

Senate File 474 - Introduced

SENATE FILE 474
BY COMMITTEE ON HEALTH AND HUMAN
SERVICES

(SUCCESSOR TO SSB 1120)

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 involuntary commitment,
4 juvenile delinquency, child in need of assistance, and
5 family in need of assistance proceedings; the licensing and
6 certification of certain residential facilities; the provision
7 of home and community-based services and habilitation services
8 to certain youth by residential programs; administration and
9 supervision of juvenile court services; and the suspension of
10 Hawki eligibility for inmates of public institutions.
11 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.

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, psychological, social, behavioral, and developmental aspects of the child's youth's situation, reflecting the need for inpatient

1 care.

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

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

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

10 ~~5.~~ 7. "Mental health professional" means an individual who
11 has all of the following qualifications:

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

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

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

23 ~~6.~~ 8. "Nursing care" means services which are provided under
24 the direction of a physician or registered nurse.

25 ~~7.~~ 9. "Physician" means a person licensed under chapter 148.

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

29 ~~8.~~ 11. "Psychiatric medical institution for children" or
30 "psychiatric institution" means an institution providing more
31 than twenty-four hours of continuous care involving long-term
32 psychiatric services to three or more children youth in residence
33 for expected periods of fourteen or more days for an assessment,
34 evaluation, and diagnosis and evaluation or for expected periods
35 of ninety days or more for treatment.

1 ~~9.~~ 12. "Psychiatric services" means services provided under
2 the direction of a physician which address mental, emotional,
3 medical, or behavioral problems.

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

6 ~~10.~~ 14. "Rehabilitative services" means services to
7 encourage and assist restoration of a resident's optimum mental
8 and physical capabilities.

9 ~~11.~~ 15. "Resident" means a ~~person who is less than~~
10 ~~twenty-one years of age and youth who~~ has been admitted by a
11 ~~physician~~ to a psychiatric medical institution for children.

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

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

23 ~~12.~~ 18. "Supervision" means direct oversight and inspection
24 of ~~the~~ an act of accomplishing that accomplishes a function or
25 activity.

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

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

30 **135H.3 Nature of care.**

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

1 with the intention of reducing or ameliorating the disorder, the
2 symptoms of the disorder, or the effects of the disorder.

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

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

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

27 **135H.4 Licensure — scope of license.**

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

35 2. A licensee shall only provide serious emotional

1 disturbance or substance use disorder services for which the
2 licensee is licensed under this chapter.

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

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

7 1. An application for a license under this chapter shall
8 be submitted on a form ~~requesting information~~ required by
9 the department, ~~which~~. The application may include require
10 affirmative evidence of the applicant's ability to comply with
11 the rules for standards adopted pursuant to this chapter. The
12 application shall require the applicant to specify whether the
13 applicant intends to provide services for serious emotional
14 disturbances, substance use disorders, or both.

15 2. An application for a license shall be accompanied by the
16 required license fee which shall be credited to the general fund
17 of the state. The initial application fee and the annual license
18 fee is twenty-five dollars.

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

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

23 a. The department has ascertained that the applicant's
24 medical facilities and staff are adequate to provide the care
25 and services required of a psychiatric medical institution for
26 children.

27 b. The proposed psychiatric institution is accredited by
28 ~~the joint commission on the accreditation of health care~~
29 ~~organizations, the commission on accreditation of rehabilitation~~
30 ~~facilities, the council on accreditation of services for families~~
31 ~~and children, or by any other recognized accrediting organization~~
32 ~~with comparable standards acceptable under federal regulation an~~
33 approved qualifying organization.

34 c. The applicant complies with applicable state rules and
35 standards for a psychiatric institution adopted by the department

1 in accordance with federal requirements under 42 C.F.R. §441.150
2 - 441.156.

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

23 ~~e. The proposed psychiatric institution is under the~~
24 ~~direction of an agency which has operated a facility licensed~~
25 ~~under section 237.3, subsection 2, paragraph "a", as a~~
26 ~~comprehensive residential facility for children for three years~~
27 ~~or of an agency which has operated a facility for three~~
28 ~~years providing psychiatric services exclusively to children or~~
29 ~~adolescents and the facility meets or exceeds requirements for~~
30 ~~licensure under section 237.3, subsection 2, paragraph "a", as a~~
31 ~~comprehensive residential facility for children.~~

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

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

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

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

8 f. (1) If the applicant will provide serious emotional
9 disturbance services, the applicant meets or exceeds the
10 requirements for a license under section 237.3, subsection
11 2, paragraph "a", as a comprehensive residential facility for
12 children.

13 (2) If the applicant will provide substance use disorder
14 services, the applicant meets or exceeds the requirements for a
15 license under section 125.13.

16 4. The department of health and human services may give
17 ~~approval to approve~~ approve a conversion of beds approved under
18 subsection 2, ~~to if the~~ 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 229.13, subsection 1, paragraph c, Code
18 2025, is amended to read as follows:

19 c. (1) If the court orders evaluation and treatment of the
20 respondent on an inpatient basis under this section, the court
21 may order the respondent placed under the care of an appropriate
22 subacute care facility licensed under chapter 135G.

23 (2) If the court orders evaluation and treatment of a minor
24 respondent on an inpatient basis under this section, the court
25 may order the minor respondent placed under the care of an
26 appropriate public hospital.

27 Sec. 12. Section 229.13, subsection 5, Code 2025, is amended
28 to read as follows:

29 5. a. (1) The chief medical officer of the hospital or
30 facility at which the respondent is placed shall report to the
31 court and make a recommendation for disposition of the matter no
32 more than fifteen days after the date the respondent is placed,
33 ~~making a recommendation for disposition of the matter~~ at the
34 hospital or facility. An

35 (2) If the respondent is a minor and is placed under the

1 care of a public hospital pursuant to subsection 1, paragraph
2 "c", subparagraph (2), the chief medical officer of the public
3 hospital shall report to the court and make a recommendation for
4 disposition no later than thirty calendar days after the date the
5 minor respondent is placed under the care of the public hospital.

