteen or older, family caregivers, and
- 7 people who inquire about or request assistance on behalf of
- 8 members of these groups, as they seek long-term living and
- 9 community support services.
- 10 Sec. 152. NEW SECTION. 231.75 Scope.
- 11 The service quality standards and rights in this subchapter
- 12 VII shall apply to any person with an intellectual disability,
- 13 a developmental disability, brain injury, or chronic mental
- 14 illness who receives services which are funded in whole or in
- 15 part by public funds, or services which are permitted under
- 16 Iowa law.
- 17 Sec. 153. NEW SECTION. 231.76 Service quality standards.
- 18 As the state participates more fully in funding services
- 19 and other support for persons with an intellectual disability,
- 20 developmental disability, brain injury, or chronic mental
- 21 illness, it is the intent of the general assembly that the
- 22 state shall seek to attain the following quality standards in
- 23 the provision of services and other supports:
- 24 l. Provide comprehensive evaluation and diagnosis adapted
- 25 to the cultural background, primary language, and ethnic origin
- 26 of a person.
- 27 2. Provide an individual treatment, habilitation, and
- 28 program services plan.
- 29 3. Provide treatment, habilitation, and program services
- 30 that are individualized, flexible, cost-effective, and produce
- 31 results.
- Provide periodic review of an individual's treatment,
- 33 habilitation, and program services plan.
- 34 5. Provide for the least restrictive environment, and
- 35 age-appropriate services.

- 1 6. Provide appropriate training and employment
- 2 opportunities so that a person's ability to contribute to, and
- 3 participate in, the community is maximized.
- 4 7. Provide an ongoing process to determine the degree of
- 5 access to, and the effectiveness of, the services and other
- 6 supports in achieving the disability service outcomes and
- 7 indicators identified by the department.
- 8 Sec. 154. NEW SECTION. 231.77 Rights.
- 9 All of the following rights shall apply to a person with an
- 10 intellectual disability, a developmental disability, a brain
- 11 injury, or a chronic mental illness:
- 12 1. Wage protection. A person engaged in a work program
- 13 shall be paid wages commensurate with the going rate for
- 14 comparable work and productivity.
- 15 2. Insurance protection. Pursuant to section 507B.4,
- 16 subsection 3, paragraph "g", a person or designated group
- 17 of persons shall not be unfairly discriminated against for
- 18 purposes of insurance coverage.
- 19 3. Citizenship. A person retains the right to citizenship
- 20 in accordance with the laws of the state.
- 21 4. Participation in planning activities. A person has
- 22 the right to participate in the formulation of an individual
- 23 treatment, habilitation, and program plan developed for the
- 24 person.
- 25 Sec. 155. NEW SECTION. 231.78 Compliance.
- 26 l. A person's sole remedy for a violation of a rule
- 27 adopted by the council on health and human services to
- 28 implement sections 231.75 through 231.77 shall be to initiate a
- 29 proceeding with the department by request pursuant to chapter
- 30 17A.
- 31 a. Any decision of the department shall be in accordance
- 32 with due process of law. A person or party who is aggrieved or
- 33 adversely affected by the department's action may seek judicial
- 34 review pursuant to section 17A.19. A person or party who is
- 35 aggrieved or adversely affected by a final judgment of the

- 1 district court may appeal under section 17A.20.
- 2 b. Either the department or a party in interest may apply
- 3 to the Iowa district court for an order to enforce a final
- 4 decision of the department.
- 5 2. Any rules adopted by the council to implement sections
- 6 231.76 and 231.77 shall not create any right, entitlement,
- 7 property, or liberty right or interest, or private cause of
- 8 action for damages against the state or a political subdivision
- 9 of the state, or for which the state or a political subdivision
- 10 of the state would be responsible.
- 11 3. Notwithstanding subsection 1, any violation of section
- 12 231.77, subsection 2, shall be subject to enforcement by the
- 13 commissioner of insurance pursuant to chapter 507B.
- 14 Sec. 156. NEW SECTION. 231.79 Plan appeals process.
- 15 1. a. The department shall establish an appeals process by
- 16 which an affected party may appeal a decision of a coordinating
- 17 board.
- 18 b. The department shall establish an appeals process by
- 19 which an affected party or a coordinating board may appeal a
- 20 decision relating to an appeal under paragraph "a".
- 21 2. For the purposes of this section, "coordinating board"
- 22 means a board formed to coordinate mental health, intellectual
- 23 disability, and developmental disability services.
- 24 Sec. 157. REPEAL. Sections 225C.35, 225C.36, 225C.37,
- 25 225C.38, 225C.39, 225C.40, 225C.41, 225C.42, and 225C.45, Code
- 26 2024, are repealed.
- 27 Sec. 158. CODE EDITOR DIRECTIVE. The Code editor is
- 28 directed to do all of the following:
- 29 1. Entitle Code chapter 231 "Department of Health and Human
- 30 Services Aging and Disability Services".
- 31 2. Designate sections 231.75 through 231.79, as enacted in
- 32 this division of this Act, as subchapter VII entitled "Bill
- 33 of Rights and Service Quality Standards of Persons with an
- 34 Intellectual Disability, Developmental Disability, Brain
- 35 Injury, or Chronic Mental Injury".

