

**Senate File 2354 - Introduced**

SENATE FILE 2354  
BY COMMITTEE ON HEALTH AND  
HUMAN SERVICES

(SUCCESSOR TO SSB 3146)

(COMPANION TO HF 2509 BY  
COMMITTEE ON HEALTH AND HUMAN  
SERVICES)

**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:

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DIVISION I

BEHAVIORAL HEALTH SERVICE SYSTEM

Section 1. NEW SECTION. 225A.1 Definitions.

As used in this chapter unless the context otherwise requires:

1. "*Administrative services organization*" means an entity designated by the department pursuant to section 225A.4, to develop and perform planning and administrative services in accordance with a district behavioral health service system plan.

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

3. "*Behavioral health district*" or "*district*" means a geographic, multicounty, sub-state area as designated by the department under section 225A.4.

4. "*Behavioral health provider*" or "*provider*" means an individual, firm, corporation, association, or institution that, pursuant to this chapter, is providing or has been approved by the department to provide services to an individual with a behavioral health condition.

5. "*Behavioral health service system*" means the behavioral health service system established in section 225A.3.

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

7. "*Department*" means the department of health and human services.

8. "*Director*" means the director of the department of health and human services.

9. "*District behavioral health advisory council*" or "*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.

14 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 1. 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 1. *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 1. 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 1. 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.

19 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.

23 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.

20 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     1. 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".

3     3. 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.

24     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".

3 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,  
11 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 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:

11 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:

22 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

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:

12 b. ~~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 ~~faeility~~ 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

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.

2 Sec. 26. Section 142.1, Code 2024, is amended to read as  
3 follows:

4 **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  
32 no expense to the state or county. Unless such friend provides  
33 for burial and burial expenses within five days, the body shall  
34 be used for scientific purposes under [this chapter](#).

35 Sec. 27. Section 142.3, Code 2024, is amended to read as

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 1. [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.

22 Sec. 34. Section 222.13, Code 2024, is amended to read as  
23 follows:

24 **222.13 Voluntary admissions.**

25 1. 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~~

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.

7 2. 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~~

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:

13 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 1. 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.

25 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. NEW SECTION. **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.

29 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.

7 ~~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 Sec. 55. Section 225.16, subsection 1, Code 2024, is amended  
15 to read as follows:

16 1. 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  
34 to read as follows:

35 2. When the respondent arrives at the hospital, the

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](#).

16     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. *0a.* "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](#).

14 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.

29 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.

20 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.

24     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. The  
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.

7 Sec. 74. Section 229.11, subsection 1, unnumbered paragraph  
8 1, Code 2024, is amended to read as follows:

9 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.

2 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  
34 follows:

35 **229.38 Cruelty or official misconduct.**

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.

22 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:

15 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 Sec. 90. NEW SECTION. 230.23 State — payor of last resort.

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:

4 **230.30 Claim against estate.**

5 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.

14 Sec. 92. Section 232.78, subsection 5, unnumbered paragraph  
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:

26 Sec. 93. Section 232.83, subsection 2, unnumbered paragraph  
27 1, Code 2024, is amended to read as follows:

28 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



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     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.

14     8. [This subsection](#) applies only to placements in a juvenile  
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  
18 home. 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  
35 subsection shall be settled in the manner provided to determine

1 ~~residency county of residence in section 225C.61~~ 35D.9.

2 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, guardian 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.

28 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. NEW SECTION. 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.

2 2. 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 1. 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  
 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.

1     Sec. 105. Section 321.189, subsection 10, Code 2024, is  
2 amended to read as follows:

3     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

1 the applicant's autism spectrum disorder status.

2 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  
11 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:

18 *b.* *"Program"* means a substance use disorder awareness  
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:

24 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  
28 4. 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



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 ~~230.35~~, 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

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.

22 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:

8 3. 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 "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:

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:

31     *f.* A defendant committed under [this section](#) who does not  
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  
35 ~~provided in [section 125.44](#)~~ by the applicable administrative

1 services organization designated pursuant to section 225A.4.

2 Sec. 134. Section 462A.14, subsection 13, paragraph c, Code  
3 2024, is amended to read as follows:

4 c. 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  
22 for Iowa income taxes while hunting or fishing. In lieu of  
23 carrying the person's earnings statement, the military person  
24 may also claim residency if the person is registered to vote  
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 ~~faeilities 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.~~

3 Sec. 137. Section 714.8, subsection 12, Code 2024, is  
4 amended to read as follows:

5 12. 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 1. 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:

7 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.

19 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     1. 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    ~~4.~~ d. Access to comprehensive information and a community  
11 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.

16     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     1. 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:

11 **231.64 Aging and disability resource ~~center~~ centers.**

12 1. ~~The aging~~ Aging and disability resource ~~center~~ 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 ~~center~~ 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 1. 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.

32 4. 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 1. 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".

1 3. 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 1. 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.

13 f. Section 231.64, subsection 2.

14 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 1. 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 g. "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 g. 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  
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

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  
26 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.

7 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  
11 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. HHS must  
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. An  
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,  
34 and crisis services only as directed by the department. HHS  
35 is required to consider several factors as outlined in the

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.

6 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. Three  
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.

25 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. HHS is  
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.

33 For each fiscal year, the bill prohibits an ASO from spending  
34 more than 7 percent of the total amount distributed to the ASO  
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



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.