6 b. A copy of the chief medical officer's report shall be sent
7 to the respondent's attorney.

8 c. (1) Upon request, the court may grant the chief medical
9 officer an extension of time ~~may be granted~~, not to exceed seven
10 days, upon a showing of cause. ~~A copy of the report shall be~~
11 ~~sent to the~~ The respondent's attorney, ~~who~~ may contest the need
12 for an extension of time ~~if one is requested~~. An

13 (2) ~~The court shall grant an extension of time shall be~~
14 ~~granted upon request~~ unless the request is contested, in which
15 case the court shall make such inquiry as it deems appropriate
16 and may either order the respondent's release from the hospital
17 or facility, or grant an extension of time for psychiatric
18 evaluation.

19 d. If the chief medical officer fails to report to the court
20 within ~~fifteen days after the individual is placed under the care~~
21 ~~of the hospital or facility~~ the time specified in paragraph "a",
22 and an extension of time has not been ~~requested~~ granted, the
23 chief medical officer is guilty of contempt and shall be punished
24 under chapter 665. The court shall order a rehearing on the
25 application to determine whether the respondent should continue
26 to be detained at or placed under the care of the hospital or
27 facility.

28 Sec. 13. Section 229.14, subsection 2, paragraph e, Code
29 2025, is amended to read as follows:

30 e. (1) If the court orders placement and treatment of ~~the~~ a
31 respondent on an inpatient basis under this section, the court
32 may order the respondent placed under the care of an appropriate
33 subacute care facility licensed under chapter 135G.

34 (2) If the court orders placement and treatment of a minor
35 respondent on an inpatient basis under this section, the court

1 may order the minor respondent placed under the care of an
2 appropriate public hospital.

3 Sec. 14. Section 232.2, Code 2025, is amended by adding the
4 following new subsections:

5 NEW SUBSECTION. 3A. "*Behavioral health condition*" means
6 a serious emotional disturbance, a mental health disorder,
7 a substance abuse disorder, life stressors and crises, and
8 stress-related physical symptoms.

9 NEW SUBSECTION. 3B. "*Behavioral health evaluation*" means a
10 process used to assess an individual's behavioral health status
11 and functioning for purposes including but not limited to the
12 diagnosis of a behavioral health condition or to determine the
13 need for treatment or intervention.

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

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

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

22 NEW SUBSECTION. 64A. "*Substance use disorder*" means the same
23 as defined in section 125.2.

24 Sec. 15. Section 232.2, subsections 34 and 58, Code 2025, are
25 amended to read as follows:

26 34. "*Juvenile court social records*" or "*social records*" means
27 all records, other than official records, made with respect to
28 a child in connection with proceedings over which the court has
29 jurisdiction under this chapter ~~other than official records~~ and
30 includes but is not limited to the records made and compiled
31 by intake officers, predisposition reports, and reports of
32 physical assessments and ~~mental examinations~~ behavioral health
33 evaluations.

34 58. "*Secure facility*" means a physically restricting facility
35 in which ~~children adjudicated to have committed a delinquent act~~

1 a child may be placed pursuant to a dispositional order of the
2 court.

3 Sec. 16. Section 232.8, subsection 4, Code 2025, is amended
4 to read as follows:

5 4. In a proceeding concerning a child who is alleged to have
6 committed a second delinquent act or a second violation excluded
7 from the jurisdiction of the juvenile court, the court or the
8 juvenile court shall determine whether there is reason to believe
9 that the child ~~regularly abuses alcohol or other controlled~~
10 substance has a behavioral health condition and may be in need
11 of treatment. If the court so determines, the court shall advise
12 appropriate juvenile authorities and refer such offenders to the
13 juvenile court for disposition pursuant to section 232.52A.

14 Sec. 17. Section 232.49, Code 2025, is amended to read as
15 follows:

16 **232.49 Physical assessments and mental examinations**
17 **behavioral health evaluations — juvenile delinquency.**

18 1. a. Following Any time after the entry of an order of
19 adjudication under section 232.47, the court may, after a hearing
20 ~~which may be simultaneous with the adjudicatory hearing,~~ order
21 a physical assessment or mental examination behavioral health
22 evaluation of a child if ~~it~~ the court finds that ~~an examination~~
23 a physical assessment or a behavioral health evaluation is
24 necessary to determine the child's physical condition or ~~mental~~
25 to determine if the child has a behavioral health condition.

26 b. The court may consider chemical dependency as either a
27 physical condition or ~~mental~~ behavioral health condition and may
28 consider a chemical dependency evaluation as either a physical
29 assessment or mental examination behavioral health evaluation.
30 ~~If the examination~~

31 c. A hearing to order a physical assessment or behavioral
32 health evaluation may be held at the same time as the
33 adjudicatory hearing.

34 2. Unless otherwise ordered by the court, if a physical
35 assessment or behavioral health evaluation indicates the child

1 has behaved in a manner that threatened the safety of another
2 person, has committed a violent act causing bodily injury to
3 another person, or has been a victim or perpetrator of sexual
4 abuse, ~~unless otherwise ordered by the court,~~ the child's parent,
5 guardian, ~~or foster parent,~~ or other person with custody of the
6 child shall be provided with that information.

7 ~~2.~~ 3. a. When possible ~~an examination,~~ a physical
8 assessment or behavioral health evaluation shall be conducted on
9 an outpatient basis, ~~but.~~ However, if deemed necessary by the
10 court, the court may, if it deems necessary commit order the
11 child to a suitable hospital, facility, or institution for the
12 purpose of examination an inpatient physical assessment or an
13 inpatient behavioral health evaluation.