- Correct internal references in the Code and in any
- 2 enacted legislation as necessary due to the enactment of this
- 3 division of this Act.
- 4 Sec. 159. EFFECTIVE DATE. The following take effect July
- 5 1, 2025:
- 6 l. The sections of this division of this Act amending the
- 7 following:
- 8 a. Section 231.3.
- 9 b. Section 231.4, subsection 1.
- 10 c. Section 231.23, subsections 4 and 7.
- 11 d. Section 231.23A, subsections 1 and 7A.
- 12 e. Sections 231.56, 231.57, and 231.58.
- f. Section 231.64, subsection 2.
- 2. The sections of this division of this Act enacting
- 15 the following: sections 231.75, 231.76, 231.77, 231.78, and
- 16 231.79.
- 17 DIVISION IV
- 18 TRANSITION PROVISIONS
- 19 Sec. 160. DEPARTMENT OF HEALTH AND HUMAN SERVICES —
- 20 TRANSITION OF MENTAL HEALTH SERVICES, ADDICTIVE DISORDER
- 21 SERVICES, AND DISABILITY SERVICES.
- 22 l. For the purposes of this section:
- 23 a. "Administrative services organization" means the same
- 24 as defined in section 225A.1, as enacted in division I of this
- 25 Act.
- 26 b. "Behavioral health district" or "district" means the
- 27 same as defined in section 225A.1, as enacted in division I of
- 28 this Act.
- 29 c. "Department" means the department of health and human
- 30 services.
- 31 d. "District behavioral health service system plan" or
- 32 "district behavioral health plan" means the same as defined in
- 33 section 225A.1, as enacted in division I of this Act.
- 34 e. "Mental health and disability services region" means the
- 35 same as defined in section 225C.2, subsection 9.

- 1 f. "State behavioral health service system" means the state
- 2 behavioral health service system as established in section
- 3 225A.3, as enacted in division I of this Act.
- 4 q. "State behavioral health service system plan" or "state
- 5 behavioral health plan" means the same as defined in section
- 6 225A.1, as enacted in division I of this Act.
- 7 h. "Transition period" means the period beginning July 1,
- 8 2024, and concluding June 30, 2025.
- 9 2. There is created a behavioral health service system under
- 10 the control of the department. For the fiscal year beginning
- 11 July 1, 2025, and each succeeding fiscal year, the behavioral
- 12 health service system shall be responsible for implementing and
- 13 maintaining a statewide system of prevention, education, early
- 14 intervention, treatment, recovery support, and crisis services
- 15 related to mental health, substance use disorders, tobacco
- 16 use, and problem gambling. For the fiscal year beginning July
- 17 1, 2025, and each succeeding fiscal year, the department's
- 18 division of aging and disability services shall be responsible
- 19 for disability services.
- 20 3. During the transition period, the department may
- 21 exercise all policymaking functions and regulatory powers
- 22 established in division I of this Act, as necessary to
- 23 establish the behavioral health service system.
- 24 4. To ensure the behavioral health service system and the
- 25 division of aging and disability services are able to operate
- 26 as intended at the conclusion of the transition period, the
- 27 department shall perform all the following duties:
- 28 a. Make contracts as necessary to set up services and
- 29 administrative functions.
- 30 b. Adopt rules as necessary to regulate the state's
- 31 behavioral health service system.
- 32 c. Establish policies as necessary to ensure efficient
- 33 implementation and operation of the behavioral health service
- 34 system.
- 35 d. Prepare forms necessary for the implementation and

