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House Amendment 1638

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1 1 Amend Senate File 389, as amended, passed, and
1 2 reprinted by the Senate, as follows:
1 3 #1. By striking everything after the enacting
1 4 clause and inserting the following:
1 5 <DIVISION I
1 6 LEGISLATIVE HEALTH CARE COVERAGE COMMISSION
1 7 Section 1. LEGISLATIVE HEALTH CARE COVERAGE
1 8 COMMISSION.
1 9 1. A legislative health care coverage commission
1 10 is created under the authority of the legislative
1 11 council.
1 12 a. The commission shall include the following
1 13 persons who are ex officio, nonvoting members of the
1 14 commission:
1 15 (1) The commissioner of insurance, or a designee.
1 16 (2) The director of human services, or a designee.
1 17 (3) The director of public health, or a designee.
1 18 (4) Four members of the general assembly, one
1 19 appointed by the speaker of the house of
1 20 representatives, one appointed by the minority leader
1 21 of the house of representatives, one appointed by the
1 22 majority leader of the senate, and one appointed by
1 23 the minority leader of the senate.
1 24 b. The commission shall include the following
1 25 persons who are voting members of the commission and
1 26 who are appointed by the legislative council:
1 27 (1) A person who represents the association of
1 28 business and industry.
1 29 (2) A person who represents the federation of Iowa
1 30 insurers.
1 31 (3) A person who represents the Iowa federation of
1 32 labor.
1 33 (4) One health care provider, designated by the
1 34 executive committee of the medical assistance advisory
1 35 council.
1 36 (5) A person who represents the Iowa association
1 37 of health underwriters.
1 38 (6) Three consumers.
1 39 (7) A person who represents an organization of
1 40 small businesses.
1 41 2. The legislative council may employ or contract
1 42 with a coordinator to assist the commission in
1 43 carrying out its duties. The coordinator shall gather
1 44 and coordinate information for the use of the
1 45 commission in its deliberations concerning health
1 46 reform initiatives and activities related to the
1 47 medical home system advisory council, the electronic
1 48 health information advisory council and executive
1 49 committee, the prevention and chronic care management
1 50 advisory council, the direct care worker task force,



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2 1 the health and long-term care access technical
2 2 advisory committee, the clinicians advisory panel, the
2 3 long-term living initiatives of the department of
2 4 elder affairs, medical assistance and hawk=i program
2 5 expansions and initiatives, prevention and wellness
2 6 initiatives including but not limited to those
2 7 administered through the Iowa healthy communities
2 8 initiative pursuant to section 135.27 and through the
2 9 governor's council on physical fitness and nutrition,
2 10 health care transparency activities, and other health
2 11 care reform-related advisory bodies and activities
2 12 that provide direction and promote collaborative
2 13 efforts among health care providers involved in the
2 14 initiatives and activities. The legislative services
2 15 agency shall provide administrative support to the
2 16 commission.

2 17 3. The legislative council shall appoint one
2 18 voting member as chairperson and one as vice
2 19 chairperson. Legislative members of the commission
2 20 are eligible for per diem and reimbursement of actual
2 21 expenses as provided in section 2.10. The consumers
2 22 appointed to the commission are entitled to receive a
2 23 per diem as specified in section 7E.6 for each day
2 24 spent in performance of duties as a member, and shall
2 25 be reimbursed for all actual and necessary expenses
2 26 incurred in the performance of duties as a member of
2 27 the commission.

2 28 4. The commission shall develop an Iowa health
2 29 care reform strategic plan which includes but is not
2 30 limited to a review and analysis of, and
2 31 recommendations and prioritization of recommendations
2 32 for, the following:

2 33 a. Options for the coordination of a children's
2 34 health care network in the state that provides health
2 35 care coverage to all children without such coverage;
2 36 utilizes, modifies, and enhances existing public
2 37 programs; maximizes the ability of the state to obtain
2 38 federal funding and reimbursement for such programs;
2 39 and provides access to private, affordable health care
2 40 coverage for children who are not otherwise eligible
2 41 for health care coverage through public programs.

2 42 b. Options for children, adults, and families to
2 43 transition seamlessly among public and private health
2 44 care coverage options.

