

House File 984 - Introduced

HOUSE FILE 984
BY COMMITTEE ON WAYS AND MEANS

(SUCCESSOR TO HF 833)
(SUCCESSOR TO HSB 153)

A BILL FOR

1 An Act relating to services and support for youth, including
2 treatment, physical assessments, and behavioral health
3 evaluations for youth involved in juvenile delinquency and
4 child in need of assistance proceedings; the licensing and
5 certification of certain residential facilities; the provision
6 of home and community-based services and habilitation services
7 to certain youth by residential programs; administration and
8 supervision of juvenile court services; and the suspension of
9 Hawki eligibility for inmates of public institutions.
10 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

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DIVISION I

SERVICES AND SUPPORT FOR CHILDREN AND YOUTH

Section 1. Section 125.13, subsection 2, Code 2025, is amended by adding the following new paragraph:

NEW PARAGRAPH. k. A psychiatric medical institution for children licensed under chapter 135H, unless the psychiatric medical institution for children provides substance use disorder services.

Sec. 2. Section 135H.1, Code 2025, is amended to read as follows:

135H.1 Definitions.

As used in this chapter, unless the context otherwise requires:

1. "Approved qualifying organization" means any of the following:

- a. The joint commission.
- b. The commission on accreditation of rehabilitation facilities.
- c. The council on accreditation.
- d. A nationally recognized accrediting organization with standards comparable to the entities listed in paragraphs "a" through "c" that are acceptable under federal regulations.
- e. An entity specified by rule adopted by the department in consultation with the department of health and human services.

~~1.~~ 2. "Department" means the department of inspections, appeals, and licensing.

~~2.~~ 3. "Direction" means authoritative policy or procedural guidance for the accomplishment of a function or an activity.

~~3.~~ 4. "Licensee" means the holder of a license issued to operate a psychiatric medical institution for children.

~~4.~~ 5. "Medical care plan" means a plan of care and services designed to eliminate the need for inpatient care by improving the condition of a child youth. Services must be based upon a diagnostic evaluation, which includes an examination a physical assessment and behavioral health evaluation of the medical,

1 psychological, social, behavioral, and developmental aspects of
2 the child's youth's situation, reflecting the need for inpatient
3 care.

4 6. "Mental health disorder" means any of the following:

5 a. A mental disorder as defined by the most recent version
6 of the diagnostic and statistical manual of mental disorders
7 published by the American psychiatric association.

8 b. A mental disorder included in the mental, behavioral, or
9 neurodevelopmental disorders chapter in the most recent version
10 of the international classification of diseases published by the
11 world health organization.

12 ~~5.~~ 7. "Mental health professional" means an individual who
13 has all of the following qualifications:

14 a. The individual holds at least a master's degree in a
15 mental health field, including but not limited to, psychology,
16 counseling and guidance, nursing, and or social work, or the
17 individual is a physician.

18 b. The individual holds a current Iowa license if practicing
19 in a field ~~covered by that requires~~ an Iowa ~~licensure law~~
20 license.

21 c. The individual has at least two years of post-degree
22 clinical experience, supervised by another mental health
23 professional, in assessing mental health needs and problems and
24 in providing appropriate mental health services.

25 ~~6.~~ 8. "Nursing care" means services which are provided under
26 the direction of a physician or registered nurse.

27 ~~7.~~ 9. "Physician" means a person licensed under chapter 148.

28 10. "Protective locked environment" means a setting that
29 prevents egress from a building or grounds as a protective
30 measure to ensure safety and security.

31 ~~8.~~ 11. "Psychiatric medical institution for children" or
32 "psychiatric institution" means an institution providing more
33 than twenty-four hours of continuous care involving long-term
34 psychiatric services to three or more children youth in residence
35 for expected periods of fourteen or more days for an assessment,

1 evaluation, and diagnosis and evaluation or for expected periods
2 of ninety days or more for treatment.

3 ~~9.~~ 12. "Psychiatric services" means services provided under
4 the direction of a physician which address mental, emotional,
5 medical, or behavioral problems.

6 13. "Record check evaluation system" means the same as
7 defined in section 135C.1.

8 ~~10.~~ 14. "Rehabilitative services" means services to
9 encourage and assist restoration of a resident's optimum mental
10 and physical capabilities.

11 ~~11.~~ 15. "Resident" means a person who is less than
12 twenty-one years of age and youth who has been admitted by a
13 physician to a psychiatric medical institution for children.

14 16. "Serious emotional disturbance" means a diagnosable
15 mental, behavioral, or emotional disorder that meets the
16 diagnostic criteria specified in the most current diagnostic and
17 statistical manual of mental disorders published by the American
18 psychiatric association. "Serious emotional disturbance" does
19 not include a substance use disorder or developmental disorder
20 unless such disorder co-occurs with a diagnosable mental,
21 behavioral, or emotional disorder.

22 17. "Substance use disorder" means the same as defined in
23 section 125.2.

24 ~~12.~~ 18. "Supervision" means direct oversight and inspection
25 of the an act of accomplishing that accomplishes a function or
26 activity.

27 19. "Youth" means a person who is less than twenty-one years
28 of age.

29 Sec. 3. Section 135H.3, Code 2025, is amended to read as
30 follows:

31 **135H.3 Nature of care.**

32 1. a. A psychiatric medical institution for children shall
33 provide shelter, food, supervision, care, assessment, evaluation,
34 diagnosis, treatment, counseling, rehabilitative services, and
35 related professional-directed services to youth who have a

1 serious emotional disturbance, a substance use disorder, or both,
2 with the intention of reducing or ameliorating the disorder, the
3 symptoms of the disorder, or the effects of the disorder.

4 b. A psychiatric medical institution for children shall
5 utilize a team of professionals to direct an organized program
6 of diagnostic services, psychiatric services, nursing care,
7 and rehabilitative services to meet the needs of residents in
8 accordance with a medical care plan developed for each resident.
9 The membership of the team of professionals may include but is
10 not limited to an advanced registered nurse practitioner or a
11 physician assistant. Social and rehabilitative services shall
12 be provided under the direction of a qualified mental health
13 professional.

14 2. If a child youth is diagnosed with a biologically
15 based mental illness as defined in section 514C.22 and meets
16 the medical assistance program criteria for admission to a
17 psychiatric medical institution for children, the child youth
18 shall be deemed to meet the acuity criteria for medically
19 necessary inpatient benefits under a group policy, contract, or
20 plan providing for third-party payment or prepayment of health,
21 medical, and surgical coverage benefits issued by a carrier, as
22 defined in section 513B.2, that is subject to section 514C.22.
23 Such medically necessary benefits shall not be excluded or denied
24 as care that is substantially custodial in nature under section
25 514C.22, subsection 8, paragraph "b".

26 Sec. 4. Section 135H.4, Code 2025, is amended to read as
27 follows:

28 **135H.4 Licensure.**

29 1. A person shall not establish, operate, or maintain a
30 psychiatric medical institution for children unless the person
31 ~~obtains a license for the institution under this chapter and~~
32 ~~either holds a license under section 237.3, subsection 2,~~
33 ~~paragraph "a", as a comprehensive residential facility for~~
34 ~~children or holds a license under section 125.13, if the facility~~
35 ~~provides substance use disorder treatment~~ under chapter 237, and

1 holds a license under this chapter.

2 2. In addition to the requirements under subsection 1, a
3 person shall not provide substance use disorder services at a
4 psychiatric medical institution for children unless the person
5 holds a license under section 125.13. The department of health
6 and human services shall adopt rules pursuant to chapter 17A to
7 create an expedited process for a person to simultaneously obtain
8 a license under section 125.13, a license as a comprehensive
9 residential facility for children under chapter 237, and a
10 license under this chapter.