14 b. ~~Commitment for examination~~ An inpatient physical
15 assessment or an inpatient behavioral health evaluation shall not
16 exceed thirty days and ~~the civil commitment provisions of chapter~~
17 ~~229 shall not apply.~~

18 ~~3.~~ 4. a. ~~At any~~ Any time after the filing of a delinquency
19 petition, the court may order a physical assessment or mental
20 ~~examination~~ behavioral health evaluation of the child if all of
21 the following circumstances apply:

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

25 (2) The parent, guardian, or custodian and the child's
26 counsel agree to the physical assessment or behavioral health
27 evaluation.

28 b. (1) ~~An examination~~ A physical assessment or behavioral
29 health evaluation shall be conducted on an outpatient basis
30 unless the court, the child's counsel, and the child's parent,
31 guardian, or custodian agree that ~~it is necessary~~ the child
32 should be committed ordered to a suitable hospital, facility,
33 or institution for the purpose of examination an inpatient
34 physical assessment or an inpatient behavioral health evaluation.
35 ~~Commitment for examination~~

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

4 Sec. 18. Section 232.52A, subsection 1, Code 2025, is amended
5 to read as follows:

6 1. In addition to any other order of the juvenile court,
7 ~~a person under age eighteen,~~ child who may be in need of
8 treatment, as determined under section 232.8, may be ordered to
9 ~~participate in an alcohol or controlled substance education or~~
10 a physical assessment or behavioral health evaluation program
11 approved by the juvenile court. If recommended after evaluation,
12 ~~the~~ The court may also order the ~~person~~ child to participate
13 in a treatment program approved by the court if the treatment
14 program is recommended after the child's physical assessment
15 or behavioral health evaluation. The juvenile court may
16 also require the custodial parent or parents, or other legal
17 guardian, to participate in an educational program with the
18 ~~person under age eighteen~~ child if the court determines that such
19 participation is in the best interests of the ~~person under age~~
20 eighteen child.

21 Sec. 19. Section 232.68, subsection 3, unnumbered paragraph
22 1, Code 2025, is amended to read as follows:

23 "*Confidential access to a child*" means access to a child,
24 ~~during an assessment of an alleged act of child abuse,~~ who is
25 alleged to be the victim of the child abuse, during a child
26 abuse assessment. The access may be accomplished by interview,
27 observation, or examination physical assessment of the child. As
28 used in this subsection and this part:

29 Sec. 20. Section 232.68, subsection 3, paragraph c, Code
30 2025, is amended by striking the paragraph.

31 Sec. 21. Section 232.69, subsection 3, paragraph b, Code
32 2025, is amended to read as follows:

33 b. A person required to make a report under subsection 1,
34 other than a physician whose professional practice does not
35 regularly involve providing primary health care to children,

1 shall complete the core training curriculum relating to the
2 identification and reporting of child abuse within six months of
3 initial employment or self-employment involving ~~the examination~~
4 physical assessments or behavioral health evaluations, or
5 attending, counseling, or treatment of treating children on
6 a regular basis. Within one month of initial employment or
7 self-employment, the person shall obtain a statement of the
8 abuse reporting requirements from the person's employer or, if
9 self-employed, from the department. The person shall complete
10 the core training curriculum relating to the identification and
11 reporting of child abuse every three years.

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

14 10. Physical examination assessment. If the department
15 refers a child to a physician or physician assistant for a
16 physical examination assessment, the department shall contact
17 the physician or physician assistant regarding the ~~examination~~
18 physical assessment within twenty-four hours of making the
19 referral. If the physician or physician assistant who performs
20 the ~~examination upon referral by the department~~ physical
21 assessment reasonably believes the child has been abused, the
22 physician or physician assistant shall report to the department
23 within twenty-four hours of performing the ~~examination~~ physical
24 assessment.

25 Sec. 23. Section 232.77, subsection 1, Code 2025, is amended
26 to read as follows:

27 1. a. A person who is required to report suspected child
28 abuse may take or perform, or may cause to be taken or
29 performed, at public expense, photographs, X rays, ~~or other~~
30 physical examinations assessments, or other tests of a child
31 which would provide medical indication of allegations arising
32 from an assessment.

33 b. A health practitioner may, if medically indicated, cause
34 to be performed a radiological examination, physical examination
35 assessment, or other ~~medical tests~~ test of the child.

1 c. A person who takes any photographs or X rays or performs
2 any physical examinations assessments or other tests pursuant to
3 this section shall notify the department that the photographs or
4 X rays have been taken or the examinations physical assessments
5 or other tests have been performed. ~~The person who made~~
6 notification, and shall retain the photographs, or X rays, or
7 examination physical assessment or other test findings for a
8 reasonable time following the notification.

9 d. Whenever the person is required to report under section
10 232.69, in that person's capacity as a member of the staff of
11 a medical or other private or public institution, agency or
12 facility, that person shall immediately notify the person in
13 charge of the institution, agency, or facility or that person's
14 designated delegate of the need for photographs, or X rays or
15 examinations, physical assessments, or other tests.

16 Sec. 24. Section 232.78, subsection 1, paragraph a, Code
17 2025, is amended to read as follows:

18 a. Any of the following circumstances exist:

19 (1) The person responsible for the care of the child consents
20 to the removal.

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

23 (3) The person responsible for the care of the child, though
24 present, was asked and refused to consent to the removal of the
25 child and was informed of an intent to apply for an order under
26 this section, ~~or there.~~

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

29 (5) There is reasonable cause to believe that a request
30 for consent will cause the parent, guardian, or legal custodian
31 person responsible for the care of the child to take flight with
32 the child.