- 1 administration of behavioral health services.
- 2 e. Prepare a state behavioral health service system plan for
- 3 the state's behavioral health service system.
- 4 f. Designate behavioral health districts on or before April
- 5 1, 2025.
- 6 q. Designate an administrative services organization for
- 7 each behavioral health district on or before April 1, 2025.
- 8 h. Review and approve district behavioral health service
- 9 system plans for services related to the behavioral health
- 10 service system's purpose.
- 11 i. Issue all necessary licenses and certifications.
- 12 j. Establish contractual rights, privileges, and
- 13 responsibilities as necessary to establish and implement the
- 14 behavioral health service system.
- 15 5. If the department determines that a federal waiver
- 16 or authorization is necessary to administer any provision of
- 17 this division of this Act or to effectuate the behavioral
- 18 health system by the conclusion of the transition period,
- 19 the department shall timely request the federal waiver or
- 20 authorization. Notwithstanding any other effective date to
- 21 the contrary, a provision the department determines requires a
- 22 federal waiver or authorization shall be effective only upon
- 23 receipt of federal approval for the waiver or authorization.
- 24 6. a. On or before September 30, 2024, the department shall
- 25 publish on the department's internet site an initial transition
- 26 plan for establishing the behavioral health service system.
- 27 The transition plan shall describe, at a minimum, all of the
- 28 following:
- 29 (1) All tasks that require completion before July 1, 2025.
- 30 The description of tasks shall include a description of how the
- 31 department shall solicit comment from stakeholders, including
- 32 employees of the department, persons served by the department,
- 33 partners of the department, members of the public, and members

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- 34 of the general assembly, and a detailed timeline for the
- 35 completion of the tasks described.

- 1 (2) The proposed organizational structure of the behavioral 2 health service system.
- 3 (3) The transition of service delivery sites from locations
- 4 where people currently receive behavioral health services to 5 where they will receive behavioral health services under the
- 6 behavioral health service system.
- 7 (4) Procedures for the transfer and reconciliation of
- 8 budgeting and funding between the mental health and disability
- 9 services regions and the department.
- 10 (5) A description of how responsibilities for disability
- 11 services programs will be transferred from current program
- 12 administrators to the department's division of aging and
- 13 disability services by the end of the transition period.
- 14 (6) Any additional known tasks that may require completion
- 15 after the transition on July 1, 2025.
- 16 b. The transition plan published under paragraph "a" shall:
- 17 (1) Be updated quarterly during the transition period.
- 18 (2) Describe how information regarding any changes in
- 19 service delivery will be provided to persons receiving services
- 20 from the mental health and disability services regions or
- 21 current behavioral health care providers contracted with the
- 22 department.
- 23 (3) Describe how the transition is being funded, including
- 24 how expenses associated with the transition will be managed.
- 25 7. a. Before the end of the transition period, the
- 26 governing board of each mental health and disability services
- 27 region that maintains a combined account pursuant to section
- 28 225C.58, subsection 1, shall transfer all unencumbered and
- 29 unobligated moneys remaining in the combined account to the
- 30 treasurer of state for deposit into the behavioral health fund
- 31 as established in section 225A.7 as enacted in division I of
- 32 this Act.
- 33 b. Before the end of the transition period, each county
- 34 which maintains a county mental health and disability services
- 35 fund pursuant to section 225C.58, subsection 1, shall transfer

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- 1 all unencumbered and unobligated moneys remaining in the mental
- 2 health and disability services fund to the treasurer of state
- 3 for deposit into the behavioral health fund as established in
- 4 section 225A.7 as enacted in division I of this Act.
- 5 c. Moneys in the behavioral health fund as established
- 6 in section 225A.7 as enacted in division I of this Act are
- 7 appropriated to the department for the purposes established
- 8 in section 225A.7 as enacted in division I of this Act, and
- 9 as otherwise necessary to effectuate the provisions of this
- 10 division of this Act.
- 11 8. a. All debts, claims, or other liabilities owed to a
- 12 county, a mental health and disability services region, or
- 13 the state due to services rendered pursuant to chapter 125,
- 14 222, 225, 225C, 226, 227, 229, 230, or 230A, Code 2024, at the
- 15 conclusion of the transition period shall remain due and owing
- 16 after the transition period concludes.
- 17 b. After the transition period concludes, each county
- 18 auditor shall collect outstanding debts, claims, or other
- 19 liabilities owed to the county for services rendered pursuant
- 20 to chapter 125, 222, 225, 225C, 226, 227, 229, 230, or 230A,
- 21 Code 2024, before the transition period concluded. The county
- 22 attorney may bring a judicial action as necessary to collect
- 23 the debts, claims, or other liabilities.
- 24 EXPLANATION
- 25 The inclusion of this explanation does not constitute agreement with
- the explanation's substance by the members of the general assembly.
- 27 This bill relates to the transition of behavioral health
- 28 services from a mental health and disabilities services system
- 29 to a behavioral health service system (BHSS), and the transfer
- 30 of disability services to the department of health and human
- 31 services' (HHS) division of aging and disability services.
- 32 DIVISION I BEHAVIORAL HEALTH SERVICE SYSTEM. This
- 33 division relates to the establishment of the BHSS. The
- 34 division defines terms related to the BHSS.
- 35 The division designates HHS as the state mental health