11 Sec. 5. Section 135H.5, Code 2025, is amended to read as
12 follows:

13 **135H.5 Application for license — initial application and**
14 **annual fees.**

15 1. An application for a license under this chapter shall
16 be submitted on a form requesting information required by
17 the department, which. The application may include require
18 affirmative evidence of the applicant's ability to comply with
19 the rules for standards adopted pursuant to this chapter. The
20 application shall require the applicant to specify whether the
21 applicant intends to provide services for serious emotional
22 disturbances, substance use disorders, or both.

23 2. An application for a license shall be accompanied by the
24 required license fee which shall be credited to the general fund
25 of the state. The initial application fee and the annual license
26 fee is twenty-five dollars.

27 Sec. 6. Section 135H.6, subsections 1, 4, and 5, Code 2025,
28 are amended to read as follows:

29 1. The department shall issue a license to an applicant under
30 this chapter if all the following conditions exist:

31 a. The department has ascertained that the applicant's
32 medical facilities and staff are adequate to provide the care
33 and services required of a psychiatric medical institution for
34 children.

35 b. The proposed psychiatric institution is accredited by

1 ~~the joint commission on the accreditation of health care~~
2 ~~organizations, the commission on accreditation of rehabilitation~~
3 ~~facilities, the council on accreditation of services for families~~
4 ~~and children, or by any other recognized accrediting organization~~
5 ~~with comparable standards acceptable under federal regulation an~~
6 ~~approved qualifying organization.~~

7 c. The applicant complies with applicable state rules and
8 standards for a psychiatric institution adopted by the department
9 in accordance with federal requirements under 42 C.F.R. §441.150
10 - 441.156.

11 d. The department of health and human services has submitted
12 written approval of the application based on the department of
13 health and human services' determination of need. The department
14 of health and human services shall identify the location and
15 number of ~~children~~ youth in the state who require the services
16 of a psychiatric medical institution for children. Approval of
17 an application shall be based upon the location of the proposed
18 psychiatric institution relative to the need for services
19 identified by the department of health and human services and
20 an analysis of the applicant's ability to provide services
21 and support consistent with requirements under chapter 232,
22 ~~particularly regarding~~ specifically community-based treatment.
23 If the proposed psychiatric institution is not freestanding from
24 a facility licensed under chapter 135B or 135C, approval under
25 this paragraph shall not be given unless the department of
26 health and human services certifies that the proposed psychiatric
27 institution is capable of providing a resident with a living
28 environment similar to the living environment provided by a
29 licensee which is freestanding from a facility licensed under
30 chapter 135B or 135C.

31 ~~e. The proposed psychiatric institution is under the~~
32 ~~direction of an agency which has operated a facility licensed~~
33 ~~under section 237.3, subsection 2, paragraph "a", as a~~
34 ~~comprehensive residential facility for children for three years~~
35 ~~or of an agency which has operated a facility for three~~

1 ~~years providing psychiatric services exclusively to children or~~
2 ~~adolescents and the facility meets or exceeds requirements for~~
3 ~~licensure under section 237.3, subsection 2, paragraph "a", as a~~
4 ~~comprehensive residential facility for children.~~

5 ~~f. e.~~ If a child youth has an a serious emotional,
6 ~~behavioral, or mental health disorder disturbance,~~ the
7 psychiatric institution does not require ~~court~~ any of the
8 following as a condition for the youth to obtain treatment:

9 (1) Court proceedings to be initiated ~~or that a child's.~~

10 (2) For the youth's parent, guardian, or custodian must to
11 terminate parental rights over, or transfer legal custody of,
12 the child for the purposes of obtaining treatment from the
13 psychiatric institution for the child youth.

14 (3) Relinquishment of a child's the youth's custody shall not
15 be a condition of the child receiving services.

16 4. The department of health and human services may give
17 ~~approval to~~ approve a conversion of beds approved under
18 ~~subsection 2, to if the~~ beds which are specialized to provide
19 substance use disorder treatment. However, the total number of
20 beds approved under subsection 2 and this subsection shall not
21 exceed four hundred thirty, unless approved for good cause by the
22 director pursuant to subsection 2. ~~Beds~~ The limitations on the
23 number of beds under this section shall not apply to beds for
24 ~~children~~ youth who do not reside in this state and whose service
25 costs are not paid by public funds in this state are ~~not subject~~
26 ~~to the limitations on the number of beds requirements otherwise~~
27 ~~applicable under this section.~~

28 5. ~~A psychiatric institution licensed prior to July 1, 1999,~~
29 ~~may exceed the number of beds authorized under subsection 2~~
30 ~~if the excess beds are used to provide services funded from a~~
31 ~~source other than the medical assistance program under chapter~~
32 ~~249A. Notwithstanding subsection 1, paragraph "d", and subsection~~
33 ~~2, the provision of services using those excess beds does not~~
34 ~~require a review by the department of health and human services.~~

35 Sec. 7. Section 135H.7, subsection 2, paragraph a, Code 2025,

1 is amended to read as follows:

2 a. If a person who has been convicted of a crime or has a
3 record of founded child abuse is being considered for licensure
4 under this chapter, ~~or for employment with a psychiatric~~
5 institution involving direct responsibility for a ~~child youth~~
6 or ~~with~~ access to a ~~child youth~~ when the ~~child youth~~ is alone,
7 ~~by a licensed psychiatric institution,~~ or if a person will
8 reside ~~residence~~ in a facility utilized by a licensee, and ~~if~~
9 ~~the person has been convicted of a crime or has a record of~~
10 ~~founded child abuse,~~ the record check evaluation system and
11 the licensee ~~for an employee of the licensee~~ considering the
12 person for employment shall perform an evaluation to determine
13 whether the crime or founded child abuse warrants prohibition of
14 licensure, employment, or residence in the facility utilized by a
15 licensee. The record check evaluation system ~~of the department~~
16 ~~of health and human services~~ shall conduct criminal and child
17 abuse record checks in this state and may conduct these checks
18 in other states. The record check evaluation shall be performed
19 in accordance with procedures adopted for this purpose by the
20 department of health and human services.

21 Sec. 8. NEW SECTION. **135H.7A Protective locked environment**
22 **— rules.**

23 The department, in cooperation with the department of health
24 and human services, shall adopt rules pursuant to chapter 17A
25 relating to the application of a protective locked environment in
26 a psychiatric medical institution for children.

27 Sec. 9. Section 135H.10, subsection 2, Code 2025, is amended
28 to read as follows:

29 2. This chapter shall not be construed ~~as prohibiting the use~~
30 ~~of to prohibit~~ funds appropriated for foster care ~~to~~ from being
31 used to provide payment to a psychiatric medical institution
32 for children for the financial participation required of a
33 ~~child youth~~ whose foster care placement is in a psychiatric
34 medical institution for children. In accordance with established
35 policies and procedures for foster care, the department of health

1 and human services shall act to recover any such payment for
2 financial participation, apply to be named payee for the child's
3 youth's unearned income, and recommend parental liability for the
4 costs of a court-ordered foster care placement in a psychiatric
5 ~~medical~~ institution.

6 Sec. 10. Section 135H.13, subsection 1, Code 2025, is amended
7 to read as follows:

8 1. The department's final findings and the ~~survey~~ findings
9 of ~~the joint commission on the accreditation of health care~~
10 ~~organizations~~ an approved qualifying organization regarding
11 licensure or program accreditation shall be made available to the
12 public in a readily available form and place. Other information
13 relating to the psychiatric institution is confidential and
14 shall not be made available to the public except in ~~proceedings~~
15 a proceeding involving licensure, a civil suit involving a
16 resident, or an administrative action involving a resident.

17 Sec. 11. Section 232.2, Code 2025, is amended by adding the
18 following new subsections:

19 NEW SUBSECTION. 3A. "*Behavioral health condition*" means
20 a serious emotional disturbance, a mental health disorder,
21 a substance abuse disorder, life stressors and crises, and
22 stress-related physical symptoms.