33 Sec. 25. Section 232.78, subsection 1, paragraph c,
34 subparagraph (1), Code 2025, is amended to read as follows:

35 (1) The refusal or failure of the person responsible for

1 the care of the child to comply with the request of a peace
2 officer, juvenile court officer, or child protection worker for
3 such the person to obtain and provide to the requester the
4 results of a physical assessment or ~~mental examination~~ behavioral
5 health evaluation of the child. The request for a physical
6 ~~examination~~ assessment of the child may specify the performance
7 of a medically relevant test.

8 Sec. 26. Section 232.78, subsection 5, Code 2025, is amended
9 to read as follows:

10 5. The juvenile court, before or after the filing of a
11 petition under this chapter, may enter an ex parte order
12 authorizing a ~~physician or physician assistant or hospital~~
13 ~~to conduct an~~ inpatient or outpatient physical examination or
14 ~~authorizing a physician or physician assistant, a psychologist~~
15 ~~certified under section 154B.7, or a community mental health~~
16 ~~center accredited pursuant to chapter 230A to conduct an~~
17 ~~outpatient mental examination~~ assessment or an inpatient or
18 outpatient behavioral health evaluation of a child ~~if necessary~~
19 ~~to identify the nature, extent, and cause of injuries to the~~
20 ~~child as required by section 232.71B, provided all of the~~
21 following apply:

22 a. Any of the following circumstances exist:

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

25 (2) The child's parent, guardian, or legal custodian is
26 absent, or.

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

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

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

1 Sec. 27. Section 232.79, subsection 5, Code 2025, is amended
2 to read as follows:

3 5. When there has been an emergency removal or keeping of a
4 child without a court order, a physical ~~examination~~ assessment of
5 the child by a licensed medical practitioner shall be performed
6 within twenty-four hours of ~~such~~ the emergency removal or keeping
7 of a child, unless the child is returned to the child's home
8 within twenty-four hours of the emergency removal or keeping of
9 a child.

10 Sec. 28. Section 232.83, subsection 2, Code 2025, is amended
11 to read as follows:

12 2. Anyone authorized to conduct a preliminary investigation
13 in response to a complaint may apply for, or the court on its
14 own motion may enter, an ex parte order authorizing a ~~physician~~
15 ~~or physician assistant or hospital to conduct an inpatient~~
16 or outpatient physical examination or authorizing a physician
17 ~~or physician assistant, a psychologist certified under section~~
18 ~~154B.7, or a community mental health center accredited pursuant~~
19 ~~to chapter 230A to conduct an outpatient mental examination~~
20 ~~of a child if necessary to identify the nature, extent, and~~
21 ~~causes of any injuries, emotional damage, or other such needs~~
22 ~~of a child as specified in section 232.96A, subsection 3, 5,~~
23 ~~or 6, assessment or an inpatient or outpatient behavioral health~~
24 evaluation provided that all of the following apply:

25 a. Any of the following circumstances exist:

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

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

29 (3) The parent, guardian, or custodian, though present,
30 was asked and refused to authorize the ~~examination~~ physical
31 assessment or the behavioral health evaluation.

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

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

1 victimization.

2 Sec. 29. Section 232.98, Code 2025, is amended to read as
3 follows:

4 **232.98 ~~Physical and mental examinations~~ assessments and**
5 **behavioral health evaluations — child in need of assistance.**

6 1. a. Except as provided in section 232.78, subsection 5,
7 a physical assessment or ~~mental examination~~ behavioral health
8 evaluation of ~~the~~ a child may be ordered only after the filing
9 of a petition pursuant to section 232.87, and after a hearing
10 to determine whether ~~an examination~~ a physical assessment or
11 behavioral health evaluation is necessary to determine the
12 child's physical condition or ~~mental~~ if the child has a
13 behavioral health condition.

14 b. The court may consider chemical dependency as either a
15 physical or ~~mental~~ behavioral health condition and may consider
16 a chemical dependency evaluation as either a physical assessment
17 or ~~mental examination~~ behavioral health evaluation.

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

20 ~~b.~~ d. ~~An examination~~ A physical assessment or a behavioral
21 health evaluation ordered prior to the adjudication shall be
22 conducted on an outpatient basis when possible, ~~but.~~ However,
23 if deemed necessary by the court, the court may ~~commit~~ order the
24 child to a suitable ~~nonsecure~~ hospital, facility, or institution
25 for the purpose of ~~examination~~ an inpatient physical assessment
26 or an inpatient behavioral health evaluation for a period not to
27 exceed ~~fifteen~~ thirty days if all of the following are ~~found to~~
28 ~~be present~~ circumstances exist:

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

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

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

4 ~~e. e.~~ An examination A physical assessment or a behavioral
5 health evaluation ordered after the adjudication shall be
6 conducted on an outpatient basis when possible, ~~but.~~ However,
7 if deemed necessary by the court, the court may ~~commit~~ order the
8 child to a suitable ~~nonsecure~~ hospital, facility, or institution
9 for the purpose of ~~examination~~ an inpatient physical assessment
10 or an inpatient behavioral health evaluation for a period not to
11 exceed thirty days.

12 ~~d. f.~~ The child's parent, guardian, or custodian shall be
13 included in counseling sessions offered during the child's stay
14 in a hospital, facility, or institution when feasible, and when
15 in the best interests of the child and the child's parent,
16 guardian, or custodian. If separate counseling sessions are
17 conducted for the child and the child's parent, guardian, or
18 custodian, a joint counseling session shall be offered prior
19 to the release of the child from the hospital, facility, or
20 institution. The court shall require that notice be provided to
21 the child's guardian ad litem of the counseling sessions, ~~and of~~
22 the counseling session participants, ~~and results~~ the outcomes of
23 the counseling sessions.

24 2. Following an adjudication that a child is a child in
25 need of assistance, the court may, after a hearing, order ~~the~~
26 a physical assessment or mental examination behavioral health
27 evaluation of the child's parent, guardian, or custodian if that
28 person's ability to care for the child is at issue.