1 authority for the purpose of directing benefits from the 2 federal community mental health services block grant, and the 3 state authority for the purpose of directing benefits from the 4 federal substance abuse prevention and treatment block grant. 5 The division also designates HHS as the single state agency for 6 substance abuse for the purposes of 42 U.S.C. §1396a et seq. The division establishes a BHSS for the purposes of 8 implementing a statewide system of prevention, education, early 9 intervention, treatment, recovery support, and crisis services 10 related to mental health, substance use, tobacco use, and ll problem gambling. 12 The division requires HHS to divide the entirety of the state 13 into designated behavioral health districts. The division 14 requires each district to provide behavioral health prevention, 15 education, early intervention, treatment, recovery support, and 16 crisis services throughout the district in a manner consistent 17 with directives the district receives from HHS. 18 consider several factors, as detailed in the division, when 19 designating districts. The manner in which HHS designates 20 behavioral health districts including but not limited to the 21 determination of the boundaries for each district is not 22 subject to judicial review. 23 The division requires HHS to designate an administrative 24 services organization (ASO) to oversee and organize each 25 district and each BHSS service associated with the district. 26 HHS must issue requests for proposals for ASO candidates. 27 ASO may be either a mental health and disability services 28 system regional administrator formed prior to July 1, 2025, or 29 a public or private agency in a behavioral health district, or 30 any separate organizational unit within the public or private 31 agency, that has the capabilities to engage in the planning or

32 provision of a broad range of behavioral health prevention, 33 education, early intervention, treatment, recovery support,

35 is required to consider several factors as outlined in the

34 and crisis services only as directed by the department.

1 division when determining whether to designate an entity as an 2 ASO. Upon an entity's designation as an ASO, the entity is 3 considered an instrumentality of the state and must adhere to 4 all state and federal mandates and prohibitions applicable to 5 an instrumentality of the state. Each ASO must function as a subrecipient for the purposes 7 of the federal community mental health services block grant 8 and the federal substance abuse prevention and treatment 9 block grant. Duties an ASO must perform are detailed in 10 the division. The division requires each ASO to establish a 11 district behavioral health advisory council (advisory council). 12 An advisory council must perform duties as detailed in the 13 division to assist the ASO in carrying out the ASO's duties. 14 An advisory council must consist of nine members. 15 members must be elected public officials currently holding 16 office, or the public official's designated representative; 17 three members must be chosen in accordance with procedures 18 established by the ASO to ensure representation of the 19 populations served within the behavioral health district; and 20 three members must have experience or education related to 21 core behavioral health functions, essential behavioral health 22 services, behavioral health prevention, behavioral health 23 treatment, population-based behavioral health services, or 24 community-based behavioral health services. The division requires HHS to take certain actions for data 26 related to the BHSS including but not limited to the creation 27 of a central data repository for collecting and analyzing 28 state, behavioral health district, and contracted behavioral 29 health provider data. Each ASO must either utilize a data 30 system that integrates with the data systems used by HHS 31 or utilize a data system that has the capacity to securely 32 exchange information with the department, other behavioral 33 health districts, contractors, and other entities involved 34 with the BHSS who are authorized to access the central data 35 repository. Data and information maintained by and exchanged

1 between an ASO and HHS must be labeled consistently, share 2 the same definitions, utilize the same common coding and 3 nomenclature, and be in a form and format as required by HHS 4 by rule. Each ASO is required to report information including 5 but not limited to demographic information, expenditure data, 6 and data concerning the services and other support provided 7 to individuals, to HHS in a manner specified by HHS. 8 required to ensure that ASOs, behavioral health providers, and 9 contracting entities operating within the BHSS maintain uniform 10 methods for keeping statistical information relating to BHSS 11 outcomes and performance. 12 The division establishes a behavioral health fund (BHS 13 fund). For the purposes of the BHS fund, the division 14 defines the terms "population" and "state growth factor". 15 Moneys deposited into the BHS fund are appropriated to HHS 16 to implement and administer the BHSS and related programs, 17 including but not limited to distributions to ASOs for 18 services; distributions to providers of tobacco use services, 19 substance use disorder services, and problem gambling services; 20 funding of disability services pursuant to Code chapter 231 21 (department of health and human services — aging — older 22 Iowans); and payment of associated administrative costs. 23 For FY 2025-2026, the division transfers an amount equal to 24 \$42 multiplied by the state's population for the fiscal year 25 from the general fund of the state to the BHS fund. 26 For fiscal years beginning on or after July 1, 2026, the 27 division transfers an amount from the general fund to the 28 BHS fund equal to the state's population for the fiscal year 29 multiplied by the sum of the dollar amount used to calculate 30 the transfer from the general fund to the BHS fund for the 31 immediately preceding fiscal year, plus the state growth factor 32 for the fiscal year for which the transfer is being made. For each fiscal year, the bill prohibits an ASO from spending 34 more than 7 percent of the total amount distributed to the ASO