23 NEW SUBSECTION. 3B. "*Behavioral health evaluation*" means a
24 process used to assess an individual's behavioral health status
25 and functioning for purposes including but not limited to the
26 diagnosis of a behavioral health condition or to determine the
27 need for treatment or intervention.

28 NEW SUBSECTION. 38A. "*Mental health disorder*" means the same
29 as defined in section 135H.1.

30 NEW SUBSECTION. 48A. "*Physical assessment*" means direct
31 physical touching, viewing, and medically necessary manipulation
32 of any area of a child's body by a physician licensed under
33 chapter 148.

34 NEW SUBSECTION. 58A. "*Serious emotional disturbance*" means
35 the same as defined in section 135H.1.

1 NEW SUBSECTION. 64A. "Substance use disorder" means the same
2 as defined in section 125.2.

3 Sec. 12. Section 232.2, subsection 34, Code 2025, is amended
4 to read as follows:

5 34. "Juvenile court social records" or "social records" means
6 all records, other than official records, made with respect to
7 a child in connection with proceedings over which the court has
8 jurisdiction under this chapter ~~other than official records~~ and
9 includes but is not limited to ~~the~~ records made and compiled
10 by intake officers, predisposition reports, and reports of
11 physical assessments and ~~mental examinations~~ behavioral health
12 evaluations.

13 Sec. 13. Section 232.8, subsection 4, Code 2025, is amended
14 to read as follows:

15 4. In a proceeding concerning a child who is alleged to have
16 committed a second delinquent act or a second violation excluded
17 from the jurisdiction of the juvenile court, the court or the
18 juvenile court shall determine whether there is reason to believe
19 that the child ~~regularly abuses alcohol or other controlled~~
20 ~~substance~~ has a behavioral health condition and may be in need
21 of treatment. If the court so determines, the court shall advise
22 appropriate juvenile authorities and refer such offenders to the
23 juvenile court for disposition pursuant to section 232.52A.

24 Sec. 14. Section 232.49, Code 2025, is amended to read as
25 follows:

26 **232.49 Physical assessments and mental examinations**
27 **behavioral health evaluations — juvenile delinquency.**

28 1. a. ~~Following~~ Any time after the entry of an order of
29 adjudication under section 232.47, the court may, after a hearing
30 ~~which may be simultaneous with the adjudicatory hearing,~~ order
31 a physical assessment or ~~mental examination~~ behavioral health
32 evaluation of a child if ~~it~~ the court finds that ~~an examination~~
33 a physical assessment or a behavioral health evaluation is
34 necessary to determine the child's physical condition or ~~mental~~
35 to determine if the child has a behavioral health condition.

1 b. The court may consider chemical dependency as either a
2 physical condition or mental behavioral health condition and may
3 consider a chemical dependency evaluation as either a physical
4 assessment or ~~mental examination~~ behavioral health evaluation.
5 ~~If the examination~~

6 c. A hearing to order a physical assessment or behavioral
7 health evaluation may be held at the same time as the
8 adjudicatory hearing.

9 2. Unless otherwise ordered by the court, if a physical
10 assessment or behavioral health evaluation indicates the child
11 has behaved in a manner that threatened the safety of another
12 person, has committed a violent act causing bodily injury to
13 another person, or has been a victim or perpetrator of sexual
14 abuse, ~~unless otherwise ordered by the court,~~ the child's parent,
15 guardian, ~~or~~ foster parent, or other person with custody of the
16 child shall be provided with that information.

17 ~~2.~~ 3. a. When possible an examination, a physical
18 assessment or behavioral health evaluation shall be conducted on
19 an outpatient basis, ~~but.~~ However, if deemed necessary by the
20 court, the court may, ~~if it deems necessary~~ commit order the
21 child to a suitable hospital, facility, or institution for the
22 purpose of examination an inpatient physical assessment or an
23 inpatient behavioral health evaluation.

24 b. ~~Commitment for examination~~ An inpatient physical
25 assessment or an inpatient behavioral health evaluation shall not
26 exceed thirty days and ~~the civil commitment provisions of chapter~~
27 ~~229 shall not apply.~~

28 ~~3.~~ 4. a. ~~At any~~ Any time after the filing of a delinquency
29 petition, the court may order a physical assessment or ~~mental~~
30 examination behavioral health evaluation of the child if all of
31 the following circumstances apply:

32 (1) The court finds ~~such examination~~ a physical assessment or
33 a behavioral health evaluation to be in the best interest of the
34 child; ~~and.~~

35 (2) The parent, guardian, or custodian and the child's

1 counsel agree to the physical assessment or behavioral health
2 evaluation.

3 b. (1) ~~An examination~~ A physical assessment or behavioral
4 health evaluation shall be conducted on an outpatient basis
5 unless the court, the child's counsel, and the child's parent,
6 guardian, or custodian agree that ~~it is necessary~~ the child
7 should be committed ordered to a suitable hospital, facility,
8 or institution for the purpose of ~~examination~~ an inpatient
9 physical assessment or an inpatient behavioral health evaluation.
10 ~~Commitment for examination~~

11 (2) An inpatient physical assessment or inpatient behavioral
12 health evaluation shall not exceed thirty days and ~~the civil~~
13 ~~commitment provisions of chapter 229 shall not apply~~.

14 Sec. 15. Section 232.52A, subsection 1, Code 2025, is amended
15 to read as follows:

16 1. In addition to any other order of the juvenile court,
17 ~~a person under age eighteen,~~ child who may be in need of
18 treatment, as determined under section 232.8, may be ordered to
19 ~~participate in an alcohol or controlled substance education or~~
20 a physical assessment or behavioral health evaluation program
21 approved by the juvenile court. If recommended after evaluation,
22 ~~the~~ The court may also order the ~~person~~ child to participate
23 in a treatment program approved by the court if the treatment
24 program is recommended after the child's physical assessment
25 or behavioral health evaluation. The juvenile court may
26 also require the custodial parent or parents, or other legal
27 guardian, to participate in an educational program with the
28 ~~person under age eighteen~~ child if the court determines that such
29 participation is in the best interests of the ~~person under age~~
30 eighteen child.

31 Sec. 16. Section 232.68, subsection 3, unnumbered paragraph
32 1, Code 2025, is amended to read as follows:

33 "Confidential access to a child" means access to a child,
34 ~~during an assessment of an alleged act of child abuse,~~ who is
35 alleged to be the victim of the child abuse, during a child

1 abuse assessment. The access may be accomplished by interview,
2 observation, or ~~examination~~ physical assessment of the child. As
3 used in this subsection and this part:

4 Sec. 17. Section 232.68, subsection 3, paragraph c, Code
5 2025, is amended by striking the paragraph.

6 Sec. 18. Section 232.69, subsection 3, paragraph b, Code
7 2025, is amended to read as follows:

8 b. A person required to make a report under subsection 1,
9 other than a physician whose professional practice does not
10 regularly involve providing primary health care to children,
11 shall complete the core training curriculum relating to the
12 identification and reporting of child abuse within six months of
13 initial employment or self-employment ~~involving the examination~~
14 physical assessments or behavioral health evaluations, or
15 attending, counseling, or treatment of treating children on a
16 regular basis. Within one month of initial employment or
17 self-employment, the person shall obtain a statement of the
18 abuse reporting requirements from the person's employer or, if
19 self-employed, from the department. The person shall complete
20 the core training curriculum relating to the identification and
21 reporting of child abuse every three years.

22 Sec. 19. Section 232.71B, subsection 10, Code 2025, is
23 amended to read as follows:

24 10. *Physical examination assessment*. If the department
25 refers a child to a physician or physician assistant for a
26 ~~physical examination~~ assessment, the department shall contact
27 the physician or physician assistant regarding the ~~examination~~
28 physical assessment within twenty-four hours of making the
29 referral. If the physician or physician assistant who performs
30 the ~~examination upon referral by the department~~ physical
31 assessment reasonably believes the child has been abused, the
32 physician or physician assistant shall report to the department
33 within twenty-four hours of performing the ~~examination~~ physical
34 assessment.