29 Sec. 30. Section 232.102, subsection 5, Code 2025, is amended
30 to read as follows:

31 5. a. The child shall not be placed in the state training
32 school.

33 b. (1) Paragraph "a" shall not preclude the department's
34 use of the facilities of the state training school for the
35 purposes of conducting a physical assessment, a behavioral health

1 evaluation, or both, as described in section 232.98, of a male
2 child for a period not to exceed thirty days. Such use of
3 the facilities of the state training school shall be subject
4 to the director's authorization and approval for any request to
5 obtain a court order for these purposes. Following review of the
6 authorized and approved departmental request, the court may order
7 such use of the facilities of the state training school.

8 (2) A male child temporarily located at the state training
9 school pursuant to subparagraph (1) shall at all times
10 be separated from children adjudicated to have committed a
11 delinquent act who are placed at the state training school.

12 (3) The department shall adopt rules pursuant to chapter 17A
13 to administer this paragraph.

14 Sec. 31. Section 232.127, subsection 7, Code 2025, is amended
15 to read as follows:

16 7. a. The court may not order the child placed on probation,
17 in a foster home or in a nonsecure facility unless the child
18 requests and agrees to such supervision or placement. ~~In no~~
19 ~~event shall the~~

20 b. The court shall not order the child placed in a secure
21 facility or in the state training school or other secure
22 facility.

23 c. (1) Paragraph "b" shall not preclude the department's
24 use of the facilities of the state training school for the
25 purposes of conducting a physical assessment, a behavioral health
26 evaluation, or both, as described in section 232.98, of a male
27 child for a period not to exceed thirty days. Such use of
28 the facilities of the state training school shall be subject
29 to the director's authorization and approval for any request to
30 obtain a court order for these purposes. Following review of the
31 authorized and approved departmental request, the court may order
32 such use of the facilities of the state training school.

33 (2) A male child temporarily located at the state training
34 school pursuant to subparagraph (1) shall at all times
35 be separated from children adjudicated to have committed a

1 delinquent act who are placed at the state training school.

2 (3) The department shall adopt rules pursuant to chapter 17A
3 to administer this paragraph.

4 Sec. 32. 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. 33. 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. 34. 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. 35. 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. 36. 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. 37. Section 237.4, Code 2025, is amended by adding the
22 following new subsection:

23 NEW SUBSECTION. 9. A psychiatric medical institution for
24 children licensed under chapter 135H.

25 Sec. 38. Section 237C.1, Code 2025, is amended by adding the
26 following new subsection:

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

30 Sec. 39. Section 237C.4, Code 2025, is amended by adding the
31 following new subsection:

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

35 Sec. 40. DEPARTMENT OF HEALTH AND HUMAN SERVICES —

1 DEPARTMENT OF INSPECTIONS, APPEALS, AND LICENSING —
2 ADMINISTRATIVE RULES.

3 1. The department of health and human services and the
4 department of inspections, appeals, and licensing shall each
5 adopt rules pursuant to chapter 17A to administer this division
6 of this Act. The departments shall coordinate in developing
7 their respective rules to provide continuity for, and maximize
8 utilization of the array of behavioral health services available
9 by, affected individuals.

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

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

17 (2) Adaptation in application of licensing and certification
18 requirements to provide for the unmet residential care needs of
19 affected individuals.

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

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

32 Sec. 41. REVIEW OF YOUTH SYSTEMS, SERVICES, AND SUPPORTS.

33 1. The department of health and human services shall convene
34 representatives of the department of health and human services,
35 the courts and practitioners involved in civil commitment and

1 juvenile justice proceedings, law enforcement and corrections,
2 hospital systems, service providers, and individuals with lived
3 experience and their families to review the systems and related
4 services and supports for youth, including but not limited to the
5 civil commitment and treatment provisions under chapters 125 and
6 229, and the juvenile delinquency and child in need of assistance
7 provisions under chapter 232.

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

14 3. The department of health and human services shall report
15 the review's findings and recommendations to the governor and the
16 general assembly by October 1, 2025.

17 Sec. 42. REPEAL. 2024 Iowa Acts, chapter 1161, sections 97
18 and 98, are repealed.

19 DIVISION II

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

23 Sec. 43. Section 237C.1, subsection 2, Code 2025, is amended
24 by adding the following new paragraph:

25 NEW PARAGRAPH. j. Care furnished to persons sixteen years of
26 age and older by a residential program to which the department
27 applies accreditation, certification, or standards of review
28 under the provisions of a federally approved medical assistance
29 home and community-based services waiver, or other provision of
30 the medical assistance program. Care furnished to persons under
31 eighteen years of age shall be provided in settings separate
32 from individuals over the age of twenty-one as specified by the
33 department by rule.

34 DIVISION III

35 DIRECTOR OF JUVENILE COURT SERVICES — CHIEF JUVENILE COURT

1 OFFICERS

2 Sec. 44. Section 602.1101, Code 2025, is amended by adding
3 the following new subsection:

4 NEW SUBSECTION. 5A. "*Director of juvenile court services*"
5 means the same as defined in the Iowa court rules of juvenile
6 court services directed programs as prescribed by the supreme
7 court and includes the deputy director of juvenile court
8 services.

9 Sec. 45. Section 602.1217, Code 2025, is amended to read as
10 follows:

11 **602.1217 Chief juvenile court officer.**

12 1. ~~The chief judge of~~ director of juvenile court services
13 shall appoint a chief juvenile court officer for each judicial
14 district, after consultation with the judges of the judicial
15 district, ~~shall appoint a chief juvenile court officer and may~~
16 ~~remove the~~ a chief juvenile court officer for cause.

