

House File 2562 - Reprinted

HOUSE FILE 2562
BY COMMITTEE ON HEALTH AND HUMAN
SERVICES

(SUCCESSOR TO HSB 653)

(As Amended and Passed by the House February 26, 2026)

A BILL FOR

1 An Act relating to care facility placement decisions for certain
2 adults.

3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

unofficial

1 Section 1. NEW SECTION. **144H.1 Definitions.**

2 For purposes of this chapter, unless the context otherwise
3 requires:

4 1. "*Able to consent*" means a patient is willing and able
5 to communicate a decision independently or with appropriate
6 services, technological assistance, support decision making, or
7 other reasonable accommodation and is able to understand the
8 nature and consequences of the decision, including the primary
9 risks and benefits of a decision.

10 2. "*Authorized representative*" means any of the following:

11 a. An agent as that term is defined in section 633B.102.

12 b. An attorney in fact as that term is defined in section
13 144B.1.

14 c. A conservator as that term is defined in section 633B.102.

15 d. A guardian as that term is defined in section 633B.102.

16 e. A public guardian as that term is defined in chapter 231E.

17 3. "*Care facility*" means a facility that provides a patient
18 with health-related and personal care services, including any of
19 the following:

20 a. A hospital.

21 b. A medical clinic.

22 c. A nursing facility.

23 d. A rehabilitation facility as that term is defined in
24 section 135C.1.

25 e. A residential care facility as that term is defined in
26 section 135C.1.

27 4. "*Department*" means the department of health and human
28 services.

29 5. "*Patient*" means an adult who is receiving health-related
30 or personal care services from a care facility.

31 6. "*Person authorized to consent*" means a member of any of
32 the following groups of individuals, in order of priority, who
33 is willing and able to consent, refuse to consent, or withdraw
34 consent on a patient's behalf:

35 a. The patient's spouse.

1 b. An adult child of the patient or, if the patient has more
2 than one adult child, the decision agreed to by half or more of
3 the adult children reasonably available for consultation with the
4 patient's physician.

5 c. A parent or parents of a patient, if one or both parents
6 are reasonably available for consultation with the patient's
7 physician.

8 d. An adult sibling of the patient or, if the patient has
9 more than one adult sibling, the decision agreed to by half
10 or more of the adult siblings who are reasonably available for
11 consultation with the patient's physician.

12 7. "Placement" means the admission, discharge, or transfer of
13 a patient.

14 8. "Public assistance program" means a state or federally
15 funded program including but not limited to:

16 a. The Medicaid program as that term is defined in section
17 249A.2.

18 b. Medicare pursuant to the federal government health
19 insurance program established under Tit. XVIII of the Social
20 Security Act.

21 c. A medical benefits package pursuant to 38 C.F.R. §17.38.

22 Sec. 2. NEW SECTION. **144H.2 Inability to consent —**
23 **certification.**

24 Upon examination of a patient, a physician licensed under
25 chapter 148 may certify in the patient's medical records that in
26 the professional opinion of the physician all of the following
27 are true:

28 1. The patient is not able to consent.

29 2. Despite good-faith efforts, an authorized representative
30 for the patient has not been located by the physician.

31 3. It is in the patient's best interests to be discharged
32 from the patient's current care facility and to be transferred or
33 admitted to a care facility recommended by the physician.

34 Sec. 3. NEW SECTION. **144H.3 Person authorized to consent —**
35 **powers and duties.**

- 1 1. Upon a physician's certification pursuant to section
2 144H.2, a person authorized to consent is authorized to do any
3 of the following:
- 4 a. Make decisions regarding the patient's care facility
5 placement.
- 6 b. Assist the patient in applying for health insurance
7 coverage through a private insurer, or applying for a public
8 assistance program, as necessary to facilitate the patient's care
9 facility placement.
- 10 c. Take any other action expressly authorized by the patient.
- 11 2. A person authorized to consent shall act in good faith and
12 must consider all of the following:
- 13 a. The patient's wishes, if known.
- 14 b. The patient's rights.
- 15 c. The best interests of the patient.
- 16 3. A person authorized to consent may, as reasonably
17 necessary to assist the patient in applying for health insurance
18 coverage through a private insurer, or applying for a public
19 assistance program, do any of the following:
- 20 a. Access the patient's banking and other financial records
21 as permitted by state and federal law. This paragraph shall
22 not be construed to permit the person authorized to consent to
23 own, manage, use, or dispose of any of the patient's financial
24 resources without the patient's express consent.
- 25 b. Disclose the patient's relevant health information to a
26 third party. The person authorized to consent shall not disclose
27 a patient's protected health information in violation of the
28 federal Health Insurance Portability and Accountability Act of
29 1996, Pub. L. No. 104-191.
- 30 4. The authority of a person authorized to consent shall
31 expire upon the earliest of any of the following:
- 32 a. The date that the patient's care facility placement as
33 decided by the person authorized to consent is completed, and
34 notice of approval or denial of an application for health
35 insurance coverage through a private insurer, or for a public

1 assistance program, if applicable, is received by a qualified
2 employee of the receiving care facility.

3 b. An authorized representative, or a person authorized to
4 consent who has higher priority, has been located.

5 Sec. 4. NEW SECTION. **144H.4 Care facility — duties.**

6 1. A social worker, discharge planner, or other qualified
7 employee as designated by a patient's current care facility shall
8 do all of the following with respect to a person authorized to
9 consent:

10 a. Inform the person of the person's powers and duties
11 pursuant to this chapter.

12 b. Assist the person with identifying a receiving care
13 facility for the patient that can provide the appropriate level
14 of care, as recommended by the physician under section 144H.2,
15 to the patient in the least restrictive environment and consented
16 to by a social worker, intake coordinator, or other qualified
17 employee of the receiving care facility.