2 45 c. Options for subsidized and unsubsidized health
2 46 care coverage programs which offer public and private,
2 47 adequate and affordable health care coverage including
2 48 but not limited to options to purchase coverage with
2 49 varying levels of benefits including basic or
2 50 catastrophic benefits, an intermediate level of



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3 1 benefits, and comprehensive benefits coverage. The
3 2 commission shall also consider options and make
3 3 recommendations for providing an array of benefits
3 4 that may include physical, mental, and dental health
3 5 care coverage.
3 6 d. Options to offer a program to provide coverage
3 7 under a state health or medical group insurance plan
3 8 to nonstate public employees, including employees of
3 9 counties, cities, schools, area education agencies,
3 10 and community colleges, and employees of nonprofit
3 11 employers and small employers and to pool such
3 12 employees with the state plan.
3 13 e. The ramifications of requiring each employer in
3 14 the state with more than ten employees to adopt and
3 15 maintain a cafeteria plan that satisfies section 125
3 16 of the Internal Revenue Code of 1986.
3 17 f. Options for development of a long-term strategy
3 18 to provide access to affordable health care coverage
3 19 to the uninsured in Iowa, particularly adults, and
3 20 development of a structure to implement that strategy
3 21 including consideration of whether to utilize an
3 22 existing government agency or a newly created entity.
3 23 5. As part of developing the strategic plan, the
3 24 commission shall collaborate with health insurance
3 25 experts to do including but not limited to the
3 26 following:
3 27 a. Design solutions to issues relating to
3 28 guaranteed issuance of insurance, preexisting
3 29 condition exclusions, portability, and allowable
3 30 pooling and rating classifications.
3 31 b. Formulate principles that ensure fair and
3 32 appropriate practices relating to issues involving
3 33 individual health care policies such as rescission and
3 34 preexisting condition clauses, and that provide for a
3 35 binding third-party review process to resolve disputes
3 36 related to such issues.
3 37 c. Design affordable, portable health care
3 38 coverage options for low-income children, adults, and
3 39 families.
3 40 d. Design a proposed premium schedule for health
3 41 care coverage options which includes the development
3 42 of rating factors that are consistent with market
3 43 conditions.
3 44 e. Design protocols to limit the transfer from
3 45 employer-sponsored or other private health care
3 46 coverage to state-developed health care coverage
3 47 plans.
3 48 6. The commission may request from any state
3 49 agency or official information and assistance as
3 50 needed to perform its duties pursuant to this section.



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4 1 A state agency or official shall furnish the
4 2 information or assistance requested within the
4 3 authority and resources of the state agency or
4 4 official. This subsection does not allow the
4 5 examination or copying of any public record required
4 6 by law to be kept confidential.
4 7 7. The commission shall provide progress reports
4 8 to the legislative council every quarter summarizing
4 9 the commission's activities.
4 10 8. The commission shall provide a progress report
4 11 to the general assembly by January 1, 2010,
4 12 summarizing the commission's activities thus far, that
4 13 includes but is not limited to recommendations and
4 14 prioritization of recommendations for subsidized and
4 15 unsubsidized health care coverage programs which offer
4 16 public and private and adequate and affordable health
4 17 care coverage for adults. The commission shall
4 18 collaborate with health insurance experts to ensure
4 19 that health care coverage for adults that is
4 20 consistent with the commission's recommendations and
4 21 priorities is available for purchase by the public by
4 22 July 1, 2010.
4 23 9. The commission shall provide a report to the
4 24 general assembly by January 1, 2011, summarizing the
4 25 commission's activities since the last report.
4 26 10. The commission shall conclude its
4 27 deliberations by July 1, 2011, and shall submit a
4 28 final report to the general assembly by October 1,
4 29 2011, summarizing the commission's activities
4 30 particularly pertaining to the availability of health
4 31 care coverage programs for adults, analyzing issues
4 32 studied, and setting forth options, recommendations,
4 33 and priorities for an Iowa health care reform
4 34 strategic plan that will ensure that all Iowans have
4 35 access to health care coverage which meets minimum
4 36 standards of quality and affordability. The
4 37 commission may include any other information the
4 38 commission deems relevant and necessary.
4 39 11. This section is repealed on December 31, 2011.
4 40 COORDINATING AMENDMENTS
4 41 Sec. 2. Section 514E.1, subsections 15 and 22,
4 42 Code 2009, are amended by striking the subsections.
4 43 Sec. 3. Section 514E.2, subsection 3, unnumbered
4 44 paragraph 1, Code 2009, is amended to read as follows:
4 45 The association shall submit to the commissioner a
4 46 plan of operation for the association and any
4 47 amendments necessary or suitable to assure the fair,
4 48 reasonable, and equitable administration of the
4 49 association. ~~The plan of operation shall include~~
~~4 50 provisions for the development of a comprehensive~~