35 Sec. 20. Section 232.77, subsection 1, Code 2025, is amended

1 to read as follows:

2 1. a. A person who is required to report suspected child
3 abuse may take or perform, or may cause to be taken or
4 performed, at public expense, photographs, X rays, ~~or other~~
5 physical examinations assessments, or other tests of a child
6 which would provide medical indication of allegations arising
7 from an assessment.

8 b. A health practitioner may, if medically indicated, cause
9 to be performed a radiological examination, physical examination
10 assessment, or other medical tests test of the child.

11 c. A person who takes any photographs or X rays or performs
12 any physical examinations assessments or other tests pursuant to
13 this section shall notify the department that the photographs or
14 X rays have been taken or the examinations physical assessments
15 or other tests have been performed. ~~The person who made~~
16 notification, and shall retain the photographs, ~~or~~ X rays, ~~or~~
17 examination physical assessment or other test findings for a
18 reasonable time following the notification.

19 d. Whenever the person is required to report under section
20 232.69, in that person's capacity as a member of the staff of
21 a medical or other private or public institution, agency or
22 facility, that person shall immediately notify the person in
23 charge of the institution, agency, or facility or that person's
24 designated delegate of the need for photographs, ~~or~~ X rays ~~or~~
25 examinations, physical assessments, or other tests.

26 Sec. 21. Section 232.78, subsection 1, paragraph a, Code
27 2025, is amended to read as follows:

28 a. Any of the following circumstances exist:

29 (1) The person responsible for the care of the child consents
30 to the removal.

31 (2) The person responsible for the care of the child is
32 absent, ~~or~~.

33 (3) The person responsible for the care of the child, though
34 present, was asked and refused to consent to the removal of the
35 child and was informed of an intent to apply for an order under

1 this section,~~or there.~~

2 (4) There is reasonable cause to believe that a request for
3 consent would further endanger the child,~~or there.~~

4 (5) There is reasonable cause to believe that a request
5 for consent will cause the parent,~~guardian, or legal custodian~~
6 person responsible for the care of the child to take flight with
7 the child.

8 Sec. 22. Section 232.78, subsection 1, paragraph c,
9 subparagraph (1), Code 2025, is amended to read as follows:

10 (1) The refusal or failure of the person responsible for
11 the care of the child to comply with the request of a peace
12 officer, juvenile court officer, or child protection worker for
13 ~~such~~ the person to obtain and provide to the requester the
14 results of a physical assessment or ~~mental examination~~ behavioral
15 health evaluation of the child. The request for a physical
16 ~~examination~~ assessment of the child may specify the performance
17 of a medically relevant test.

18 Sec. 23. Section 232.78, subsection 5, Code 2025, is amended
19 to read as follows:

20 5. The juvenile court, before or after the filing of a
21 petition under this chapter, may enter an ex parte order
22 authorizing a ~~physician or physician assistant or hospital~~
23 ~~to conduct an~~ inpatient or outpatient physical examination or
24 ~~authorizing a physician or physician assistant, a psychologist~~
25 ~~certified under section 154B.7, or a community mental health~~
26 ~~center accredited pursuant to chapter 230A to conduct an~~
27 outpatient mental examination assessment or an inpatient or
28 outpatient behavioral health evaluation of a child ~~if necessary~~
29 ~~to identify the nature, extent, and cause of injuries to the~~
30 ~~child as required by section 232.71B, provided all of the~~
31 following apply:

32 a. Any of the following circumstances exist:

33 (1) The child's parent, guardian, or custodian consents to
34 the physical assessment or the behavioral health evaluation.

35 (2) The child's parent, guardian, or legal custodian is

1 absent,~~or~~.

2 (3) The child's parent, guardian, or custodian, though
3 present, was asked and refused to provide written consent to
4 the ~~examination~~ physical assessment or the behavioral health
5 evaluation.

6 b. The juvenile court has entered an ex parte order directing
7 the removal of the child from the child's home or a child care
8 facility under this section.

9 c. There is not enough time to file a petition and to hold a
10 hearing as provided in section 232.98.

11 Sec. 24. Section 232.79, subsection 5, Code 2025, is amended
12 to read as follows:

13 5. When there has been an emergency removal or keeping of a
14 child without a court order, a physical ~~examination~~ assessment of
15 the child by a licensed medical practitioner shall be performed
16 within twenty-four hours of such the emergency removal or keeping
17 of a child, unless the child is returned to the child's home
18 within twenty-four hours of the emergency removal or keeping of
19 a child.

20 Sec. 25. Section 232.83, subsection 2, Code 2025, is amended
21 to read as follows:

22 2. Anyone authorized to conduct a preliminary investigation
23 in response to a complaint may apply for, or the court on its
24 own motion may enter, an ex parte order authorizing a ~~physician~~
25 ~~or physician assistant or hospital to conduct an inpatient~~
26 or outpatient physical examination or authorizing a physician
27 ~~or physician assistant, a psychologist certified under section~~
28 ~~154B.7, or a community mental health center accredited pursuant~~
29 ~~to chapter 230A to conduct an outpatient mental examination~~
30 ~~of a child if necessary to identify the nature, extent, and~~
31 ~~causes of any injuries, emotional damage, or other such needs~~
32 ~~of a child as specified in section 232.96A, subsection 3, 5,~~
33 ~~or 6, assessment or an inpatient or outpatient behavioral health~~
34 evaluation provided that all of the following apply:

35 a. Any of the following circumstances exist:

1 (1) The parent, guardian, or custodian consents to the
2 physical assessment or the behavioral health evaluation.

3 (2) The parent, guardian, or legal custodian is absent, or.

4 (3) The parent, guardian, or custodian, though present,
5 was asked and refused to authorize the examination physical
6 assessment or the behavioral health evaluation.

7 b. There is not enough time to file a petition and hold a
8 hearing under this chapter.

9 c. The parent, guardian, or ~~legal~~ custodian has not provided
10 care and treatment related to ~~their~~ the child's alleged
11 victimization.

12 Sec. 26. Section 232.98, Code 2025, is amended to read as
13 follows:

14 **232.98 Physical and mental examinations assessments and**
15 **behavioral health evaluations — child in need of assistance.**

16 1. a. Except as provided in section 232.78, subsection 5,
17 a physical assessment or mental examination behavioral health
18 evaluation of the a child may be ordered only after the filing
19 of a petition pursuant to section 232.87, and after a hearing
20 to determine whether ~~an examination~~ a physical assessment or
21 behavioral health evaluation is necessary to determine the
22 child's physical condition or ~~mental~~ if the child has a
23 behavioral health condition.

24 b. The court may consider chemical dependency as either a
25 physical or mental behavioral health condition and may consider
26 a chemical dependency evaluation as either a physical assessment
27 or ~~mental examination~~ behavioral health evaluation.

28 ~~a.~~ c. The hearing required by this section may be held
29 simultaneously with the adjudicatory hearing.

30 ~~b.~~ d. ~~An examination~~ A physical assessment or a behavioral
31 health evaluation ordered prior to the adjudication shall be
32 conducted on an outpatient basis when possible, ~~but.~~ However,
33 if deemed necessary by the court, the court may ~~commit~~ order the
34 child to a suitable nonsecure hospital, facility, or institution
35 for the purpose of ~~examination~~ an inpatient physical assessment

1 or an inpatient behavioral health evaluation for a period not to
2 exceed ~~fifteen~~ thirty days if all of the following are ~~found to~~
3 ~~be present~~ circumstances exist:

4 (1) Probable cause exists to believe that the child is
5 a child in need of assistance pursuant to section 232.96A,
6 subsection 5 or 6.