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35 from HHS and other appropriations on administrative costs.

- 1 The division allows moneys in the BHS fund to be used for
- 2 cash flow purposes, provided that any moneys so allocated
- 3 are returned to the BHS fund by the end of each fiscal year.
- 4 Interest and earnings on moneys deposited into the BHS fund are
- 5 to be credited to the BHS fund. Moneys in the BHS fund that
- 6 remain unencumbered or unobligated at the close of the fiscal
- 7 year are to remain in the BHS fund to be used for the purposes
- 8 designated.
- 9 This division of the bill is effective July 1, 2025.
- 10 DIVISION II BEHAVIORAL HEALTH SERVICE SYSTEM —
- 11 CONFORMING CHANGES. This division of the bill makes conforming
- 12 changes related to the implementation of the BHSS.
- 13 The bill repeals Code chapters 142A (tobacco use prevention
- 14 and control), 225C (mental health and disability services), 227
- 15 (facilities for persons with mental illness or an intellectual
- 16 disability), 230A (community mental health centers), and 347B
- 17 (county care facilities).
- 18 The bill repeals Code sections 125.1, 125.3, 125.7, 125.9,
- 19 125.10, 125.12, 125.25, 125.32A, 125.33, 125.34, 125.37 through
- 20 125.44, 125.46, 125.48, 125.54, 125.55, 125.58, 125.59, 125.60,
- 21 135B.18, 218.99, 222.59 through 222.70, 222.74, 222.75, 225.10,
- 22 225.19, 225.21, 225.24, 226.45, 227.4, 229.42, 230.1A, 230.2
- 23 through 230.6, 230.9, 230.12, 230.16 through 230.22, 230.25,
- 24 230.26, 426B.2, 426B.4, and 426B.5.
- 25 This division of the bill takes effect July 1, 2025.
- 26 DIVISION III AGING AND DISABILITY. This division of the
- 27 bill relates to aging and disability services.
- 28 The division adds individuals with disabilities as a class
- 29 of individuals the general assembly intends to provide support
- 30 for under Code chapter 231 (department of health and human
- 31 services aging older Iowans).
- 32 The division declares the general assembly's recognition
- 33 of a brain injury as a disability, and directs each agency
- 34 and subdivision of the state to recognize a brain injury as a
- 35 distinct disability. The division defines "brain injury" for

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- 1 the purposes of Code chapter 231.
- 2 The division adds individuals with disabilities as a class
- 3 of persons that HHS is required to serve, advocate for, and
- 4 consult pursuant to Code chapter 231.
- 5 The division requires HHS to designate aging and disability
- 6 resource centers to establish a coordinated system of providing
- 7 assistance to persons interested in long-term living or
- 8 community support services.
- 9 Current Code sections 225C.25, 225C.26, 225C.28A, and
- 10 225C.28B, "the bill of rights and service quality standards
- 11 of persons with an intellectual disability, developmental
- 12 disabilities, brain injury, or chronic mental illness", are
- 13 amended and moved to Code sections 231.75 through 231.79.
- 14 The division repeals Code sections 225C.35 through 225C.42
- 15 (sections related to the family support subsidy) and 225C.45
- 16 (public housing program).
- 17 The sections of the division amending the following Code
- 18 sections take effect July 1, 2025: 231.3, 231.4(1), 231.23(4),
- 19 231.23(7), 231.23A(1), 231.23A(7A), 231.56, 231.57, 231.58, and
- 20 231.64(2).
- 21 The sections of the division enacting Code sections 231.75
- 22 through 231.79 take effect July 1, 2025.
- 23 DIVISION IV TRANSITION PROVISIONS. This division
- 24 provides a process during the period beginning July 1, 2024,
- 25 and concluding June 30, 2025, to transition the state's
- 26 behavioral health services to the BHSS and the state's
- 27 disability services to HHS's division of aging and disability
- 28 services, effective July 1, 2025.