18 2. If a receiving care facility as described in subsection 1
19 is identified, and the receiving care facility consents to the
20 transfer, the patient shall be transferred to the receiving care
21 facility.

22 Sec. 5. NEW SECTION. **144H.5 Petition for court order.**

23 1. After good-faith efforts to locate an authorized
24 representative for the patient or a person authorized to consent,
25 a care facility or attending physician may petition a court of
26 competent jurisdiction to order any of the following:

27 a. The patient's care facility placement.

28 b. The patient's attending physician or a social worker,
29 intake worker, or other qualified employee of the receiving care
30 facility to assist the patient to apply for health insurance
31 coverage through a private insurer or apply for a public
32 assistance program, if appropriate.

33 2. The petition made must include the following information:

34 a. The name, age, and address where the patient resides, if
35 known to the petitioner.

1 *b.* The name, address, and county of residence of the
2 petitioner.

3 *c.* The relationship of the petitioner to the patient.

4 *d.* The address where the patient can be found, if different
5 from the patient's residential address.

6 *e.* A physician's certification pursuant to section 144H.2.

7 *f.* An affidavit from the patient's attending physician, that
8 upon an examination of the patient and consultation with another
9 health care provider, all of the following are true:

10 (1) The patient is not able to consent.

11 (2) The patient has not identified, and despite good-faith
12 efforts the attending physician has been unable to locate, an
13 authorized representative or a person authorized to consent.

14 (3) The receiving care facility placement recommended by the
15 attending physician is in the patient's best interests.

16 (4) The receiving care facility placement recommended by the
17 attending physician will provide the most appropriate level of
18 care to the patient in the least restrictive environment, and
19 is within a reasonable proximity to the patient's residence, if
20 applicable.

21 *g.* An affidavit from a social worker, discharge planner, or
22 other qualified employee as designated by the patient's current
23 care facility attesting to all of the following:

24 (1) The patient has not identified, and despite good-faith
25 efforts the current care facility has been unable to locate, an
26 authorized representative or a person authorized to consent.

27 (2) The receiving care facility placement recommended by the
28 patient's attending physician will provide the most appropriate
29 level of care to the patient in the least restrictive
30 environment.

31 (3) Other care facilities within a reasonable proximity
32 to the patient's residence were considered for placement, if
33 applicable.

34 *h.* An affidavit from a social worker, intake coordinator,
35 or other qualified employee of the receiving care facility

1 recommended by the patient's attending physician attesting to all
2 of the following:

3 (1) The receiving care facility is an appropriate facility
4 available for the patient.

5 (2) The receiving care facility can provide the most
6 appropriate level of care to the patient in the least restrictive
7 environment.

8 (3) The receiving care facility consents to the transfer or
9 admission of the patient.

10 i. The name and address of the receiving care facility
11 recommended by the attending physician.

12 3. The court may grant the petition if the court finds all of
13 the following:

14 a. The patient is not able to consent.

15 b. Despite good-faith efforts by the attending physician and
16 the patient's current care facility, an authorized representative
17 or person authorized to consent has not been located.

18 c. Placement in the receiving care facility recommended by
19 the patient's attending physician is in the patient's best
20 interest.

21 d. Placement in the receiving care facility recommended
22 by the patient's attending physician will provide the most
23 appropriate level of care to the patient in the least restrictive
24 environment.

25 e. A social worker, intake coordinator, or other qualified
26 employee of the receiving care facility recommended by the
27 patient's attending physician has consented to the admission of
28 the patient.

29 4. If the court grants the petition under subsection 3, the
30 court shall also order, if necessary, that a qualified employee
31 of the receiving care facility has the authority to apply for a
32 public assistance program on the patient's behalf.

33 5. An order authorizing placement pursuant to this section
34 shall remain in effect until the earliest of any of the
35 following:

1 a. A date specified by the court not to exceed thirty
2 calendar days from the date of issuance of the order.

3 b. The date the patient's placement in the receiving care
4 facility as ordered by the court is completed.

5 c. The date an attending physician certifies that the patient
6 is able to consent to the patient's placement in the receiving
7 care facility.

8 6. An order authorizing a qualified employee of a receiving
9 facility to apply for a public assistance program on a patient's
10 behalf pursuant to this section shall remain in effect until the
11 earliest of any of the following:

12 a. A date specified by the court.

13 b. Notice of approval or denial of an application for health
14 insurance coverage through a private insurer, or for a public
15 assistance program is received by a qualified employee of the
16 receiving facility.

17 c. The date that an attending physician certifies that the
18 patient is able to consent to the application for a public
19 assistance program.

20 Sec. 6. NEW SECTION. **144H.6 Immunity — liability and**
21 **professional discipline.**

22 1. A person or care facility acting in good faith pursuant to
23 this chapter shall not be subject to civil or criminal liability.

24 2. A licensee under chapter 148 acting reasonably and in good
25 faith pursuant to this chapter shall not be subject to licensee
26 discipline.

27 Sec. 7. NEW SECTION. **144H.7 Construction.**

28 This chapter shall not be construed to do any of the
29 following:

30 1. Require a care facility to accept the transfer or
31 admission of a patient.

32 2. Repeal, abrogate, or impair the operation of any other
33 federal or state laws governing the transfer, admission, or
34 discharge of a patient to or from a care facility.

35 3. Infringe upon the rights of a patient under federal or

1 state law relating to the involuntary transfer, admission, or
2 discharge to or from a care facility.

3 Sec. 8. NEW SECTION. **144H.8 Rules.**

4 The department may promulgate rules pursuant to chapter 17A as
5 necessary to administer this chapter.

unofficial