7 (2) ~~Commitment~~ An inpatient physical assessment or inpatient
8 behavioral health evaluation is necessary to determine whether
9 there is clear and convincing evidence that the child is a child
10 in need of assistance.

11 (3) The child's attorney agrees to ~~the commitment~~ an
12 inpatient physical assessment or inpatient behavioral health
13 evaluation.

14 ~~e. e.~~ An examination A physical assessment or a behavioral
15 health evaluation ordered after the adjudication shall be
16 conducted on an outpatient basis when possible, ~~but.~~ However,
17 if deemed necessary by the court, the court may ~~commit~~ order the
18 child to a suitable nonsecure hospital, facility, or institution
19 for the purpose of ~~examination~~ an inpatient physical assessment
20 or an inpatient behavioral health evaluation for a period not to
21 exceed thirty days.

22 ~~d. f.~~ The child's parent, guardian, or custodian shall be
23 included in counseling sessions offered during the child's stay
24 in a hospital, facility, or institution when feasible, and when
25 in the best interests of the child and the child's parent,
26 guardian, or custodian. If separate counseling sessions are
27 conducted for the child and the child's parent, guardian, or
28 custodian, a joint counseling session shall be offered prior
29 to the release of the child from the hospital, facility, or
30 institution. The court shall require that notice be provided to
31 the child's guardian ad litem of the counseling sessions, ~~and of~~
32 the counseling session participants, ~~and results~~ the outcomes of
33 the counseling sessions.

34 2. Following an adjudication that a child is a child in
35 need of assistance, the court may, after a hearing, order ~~the~~

1 a physical assessment or ~~mental examination~~ behavioral health
2 evaluation of the child's parent, guardian, or custodian if that
3 person's ability to care for the child is at issue.

4 Sec. 27. Section 232.141, subsection 1, Code 2025, is amended
5 to read as follows:

6 1. Except as otherwise provided by law, the court shall
7 inquire into the ability of the child or the child's parent
8 to pay expenses incurred pursuant to subsections 2, 4, and
9 8. After giving the parent a reasonable opportunity to be
10 heard, the court may order the parent to pay all or part of
11 the costs of the child's care, ~~examination~~ physical assessment,
12 behavioral health evaluation, treatment, legal expenses, or other
13 expenses. An order entered under this section does not obligate
14 a parent paying child support under a custody decree, except
15 that part of the monthly support payment may be used to satisfy
16 the obligations imposed by the order entered pursuant to this
17 section. If a parent fails to pay as ordered, without good
18 reason, the court may proceed against the parent for contempt
19 and may inform the county attorney who shall proceed against the
20 parent to collect the unpaid amount. Any payment ordered by the
21 court shall be a judgment against each of the child's parents and
22 a lien as provided in section 624.23. If all or part of the
23 amount that the parents are ordered to pay is subsequently paid
24 by the county or state, the judgment and lien shall thereafter be
25 against each of the parents in favor of the county to the extent
26 of the county's payments and in favor of the state to the extent
27 of the state's payments.

28 Sec. 28. Section 232.141, subsection 4, paragraph b, Code
29 2025, is amended to read as follows:

30 b. Expenses for ~~mental or physical examinations~~ assessments
31 or behavioral health evaluations of a child if ordered by the
32 court.

33 Sec. 29. Section 232.141, subsection 6, Code 2025, is amended
34 to read as follows:

35 6. ~~If a child is given~~ A physical or mental examinations

1 assessment, behavioral health evaluation, or any treatment
2 relating to an assessment performed pursuant to section 232.71B,
3 shall be paid by the state if physical assessment, behavioral
4 health evaluation, or other treatment was performed with the
5 consent of the child's parent, guardian, or legal custodian and
6 no other provision of law otherwise requires payment for the
7 costs of the examination and treatment, the costs shall be paid
8 by the state. Reimbursement for The department shall reimburse
9 costs of services described in under this subsection is subject
10 to in accordance with subsection 5.

11 Sec. 30. Section 237.1, Code 2025, is amended by adding the
12 following new subsection:

13 NEW SUBSECTION. 8A. "Protective locked environment" means a
14 setting that prevents egress from a building or grounds as a
15 protective measure to ensure safety and security.

16 Sec. 31. Section 237.3, Code 2025, is amended by adding the
17 following new subsection:

18 NEW SUBSECTION. 13. The department shall adopt rules
19 pursuant to chapter 17A relating to the application of a
20 protective locked environment to child foster care licensees.

21 Sec. 32. Section 237C.1, Code 2025, is amended by adding the
22 following new subsection:

23 NEW SUBSECTION. 5. "Protective locked environment" means a
24 setting that prevents egress from a building or grounds as a
25 protective measure to ensure safety and security.

26 Sec. 33. Section 237C.4, Code 2025, is amended by adding the
27 following new subsection:

28 NEW SUBSECTION. 6A. Rules governing the application of
29 a protective locked environment to a children's residential
30 facility shall be adopted by the department.

31 Sec. 34. DEPARTMENT OF HEALTH AND HUMAN SERVICES —
32 DEPARTMENT OF INSPECTIONS, APPEALS, AND LICENSING —
33 ADMINISTRATIVE RULES.

34 1. The department of health and human services and the
35 department of inspections, appeals, and licensing shall each

1 adopt rules pursuant to chapter 17A to administer this division
2 of this Act. The departments shall coordinate in developing
3 their respective rules to provide continuity for, and maximize
4 utilization of the array of behavioral health services available
5 by, affected individuals.

6 2. a. The department of health and human services and the
7 department of inspections, appeals, and licensing shall review
8 applicable existing rules and shall each adopt rules pursuant to
9 chapter 17A to provide for the following relative to facilities
10 licensed or certified under chapters 135H, 237, and 237C:

11 (1) Consistency to the greatest extent possible regarding the
12 use of restraints and seclusion across these facilities.

13 (2) Adaptation in application of licensing and certification
14 requirements to provide for the unmet residential care needs of
15 affected individuals.

16 b. In reviewing and adopting the rules, the departments
17 shall consider the nature of the services and programming
18 provided by the specific type of facility and applicable
19 federal requirements, including those for psychiatric residential
20 treatment facilities as described in 42 C.F.R. §483.352.

21 3. The department of health and human services shall adopt
22 rules pursuant to chapter 17A relating to the application of
23 a protective locked environment to detention and shelter care
24 as defined in section 232.2. For purposes of this subsection,
25 "protective locked environment" means a setting that prevents
26 egress from a building or grounds as a protective measure to
27 ensure safety and security.

28 Sec. 35. REVIEW OF YOUTH SYSTEMS, SERVICES, AND SUPPORTS.

29 1. a. The department of health and human services shall
30 convene representatives of the department of health and human
31 services, the courts and practitioners involved in civil
32 commitment and juvenile justice proceedings, law enforcement and
33 corrections, hospital systems, service providers, individuals
34 with lived experience and their families, and four members
35 of the general assembly to review the systems and related

1 services and supports for youth, including but not limited to
2 the civil commitment and treatment provisions under chapters
3 125 and 229, and the juvenile delinquency and child in need of
4 assistance provisions under chapter 232. The members of the
5 general assembly shall include two senators, one appointed by the
6 majority leader of the senate and one appointed by the minority
7 leader of the senate, and two representatives, one appointed
8 by the majority leader of the house of representatives and one
9 appointed by the minority leader of the house of representatives.

10 b. The primary goal of the review is to facilitate and
11 enhance the interplay of the multidimensional aspects of the
12 systems, services, and supports for youth and the work of
13 the relevant stakeholders to ensure accessible and effectual
14 processes, procedures, protections, and services for affected
15 youth.

16 2. The department of health and human services shall report
17 the department's findings and recommendations from the review to
18 the governor and the general assembly by October 1, 2025.