17 2. The chief juvenile court officer is subject to the
18 immediate supervision and direction of the ~~chief judge of the~~
19 ~~judicial district~~ director of juvenile court services.

20 3. The chief juvenile court officer, in addition to
21 performing the duties of a juvenile court officer, shall
22 supervise juvenile court officers and administer juvenile court
23 services within the judicial district in a uniform manner, under
24 the supervision and direction of the director of juvenile court
25 services, in accordance with law and with the rules, directives,
26 and procedures of the judicial branch and the judicial district.

27 4. The chief juvenile court officer shall assist the state
28 court administrator and the ~~district court administrator~~ director
29 of juvenile court services in implementing the rules, directives,
30 and procedures of the judicial branch and the judicial district.

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

34 Sec. 46. Section 602.7201, subsections 2 and 3, Code 2025,
35 are amended to read as follows:

1 2. The juvenile court officers and other personnel employed
2 in juvenile court service offices are subject to the supervision
3 of the chief juvenile court officer. The chief juvenile court
4 officer is subject to the supervision and direction of the
5 director of juvenile court services.

6 3. The chief juvenile court officer may employ, shall
7 supervise, and may remove for cause with due process secretarial,
8 clerical, and other staff within juvenile court service offices
9 as authorized by the ~~chief judge~~ director of juvenile court
10 services.

11 Sec. 47. Section 602.7202, subsection 1, Code 2025, is
12 amended to read as follows:

13 1. Subject to the approval of the ~~chief judge of the judicial~~
14 ~~district~~ director of juvenile court services, the chief juvenile
15 court officer shall appoint juvenile court officers to serve the
16 juvenile court. Juvenile court officers may be required to serve
17 in two or more counties within the judicial district.

18 DIVISION IV

19 HAWKI ELIGIBILITY — PUBLIC INSTITUTION INMATES

20 Sec. 48. Section 514I.8, subsection 2, paragraph g, Code
21 2025, is amended to read as follows:

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

24 Sec. 49. **NEW SECTION. 514I.8B Inmates of public**
25 **institutions — suspension of medical assistance.**

26 1. Following the first thirty days of commitment, the
27 department shall suspend, but not terminate, the eligibility of
28 an eligible child who is an inmate of a public institution as
29 defined in 42 C.F.R. §435.1010, who is enrolled in the medical
30 assistance program under this chapter at the time of commitment
31 to the public institution, and who remains eligible for medical
32 assistance under this chapter except for the eligible child's
33 institutional status, during the entire period of the eligible
34 child's commitment to the public institution.

35 2. To the extent applicable, the public institution and the

1 department shall comply with the reporting requirements and the
2 expediting of the restoration of an eligible child's medical
3 assistance benefits under this chapter upon the eligible child's
4 discharge, consistent with section 249A.38.

5 3. The department shall adopt rules pursuant to chapter 17A
6 to administer this section.

7 DIVISION V
8 CORRECTIVE CHANGES

9 Sec. 50. Section 125.13, subsection 2, paragraphs a, i, and
10 j, Code 2025, are amended to read as follows:

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

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

26 j. A hospital substance use disorder treatment program that
27 is accredited or licensed by the joint commission ~~on the~~
28 ~~accreditation of health care organizations~~, the commission on
29 the accreditation of rehabilitation facilities, the American
30 osteopathic association, or another recognized organization
31 approved by the department. All survey reports for the hospital
32 substance use disorder treatment program from the accrediting or
33 licensing body shall be sent to the department.

34 Sec. 51. Section 125.43A, Code 2025, is amended to read as
35 follows:

1 **125.43A Prescreening — exception.**

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

20 Sec. 52. Section 135B.12, Code 2025, is amended to read as
21 follows:

22 **135B.12 Confidentiality.**

23 The department's final findings or the final survey findings
24 of the joint commission ~~on the accreditation of health care~~
25 ~~organizations~~ or the American osteopathic association with
26 respect to compliance by a hospital or rural emergency hospital
27 with requirements for licensing or accreditation shall be made
28 available to the public in a readily available form and place.
29 Other information relating to a hospital or rural emergency
30 hospital obtained by the department which does not constitute the
31 department's findings from an inspection of the hospital or rural
32 emergency hospital or the final survey findings of the joint
33 commission ~~on the accreditation of health care organizations~~ or
34 the American osteopathic association shall not be made available
35 to the public, except in proceedings involving the denial,

1 suspension, or revocation of a license under this chapter. The
2 name of a person who files a complaint with the department
3 shall remain confidential and shall not be subject to discovery,
4 subpoena, or other means of legal compulsion for its release to a
5 person other than department employees or agents involved in the
6 investigation of the complaint.

7 Sec. 53. Section 135B.20, subsection 4, Code 2025, is amended
8 to read as follows:

9 4. "*Joint conference committee*" shall mean the joint
10 conference committee as required by the joint commission ~~on~~
11 ~~accreditation of health care organizations~~ or, in a hospital
12 having no such committee, a similar committee, an equal number of
13 which shall be members of the medical staff selected by the staff
14 and an equal number of which shall be selected by the governing
15 board of the hospital.

16 Sec. 54. Section 135C.2, subsection 7, Code 2025, is amended
17 to read as follows:

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

29 Sec. 55. Section 135C.6, subsection 10, Code 2025, is amended
30 to read as follows:

31 10. Notwithstanding section 135C.9, nursing facilities which
32 are accredited by the joint commission ~~on accreditation of~~
33 ~~health care organizations~~ shall be licensed without inspection
34 by the department, if the nursing facility has chosen to be
35 inspected by the joint commission ~~on accreditation of health care~~

1 ~~organizations~~ in lieu of inspection by the department.

