Red Tape Review Rule Report
(Due: September 1, 2026)

Department Name:	Health and Human Services	**Date:**	9/1/2026	**Total Rule Count:**	10
IAC #:	441	**Chapter/ SubChapter/ Rule(s):**	31	**Iowa Code Section Authorizing Rule:**	229A.15B
Contact Name:	Victoria L. Daniels	**Email:**	Victoria.daniels@hhs.iowa.gov	**Phone:**	515-829-6021

PLEASE NOTE, THE BOXES BELOW WILL EXPAND AS YOU TYPE

What is the intended benefit of the rule?

This chapter outlines requirements for patients at the Civil Commitment Unit for Sexual Offenders (CCUSO). CCUSO provides a secure, long-term, and highly structured setting to treat sexually violent predators who have served their prison terms, but who, in a separate civil trial, have been found likely to commit further violent sexual offenses.

Is the benefit being achieved? Please provide evidence.

Yes. As of February 2026, an average of 183 patients are housed and treated at CCUSO. The patient population continues to grow. For every one patient discharged, another four are admitted. CCUSO cannot deny or delay any admission.

What are the costs incurred by the public to comply with the rule?

There are no costs incurred by the public to comply with the chapter, although funds are appropriated each year to maintain CCUSO.

What are the costs to the agency or any other agency to implement/enforce the rule?

CCUSO's SFY26 operating costs are $22,630,208.

Do the costs justify the benefits achieved? Please explain.

Yes. As of February 2026, an average of 183 patients are housed and treated at CCUSO. The patient population continues to grow. For every one patient discharged, another four are admitted. CCUSO cannot deny or delay any admission.

Are there less restrictive alternatives to accomplish the benefit? ☐ YES ☒ NO
If YES, please list alternative(s) and provide analysis of less restrictive alternatives from other states, if applicable. If NO, please explain.

No. Rulemaking is required by Iowa Code section 229A.15B.

Does this chapter/rule(s) contain language that is obsolete, outdated, inconsistent, redundant, or un-necessary language, including instances where rule language is duplicative of statutory language? [list chapter/rule number(s) that fall under any of the above categories]

PLEASE NOTE, THE BOXES BELOW WILL EXPAND AS YOU TYPE

31.1 – redundant or unused definitions were deleted
31.2 – policies were referred back to the facility's manual
31.3 – deleted as being duplicative of the facility's manual
31.4 - deleted as being duplicative of the facility's manual
31.5 – revised to reflect current policy
31.6 - deleted as being duplicative of the facility's manual
31.7 - revised to reflect current policy
31.8 – deleted a restrictive term
31.9 - deleted as being duplicative of the facility's manual
31.10 – deleted restrictive terms, updated to reflect current terminology

RULES PROPOSED FOR REPEAL (list rule number[s]):

31.3, 31.4, 31.6, 31.9

RULES PROPOSED FOR RE-PROMULGATION (list rule number[s] or include rule text if available):

31.1, 31.2, 31.5, 31.7, 31.8

**For rules being re-promulgated with changes, you may attach a document with suggested changes.*

METRICS

Total number of rules repealed:	4
Proposed word count reduction after repeal and/or re-promulgation	2,980
Proposed number of restrictive terms eliminated after repeal and/or re-promulgation	90

ARE THERE ANY STATUTORY CHANGES YOU WOULD RECOMMEND INCLUDING CODIFYING ANY RULES?

No.