19 Sec. 36. REPEAL. 2024 Iowa Acts, chapter 1161, sections 97
20 and 98, are repealed.

21 DIVISION II

22 HOME AND COMMUNITY-BASED SERVICES — HABILITATION SERVICES
23 PROVIDED BY A RESIDENTIAL PROGRAM — EXCLUSION FROM CHILDREN'S
24 RESIDENTIAL FACILITY DEFINITION

25 Sec. 37. Section 237C.1, subsection 2, Code 2025, is amended
26 by adding the following new paragraph:

27 NEW PARAGRAPH. j. Care furnished to persons sixteen years of
28 age and older by a residential program to which the department
29 applies accreditation, certification, or standards of review
30 under the provisions of a federally approved medical assistance
31 home and community-based services waiver, or other provision of
32 the medical assistance program.

33 Sec. 38. ADMINISTRATIVE RULES. The department of health and
34 human services shall adopt rules pursuant to chapter 17A to
35 require that the care furnished by an entity under section

1 237C.1, subsection 2, paragraph "j", as enacted in this division
2 of this Act, shall be provided to persons under eighteen years
3 of age in settings separate from individuals over the age of
4 twenty-one.

5 DIVISION III

6 DIRECTOR OF JUVENILE COURT SERVICES — CHIEF JUVENILE COURT
7 OFFICERS

8 Sec. 39. Section 602.1101, Code 2025, is amended by adding
9 the following new subsection:

10 NEW SUBSECTION. 5A. "Director of juvenile court services"
11 means the same as defined in the Iowa court rules of juvenile
12 court services directed programs as prescribed by the supreme
13 court and includes the deputy director of juvenile court
14 services.

15 Sec. 40. Section 602.1217, Code 2025, is amended to read as
16 follows:

17 **602.1217 Chief juvenile court officer.**

18 1. ~~The chief judge of~~ director of juvenile court services
19 shall appoint a chief juvenile court officer for each judicial
20 district, after consultation with the judges of the judicial
21 district, ~~shall appoint a chief juvenile court officer~~ and may
22 remove ~~the~~ a chief juvenile court officer for cause.

23 2. The chief juvenile court officer is subject to the
24 immediate supervision and direction of the ~~chief judge of the~~
25 judicial district director of juvenile court services.

26 3. The chief juvenile court officer, in addition to
27 performing the duties of a juvenile court officer, shall
28 supervise juvenile court officers and administer juvenile court
29 services within the judicial district in a uniform manner, under
30 the supervision and direction of the director of juvenile court
31 services, in accordance with law and with the rules, directives,
32 and procedures of the judicial branch and the judicial district.

33 4. The chief juvenile court officer shall assist the state
34 court administrator and the ~~district court administrator~~ director
35 of juvenile court services in implementing the rules, directives,

1 and procedures of the judicial branch and the judicial district.

2 5. A chief juvenile court officer shall have other duties as
3 prescribed by the supreme court or by the ~~chief judge of the~~
4 ~~judicial district~~ director of juvenile court services.

5 Sec. 41. Section 602.7201, subsections 2 and 3, Code 2025,
6 are amended to read as follows:

7 2. The juvenile court officers and other personnel employed
8 in juvenile court service offices are subject to the supervision
9 of the chief juvenile court officer. The chief juvenile court
10 officer is subject to the supervision and direction of the
11 director of juvenile court services.

12 3. The chief juvenile court officer may employ, shall
13 supervise, and may remove for cause with due process secretarial,
14 clerical, and other staff within juvenile court service offices
15 as authorized by the ~~chief judge~~ director of juvenile court
16 services.

17 Sec. 42. Section 602.7202, subsection 1, Code 2025, is
18 amended to read as follows:

19 1. Subject to the approval of the ~~chief judge of the judicial~~
20 ~~district~~ director of juvenile court services, the chief juvenile
21 court officer shall appoint juvenile court officers to serve the
22 juvenile court. Juvenile court officers may be required to serve
23 in two or more counties within the judicial district.

24 DIVISION IV

25 HAWKI ELIGIBILITY — PUBLIC INSTITUTION INMATES

26 Sec. 43. Section 514I.8, subsection 2, paragraph g, Code
27 2025, is amended to read as follows:

28 g. ~~Is not an inmate of a public institution or a patient in~~
29 ~~an institution for mental diseases.~~

30 Sec. 44. NEW SECTION. 514I.8B Inmates of public
31 institutions — suspension of medical assistance.

32 1. Following the first thirty days of commitment, the
33 department shall suspend, but not terminate, the eligibility of
34 an eligible child who is an inmate of a public institution as
35 defined in 42 C.F.R. §435.1010, who is enrolled in the medical

1 assistance program under this chapter at the time of commitment
2 to the public institution, and who remains eligible for medical
3 assistance under this chapter except for the eligible child's
4 institutional status, during the entire period of the eligible
5 child's commitment to the public institution.

6 2. To the extent applicable, the public institution and the
7 department shall comply with the reporting requirements and the
8 expediting of the restoration of an eligible child's medical
9 assistance benefits under this chapter upon the eligible child's
10 discharge, consistent with section 249A.38.

11 3. The department shall adopt rules pursuant to chapter 17A
12 to administer this section.

13 DIVISION V

14 CORRECTIVE CHANGES

15 Sec. 45. Section 125.13, subsection 2, paragraphs a, i, and
16 j, Code 2025, are amended to read as follows:

17 a. A hospital providing care or treatment to persons with
18 a substance use disorder licensed under chapter 135B which
19 is accredited by the joint commission ~~on the accreditation of~~
20 ~~health care organizations~~, the commission on accreditation of
21 rehabilitation facilities, the American osteopathic association,
22 or another recognized organization approved by the department.
23 All survey reports from the accrediting or licensing body must be
24 sent to the department.

25 i. A substance use disorder treatment program not funded by
26 the department which is accredited or licensed by the joint
27 commission ~~on the accreditation of health care organizations~~,
28 the commission on the accreditation of rehabilitation facilities,
29 the American osteopathic association, or another recognized
30 organization approved by the department. All survey reports from
31 the accrediting or licensing body must be sent to the department.

32 j. A hospital substance use disorder treatment program that
33 is accredited or licensed by the joint commission ~~on the~~
34 ~~accreditation of health care organizations~~, the commission on
35 the accreditation of rehabilitation facilities, the American

1 osteopathic association, or another recognized organization
2 approved by the department. All survey reports for the hospital
3 substance use disorder treatment program from the accrediting or
4 licensing body shall be sent to the department.

5 Sec. 46. Section 125.43A, Code 2025, is amended to read as
6 follows:

7 **125.43A Prescreening — exception.**

8 Except in cases of medical emergency or court-ordered
9 admissions, a person shall be admitted to a state mental health
10 institute for treatment of a substance use disorder only after
11 a preliminary intake and assessment by a department-licensed
12 treatment facility or a hospital providing care or treatment for
13 persons with a substance use disorder licensed under chapter 135B
14 and accredited by the joint commission ~~on the accreditation of~~
15 ~~health care organizations~~, the commission on accreditation of
16 rehabilitation facilities, the American osteopathic association,
17 or another recognized organization approved by the department,
18 or by a designee of a department-licensed treatment facility or
19 a hospital other than a state mental health institute, which
20 confirms that the admission is appropriate to the person's
21 substance use disorder service needs. A county board of
22 supervisors may seek an admission of a patient to a state mental
23 health institute who has not been confirmed for appropriate
24 admission and the county shall be responsible for one hundred
25 percent of the cost of treatment and services of the patient.