2 Sec. 56. Section 135J.2, subsection 2, Code 2025, is amended
3 to read as follows:

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

15 Sec. 57. Section 144F.5, subsection 1, Code 2025, is amended
16 to read as follows:

17 1. The standards for accreditation adopted by the joint
18 commission ~~on the accreditation of health care organizations~~
19 or any other nationally recognized hospital accreditation
20 organization.

21 Sec. 58. Section 155A.13, subsection 4, paragraph a,
22 subparagraph (4), Code 2025, is amended to read as follows:

23 (4) Give recognition to the standards of the joint commission
24 ~~on the accreditation of health care organizations~~ and the
25 American osteopathic association, and to the conditions of
26 participation under Medicare.

27 Sec. 59. Section 232.2, subsection 4, paragraph i, Code 2025,
28 is amended to read as follows:

29 i. If reasonable efforts to place a child for adoption or
30 with a guardian are made concurrently with reasonable efforts as
31 defined in section ~~232.102~~ 232.102A, the concurrent goals and
32 timelines may be identified. Concurrent case permanency plan
33 goals for reunification, and for adoption or for other permanent
34 out-of-home placement of a child shall not be considered
35 inconsistent in that the goals reflect divergent possible

1 outcomes for a child in an out-of-home placement.

2 Sec. 60. Section 232.36, subsection 3, paragraph b,
3 subparagraph (3), Code 2025, is amended to read as follows:

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

5 Sec. 61. Section 232.37, subsection 2, Code 2025, is amended
6 to read as follows:

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

14 Sec. 62. Section 232.101A, subsection 1, paragraph c, Code
15 2025, is amended to read as follows:

16 c. The parent of the child does not appear at the
17 dispositional hearing, or the parent appears at the dispositional
18 hearing, does not object to the transfer of guardianship, and
19 agrees to waive the requirement for making reasonable efforts as
20 defined in section ~~232.102~~ 232.102A.

21 Sec. 63. Section 232.102A, subsection 3, Code 2025, is
22 amended to read as follows:

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

26 Sec. 64. Section 232B.5, subsection 19, unnumbered paragraph
27 1, Code 2025, is amended to read as follows:

28 A party seeking an involuntary foster care placement of or
29 termination of parental rights over an Indian child shall provide
30 evidence to the court that active efforts have been made to
31 provide remedial services and rehabilitative programs designed
32 to prevent the breakup of the Indian family and that these
33 efforts have proved unsuccessful. The court shall not order the
34 placement or termination, unless the evidence of active efforts
35 shows there has been a vigorous and concerted level of casework

1 beyond the level that typically constitutes reasonable efforts
2 as defined in sections 232.57 and ~~232.102~~ 232.102A. Reasonable
3 efforts shall not be construed to be active efforts. The active
4 efforts must be made in a manner that takes into account the
5 prevailing social and cultural values, conditions, and way of
6 life of the Indian child's tribe. Active efforts shall utilize
7 the available resources of the Indian child's extended family,
8 tribe, tribal and other Indian social service agencies, and
9 individual Indian caregivers. Active efforts shall include but
10 are not limited to all of the following:

11 Sec. 65. Section 233.2, subsection 5, Code 2025, is amended
12 to read as follows:

13 5. Reasonable efforts, as defined in section ~~232.102~~
14 232.102A, that are made in regard to the newborn infant shall
15 be limited to the efforts made in a timely manner to finalize a
16 permanency plan for the newborn infant.

17 Sec. 66. Section 237.3, subsection 7, Code 2025, is amended
18 to read as follows:

19 7. If an agency is accredited by the joint commission ~~on~~
20 ~~the accreditation of health care organizations~~ under the joint
21 commission's consolidated standards for residential settings
22 or by the council on accreditation ~~of services for families~~
23 ~~and children~~, the department shall modify facility licensure
24 standards applied to the agency in order to avoid duplicating
25 standards applied through accreditation.

26 EXPLANATION

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

29 This bill relates to services and support for youth and is
30 organized by divisions.

31 DIVISION I — TREATMENT, PHYSICAL ASSESSMENTS, AND BEHAVIORAL
32 HEALTH EVALUATIONS. Under current law, a psychiatric medical
33 institution for children (PMIC) is an institution providing more
34 than 24 hours of continuous care involving long-term psychiatric
35 services to 3 or more children in residence for expected periods

1 of 14 days or more for diagnosis and evaluation, or for expected
2 periods of 90 days or more for treatment.

3 The bill exempts PMICs from licensing requirements for
4 maintaining or conducting programs with the primary purpose
5 of treating and rehabilitating persons with a substance use
6 disorder.

7 The bill defines "approved qualifying organization" as the
8 joint commission, the commission on the accreditation of
9 rehabilitation facilities, the council on accreditation, or a
10 nationally recognized accrediting organization with standards
11 comparable to the joint commission and commission on the
12 accreditation of rehabilitation facilities that are acceptable
13 under federal regulations.

14 The bill defines "mental health disorder" as a mental disorder
15 as defined in the most recent version of the diagnostic and
16 statistical manual of mental disorders published by the American
17 psychiatric association, or a mental disorder as defined in
18 the most recent version of the international classification of
19 diseases published by the world health organization.

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

23 The bill defines "record check evaluation system" as the
24 record check evaluation system of HHS used to perform child and
25 dependent adult abuse record checks and to evaluate criminal
26 history and abuse records.

27 The bill defines "serious emotional disturbance" as a
28 diagnosable mental, behavioral, or emotional disorder of
29 sufficient duration to meet diagnostic criteria specified within
30 the most current diagnostic and statistical manual of mental
31 disorders published by the American psychiatric association
32 that results in a functional impairment. "Serious emotional
33 disturbance" does not include a substance use disorder or
34 developmental disorder unless such disorder co-occurs with such
35 diagnosable mental, behavioral, or emotional disorder.