26 Sec. 47. Section 135B.12, Code 2025, is amended to read as
27 follows:

28 **135B.12 Confidentiality.**

29 The department's final findings or the final survey findings
30 of the joint commission ~~on the accreditation of health care~~
31 ~~organizations~~ or the American osteopathic association with
32 respect to compliance by a hospital or rural emergency hospital
33 with requirements for licensing or accreditation shall be made
34 available to the public in a readily available form and place.
35 Other information relating to a hospital or rural emergency

1 hospital obtained by the department which does not constitute the
2 department's findings from an inspection of the hospital or rural
3 emergency hospital or the final survey findings of the joint
4 ~~commission on the accreditation of health care organizations~~ or
5 the American osteopathic association shall not be made available
6 to the public, except in proceedings involving the denial,
7 suspension, or revocation of a license under this chapter. The
8 name of a person who files a complaint with the department
9 shall remain confidential and shall not be subject to discovery,
10 subpoena, or other means of legal compulsion for its release to a
11 person other than department employees or agents involved in the
12 investigation of the complaint.

13 Sec. 48. Section 135B.20, subsection 4, Code 2025, is amended
14 to read as follows:

15 4. "*Joint conference committee*" shall mean the joint
16 conference committee as required by the joint commission ~~on~~
17 ~~accreditation of health care organizations~~ or, in a hospital
18 having no such committee, a similar committee, an equal number of
19 which shall be members of the medical staff selected by the staff
20 and an equal number of which shall be selected by the governing
21 board of the hospital.

22 Sec. 49. Section 135C.2, subsection 7, Code 2025, is amended
23 to read as follows:

24 7. The rules adopted by the department regarding nursing
25 facilities shall provide that a nursing facility may choose to be
26 inspected either by the department or by the joint commission ~~on~~
27 ~~accreditation of health care organizations~~. The rules regarding
28 acceptance of inspection by the joint commission ~~on accreditation~~
29 ~~of health care organizations~~ shall include recognition, in lieu
30 of inspection by the department, of comparable inspections and
31 inspection findings of the joint commission ~~on accreditation of~~
32 ~~health care organizations~~, if the department is provided with
33 copies of all requested materials relating to the inspection
34 process.

35 Sec. 50. Section 135C.6, subsection 10, Code 2025, is amended

1 to read as follows:

2 10. Notwithstanding section 135C.9, nursing facilities which
3 are accredited by the joint commission ~~on accreditation of~~
4 ~~health care organizations~~ shall be licensed without inspection
5 by the department, if the nursing facility has chosen to be
6 inspected by the joint commission ~~on accreditation of health care~~
7 ~~organizations~~ in lieu of inspection by the department.

8 Sec. 51. Section 135J.2, subsection 2, Code 2025, is amended
9 to read as follows:

10 2. The hospice program shall meet the criteria pursuant to
11 section 135J.3 before a license is issued. The department is
12 responsible to provide the necessary personnel to inspect the
13 hospice program, the home care and inpatient care provided and
14 the hospital or facility used by the hospice to determine if
15 the hospice complies with necessary standards before a license
16 is issued. Hospices that are certified as Medicare hospice
17 providers by the department, or are accredited as hospices
18 ~~by the joint commission on the accreditation of health care~~
19 ~~organizations~~, shall be licensed without inspection by the
20 department.

21 Sec. 52. Section 144F.5, subsection 1, Code 2025, is amended
22 to read as follows:

23 1. The standards for accreditation adopted by the joint
24 commission ~~on the accreditation of health care organizations~~
25 or any other nationally recognized hospital accreditation
26 organization.

27 Sec. 53. Section 155A.13, subsection 4, paragraph a,
28 subparagraph (4), Code 2025, is amended to read as follows:

29 (4) Give recognition to the standards of the joint commission
30 ~~on the accreditation of health care organizations~~ and the
31 American osteopathic association, and to the conditions of
32 participation under Medicare.

33 Sec. 54. Section 232.2, subsection 4, paragraph i, Code 2025,
34 is amended to read as follows:

35 i. If reasonable efforts to place a child for adoption or

1 with a guardian are made concurrently with reasonable efforts as
2 defined in section ~~232.102~~ 232.102A, the concurrent goals and
3 timelines may be identified. Concurrent case permanency plan
4 goals for reunification, and for adoption or for other permanent
5 out-of-home placement of a child shall not be considered
6 inconsistent in that the goals reflect divergent possible
7 outcomes for a child in an out-of-home placement.

8 Sec. 55. Section 232.36, subsection 3, paragraph b,
9 subparagraph (3), Code 2025, is amended to read as follows:

10 (3) ~~Legal custodian~~ Custodian of the child.

11 Sec. 56. Section 232.37, subsection 2, Code 2025, is amended
12 to read as follows:

13 2. Notice of the pendency of the case shall be served upon
14 the known parents, guardians, or ~~legal~~ custodians of a child
15 if these persons are not summoned to appear as provided in
16 subsection 1. Notice shall also be served upon the child and
17 upon the child's guardian ad litem, if any. The notice shall
18 attach a copy of the petition and shall give notification of the
19 right to counsel provided for in section 232.11.

20 Sec. 57. Section 232.101A, subsection 1, paragraph c, Code
21 2025, is amended to read as follows:

22 c. The parent of the child does not appear at the
23 dispositional hearing, or the parent appears at the dispositional
24 hearing, does not object to the transfer of guardianship, and
25 agrees to waive the requirement for making reasonable efforts as
26 defined in section ~~232.102~~ 232.102A.

27 Sec. 58. Section 232.102A, subsection 3, Code 2025, is
28 amended to read as follows:

29 3. The performance of reasonable efforts to place a child for
30 adoption or with a guardian may be made concurrently with making
31 reasonable efforts ~~as defined in this section~~.

32 Sec. 59. Section 232B.5, subsection 19, unnumbered paragraph
33 1, Code 2025, is amended to read as follows:

34 A party seeking an involuntary foster care placement of or
35 termination of parental rights over an Indian child shall provide

1 evidence to the court that active efforts have been made to
2 provide remedial services and rehabilitative programs designed
3 to prevent the breakup of the Indian family and that these
4 efforts have proved unsuccessful. The court shall not order the
5 placement or termination, unless the evidence of active efforts
6 shows there has been a vigorous and concerted level of casework
7 beyond the level that typically constitutes reasonable efforts
8 as defined in sections 232.57 and ~~232.102~~ 232.102A. Reasonable
9 efforts shall not be construed to be active efforts. The active
10 efforts must be made in a manner that takes into account the
11 prevailing social and cultural values, conditions, and way of
12 life of the Indian child's tribe. Active efforts shall utilize
13 the available resources of the Indian child's extended family,
14 tribe, tribal and other Indian social service agencies, and
15 individual Indian caregivers. Active efforts shall include but
16 are not limited to all of the following:

17 Sec. 60. Section 233.2, subsection 5, Code 2025, is amended
18 to read as follows:

19 5. Reasonable efforts, as defined in section ~~232.102~~
20 232.102A, that are made in regard to the newborn infant shall
21 be limited to the efforts made in a timely manner to finalize a
22 permanency plan for the newborn infant.

23 Sec. 61. Section 237.3, subsection 7, Code 2025, is amended
24 to read as follows:

25 7. If an agency is accredited by the joint commission ~~on~~
26 ~~the accreditation of health care organizations~~ under the joint
27 commission's consolidated standards for residential settings
28 or by the council on accreditation ~~of services for families~~
29 ~~and children~~, the department shall modify facility licensure
30 standards applied to the agency in order to avoid duplicating
31 standards applied through accreditation.

32 EXPLANATION

33 The inclusion of this explanation does not constitute agreement with
34 the explanation's substance by the members of the general assembly.

35 This bill relates to services and support for youth and is

1 organized by divisions.

2 DIVISION I — TREATMENT, PHYSICAL ASSESSMENTS, AND BEHAVIORAL
3 HEALTH EVALUATIONS. Under current law, a psychiatric medical
4 institution for children (PMIC) is an institution providing more
5 than 24 hours of continuous care involving long-term psychiatric
6 services to 3 or more children in residence for expected periods
7 of 14 days or more for diagnosis and evaluation, or for expected
8 periods of 90 days or more for treatment.

9 The bill exempts PMICs that do not provide substance use
10 disorder services from licensing requirements for maintaining or
11 conducting programs with the primary purpose of treating and
12 rehabilitating persons with a substance use disorder.

13 The bill defines "approved qualifying organization" as the
14 joint commission, the commission on the accreditation of
15 rehabilitation facilities, the council on accreditation, or a
16 nationally recognized accrediting organization with standards
17 comparable to the joint commission and commission on the
18 accreditation of rehabilitation facilities that are acceptable
19 under federal regulations.

20 The bill defines "mental health disorder" as a mental disorder
21 as defined in the most recent version of the diagnostic and
22 statistical manual of mental disorders published by the American
23 psychiatric association, or a mental disorder as defined in
24 the most recent version of the international classification of
25 diseases published by the world health organization.

26 The bill defines "protective locked environment" as a setting
27 that prevents egress from a building or grounds as a protective
28 measure to ensure safety and security.

29 The bill defines "record check evaluation system" as the
30 record check evaluation system of HHS used to perform child and
31 dependent adult abuse record checks and to evaluate criminal
32 history and abuse records.

33 The bill defines "serious emotional disturbance" as a
34 diagnosable mental, behavioral, or emotional disorder that
35 meets the diagnostic criteria specified in the most current

1 diagnostic and statistical manual of mental disorders published
2 by the American psychiatric association. "Serious emotional
3 disturbance" does not include a substance use disorder or
4 developmental disorder unless such disorder co-occurs with a
5 diagnosable mental, behavioral, or emotional disorder.

6 The bill defines "substance use disorder" as a diagnosable
7 substance use disorder of sufficient duration to meet diagnostic
8 criteria specified within the most current diagnostic and
9 statistical manual of mental disorders published by the American
10 psychiatric association that results in a functional impairment.

11 The bill defines "youth" as a person who is less than 21 years
12 of age.

13 The bill describes the nature of care a PMIC must offer
14 youth with a serious emotional disturbance (SED), a substance use
15 disorder (SUD), or both.

16 Under current law, a person who establishes a PMIC must
17 also hold a license under Code chapter 237 (child foster
18 care facilities) as a comprehensive residential facility for
19 children, or hold a license under Code chapter 125 (substance
20 use disorders) if the facility provides SUD treatment. The bill
21 requires a person who establishes a PMIC to hold a license under
22 Code chapter 237. The person must also hold a license under Code
23 chapter 125 if the PMIC provides SUD treatment.

24 The bill eliminates the requirement that a proposed PMIC
25 be under the direction of an agency which has previously
26 operated a facility for children or adolescents and meets or
27 exceeds requirements for licensure as a comprehensive residential
28 facility for children.

29 The bill requires the department of inspections, appeals
30 and licensing (DIAL), in cooperation with the department of
31 health and human services (HHS), to adopt rules relating to the
32 application of a protective locked environment in a PMIC.

33 The bill defines "behavioral health evaluation" as a
34 comprehensive evaluation of a person's mental and behavioral
35 health by a person licensed under Code chapter 154B (psychology),

1 154C (social work), or 154D (behavioral science) for purposes
2 including but not limited to identifying a possible behavioral
3 health condition.

4 The bill defines "physical assessment" as direct physical
5 touching, viewing, and medically necessary manipulation of any
6 area of a child's body by a licensed physician.

7 The bill replaces several references to a physical or mental
8 examination with references to a physical assessment (PA) or
9 behavioral health evaluation (BHE) and replaces references to a
10 person's abuse of alcohol or other controlled substances with
11 references to the person having a behavioral health condition.

12 Under current law, one of several specific circumstances must
13 exist before a juvenile court has the authority to enter an
14 ex parte order to direct a peace officer or a juvenile court
15 officer to take custody of a child before or after the filing
16 of a petition under Code chapter 232 (juvenile justice). The
17 bill adds the circumstance when the child's parent, guardian, or
18 legal custodian consents to the removal as a condition that would
19 permit a juvenile court to enter such an ex parte order. The
20 bill creates similar provisions for when a juvenile court may
21 enter an ex parte order for a child to undergo an inpatient PA
22 or an inpatient BHE and when a person authorized to conduct a
23 preliminary investigation in response to a complaint may motion
24 to ask the court to order a child to undergo an inpatient PA or
25 an inpatient BHE.

26 The bill exempts a PMIC from licensing requirements for child
27 foster care.

28 The bill directs HHS and DIAL to adopt rules relating to the
29 application of a protective locked environment to child foster
30 care licensees.

31 The bill directs HHS and DIAL to coordinate in developing
32 rules related to this division of the bill. The bill outlines
33 goals and considerations each department must take into account
34 while adopting such rules.

35 The bill requires HHS to convene a committee made of

1 representatives of several different organizations and persons
2 detailed in the bill to review the systems and related services
3 and supports available for youth, including but not limited to
4 systems, services, and supports related to civil commitment and
5 treatment, juvenile delinquency, and CINA. The bill details the
6 goal of the review and requires HHS to report the review's
7 findings and recommendations to the governor and the general
8 assembly by October 1, 2025.

9 The bill makes conforming changes to Code chapters 135H
10 (psychiatric medical institutions for children) and 232 (juvenile
11 justice). The bill repeals 2024 Iowa Acts, chapter 1161,
12 sections 97 and 98.

13 DIVISION II — HOME AND COMMUNITY-BASED SERVICES —
14 HABILITATION SERVICES PROVIDED BY A RESIDENTIAL PROGRAM —
15 EXCLUSION FROM CHILDREN'S RESIDENTIAL FACILITY DEFINITION. The
16 bill excludes care furnished to persons 16 years of age or
17 older by certain residential programs detailed in the bill from
18 the definition of a children's residential facility. The bill
19 requires HHS to adopt rules to require that care furnished at a
20 residential program to persons under 18 years of age be provided
21 in settings separate from individuals over the age of 21.

22 DIVISION III — DIRECTOR OF JUVENILE COURT SERVICES — CHIEF
23 JUVENILE COURT OFFICERS. Under current law, the chief juvenile
24 court officers are appointed, terminated for cause, and otherwise
25 act under the direction and supervision of the chief judge for
26 the judicial district in which the chief juvenile court officer
27 was appointed. The bill transfers the chief judges' authority
28 over chief juvenile court officers to the director of juvenile
29 court services.

30 DIVISION IV — HAWKI ELIGIBILITY — PUBLIC INSTITUTION
31 INMATES. The bill defines "public institution" to mean the same
32 as defined in 42 C.F.R. §435.1010.

33 Current law does not permit a child who is an inmate in a
34 public institution to be eligible for the Hawki program. The
35 bill requires HHS to suspend, but not terminate, Hawki program

1 eligibility for a child in a public institution if the child is
2 otherwise eligible for the Hawki program except for the child's
3 status as an inmate, the child was enrolled in the Hawki program
4 at the time the child was committed to the public institution,
5 and 30 calendar days have elapsed since the date the child was
6 committed to the public institution. A child's suspension of
7 Hawki benefits must continue for the duration of the child's
8 commitment to a public institution.

9 The bill requires the public institution to which a child
10 is committed and HHS to provide monthly reports and expedite
11 the restoration of the child's Hawki benefits upon the child's
12 discharge from the public institution. The bill requires HHS to
13 adopt rules to administer the bill's provisions related to Hawki
14 benefits for children committed to a public institution.

15 DIVISION V — CORRECTIVE CHANGES. The bill updates references
16 to certain accrediting organizations through the Code, corrects
17 a reference throughout the Code related to the citation for the
18 definition of "reasonable efforts", and changes the term "legal
19 custodian" to the defined term "custodian".