1 The bill defines "substance use disorder" as a diagnosable
2 substance use disorder of sufficient duration to meet diagnostic
3 criteria specified within the most current diagnostic and
4 statistical manual of mental disorders published by the American
5 psychiatric association that results in a functional impairment.

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

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

11 Under current law, a person who establishes a PMIC must
12 also hold a license under Code chapter 237 (child foster
13 care facilities) as a comprehensive residential facility for
14 children, or hold a license under Code chapter 125 (substance
15 use disorders) if the facility provides SUD treatment. The
16 bill eliminates the requirement that a PMIC holds either of
17 these additional licenses, and instead requires that an applicant
18 for a PMIC license specify whether the applicant will provide
19 SED services, SUD services, or both. A PMIC may only provide
20 services for which it is licensed.

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

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

30 Under current law, following the hospitalization hearing on
31 an involuntary commitment petition, if the court finds by clear
32 and convincing evidence that the respondent has a serious mental
33 impairment, the court shall order the respondent committed for
34 a complete psychiatric evaluation and appropriate treatment.
35 The chief medical officer (CMO) of the hospital or facility at

1 which a respondent is committed must report to the court no more
2 than 15 days after the date the respondent is placed, making a
3 recommendation for disposition of the matter. The bill allows
4 a court to place a minor respondent in a public hospital and
5 allows a CMO of the hospital no more than 30 days after the
6 date the minor respondent is placed to make a recommendation for
7 disposition of the matter.

8 The bill defines "behavioral health evaluation" as a
9 comprehensive evaluation of a person's mental and behavioral
10 health by a person licensed under Code chapter 154B (psychology),
11 154C (social work), or 154D (behavioral science) for purposes
12 including but not limited to identifying a possible behavioral
13 health condition.

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

17 The bill replaces several references to a physical or mental
18 examination with references to a physical assessment (PA) or
19 behavioral health evaluation (BHE) and replaces references to a
20 person's abuse of alcohol or other controlled substances with
21 references to the person having a behavioral health condition.

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

1 The bill authorizes a court, after a dispositional hearing,
2 to order a male child in a child in need of assistance (CINA)
3 proceeding or a family in need of assistance (FINA) proceeding
4 to receive an inpatient PA, an inpatient BHE, or both, at the
5 state training school (STS). A request for the use of the STS
6 for purposes of a PA or BHE must be approved by the director of
7 HHS. A child ordered to the STS pursuant to a CINA proceeding
8 or a FINA proceeding must be separated at all times from children
9 placed in the STS pursuant to a juvenile delinquency proceeding.
10 Under current law, the court in a CINA or FINA proceeding is
11 prohibited from placing a child in the STS for any reason.

12 The bill exempts a PMIC from licensing requirements for child
13 foster care.

14 The bill defines "protective locked environment" as a setting
15 that prevents egress from a building or grounds as a protective
16 measure to ensure safety and security. The bill directs HHS and
17 DIAL to adopt rules relating to the application of a protective
18 locked environment to child foster care licensees.

19 The bill directs HHS and DIAL to coordinate in developing
20 rules related to this division of the bill. The bill outlines
21 goals and considerations each department must take into account
22 while adopting such rules.

23 The bill requires HHS to convene a committee made of
24 representatives of several different organizations and persons
25 detailed in the bill to review the systems and related services
26 and supports available for youth, including but not limited to
27 systems, services, and supports related to civil commitment and
28 treatment, juvenile delinquency, and CINA. The bill details the
29 goal of the review and requires HHS to report the review's
30 findings and recommendations to the governor and the general
31 assembly by October 1, 2025.

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

1 DIVISION II — HOME AND COMMUNITY-BASED SERVICES —
2 HABILITATION SERVICES PROVIDED BY A RESIDENTIAL PROGRAM —
3 EXCLUSION FROM CHILDREN'S RESIDENTIAL FACILITY DEFINITION. The
4 bill excludes care furnished to persons 16 years of age or
5 older by certain residential programs detailed in the bill from
6 the definition of a children's residential facility. The bill
7 requires care furnished at a residential program to persons
8 under 18 years of age to be provided in settings separate from
9 individuals over the age of 21.

10 DIVISION III — DIRECTOR OF JUVENILE COURT SERVICES — CHIEF
11 JUVENILE COURT OFFICERS. Under current law, the chief juvenile
12 court officers are appointed, terminated for cause, and otherwise
13 act under the direction and supervision of the chief judge for
14 the judicial district in which the chief juvenile court officer
15 was appointed. The bill transfers the chief judges' authority
16 over chief juvenile court officers to the director of juvenile
17 court services.

18 DIVISION IV — HAWKI ELIGIBILITY — PUBLIC INSTITUTION
19 INMATES. Current law does not permit a child who is an inmate in
20 a public institution to be eligible for the Hawki program. The
21 bill requires HHS to suspend, but not terminate, Hawki program
22 eligibility for a child in a public institution if the child is
23 otherwise eligible for the Hawki program except for the child's
24 status as an inmate, the child was enrolled in the Hawki program
25 at the time the child was committed to the public institution,
26 and 30 calendar days have elapsed since the date the child was
27 committed to the public institution. A child's suspension of
28 Hawki benefits must continue during the entire period of the
29 child's commitment to a public institution.

30 The bill requires the public institution to which a child
31 is committed and HHS to provide monthly reports and expedite
32 the restoration of the child's Hawki benefits upon the child's
33 discharge from the public institution. The bill requires HHS to
34 adopt rules to administer the bill's provisions related to Hawki
35 benefits for children committed to a public institution.

1 DIVISION V — CORRECTIVE CHANGES. The bill updates references
2 to certain accrediting organizations through the Code, corrects
3 a reference throughout the Code related to the citation for the
4 definition of "reasonable efforts", and changes the term "legal
5 custodian" to the defined term "custodian".

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