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~~5 1 health care coverage plan as provided in section
5 2 514E.5. In developing the comprehensive plan the
5 3 association shall give deference to the
5 4 recommendations made by the advisory council as
5 5 provided in section 514E.6, subsection 1. The
5 6 association shall approve or disapprove but shall not
5 7 modify recommendations made by the advisory council.
5 8 Recommendations that are approved shall be included in
5 9 the plan of operation submitted to the commissioner.
5 10 Recommendations that are disapproved shall be
5 11 submitted to the commissioner with reasons for the
5 12 disapproval. The plan of operation becomes effective
5 13 upon approval in writing by the commissioner prior to
5 14 the date on which the coverage under this chapter must
5 15 be made available. After notice and hearing, the
5 16 commissioner shall approve the plan of operation if
5 17 the plan is determined to be suitable to assure the
5 18 fair, reasonable, and equitable administration of the
5 19 association, and provides for the sharing of
5 20 association losses, if any, on an equitable and
5 21 proportionate basis among the member carriers. If the
5 22 association fails to submit a suitable plan of
5 23 operation within one hundred eighty days after the
5 24 appointment of the board of directors, or if at any
5 25 later time the association fails to submit suitable
5 26 amendments to the plan, the commissioner shall adopt,
5 27 pursuant to chapter 17A, rules necessary to implement
5 28 this section. The rules shall continue in force until
5 29 modified by the commissioner or superseded by a plan
5 30 submitted by the association and approved by the
5 31 commissioner. In addition to other requirements, the
5 32 plan of operation shall provide for all of the
5 33 following:~~

~~5 34 Sec. 4. Sections 514E.5 and 514E.6, Code 2009, are
5 35 repealed.~~

~~5 36 Sec. 5. EFFECTIVE DATE. This division of this
5 37 Act, being deemed of immediate importance, takes
5 38 effect upon enactment.~~

~~5 39 DIVISION II~~

~~5 40 HEALTH CARE COVERAGE OF ADULT CHILDREN~~

~~5 41 Sec. 6. Section 422.7, Code 2009, is amended by
5 42 adding the following new subsection:~~

~~5 43 NEW SUBSECTION. 29A. If the health benefits
5 44 coverage or insurance of the taxpayer includes
5 45 coverage of a nonqualified tax dependent as determined
5 46 by the federal internal revenue service, subtract, to
5 47 the extent included, the amount of the value of such
5 48 coverage attributable to the nonqualified tax
5 49 dependent.~~

~~5 50 Sec. 7. Section 509.3, subsection 8, Code 2009, is~~



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6 1 amended to read as follows:

6 2 8. A provision that the insurer will permit
6 3 continuation of existing coverage or reenrollment in
6 4 previously existing coverage for an individual who
6 5 meets the requirements of section 513B.2, subsection
6 6 14, paragraph "a", "b", "c", "d", or "e", and who is
6 7 an unmarried child of an insured or enrollee who so
6 8 elects, at least through the policy anniversary date
6 9 on or after the date the child marries, ceases to be a
6 10 resident of this state, or attains the age of
6 11 twenty-five years old, whichever occurs first, or so
6 12 long as the unmarried child maintains full-time status
6 13 as a student in an accredited institution of
6 14 postsecondary education.

6 15 In addition to the provisions required in
6 16 subsections 1 through 7 8, the commissioner shall
6 17 require provisions through the adoption of rules
6 18 implementing the federal Health Insurance Portability
6 19 and Accountability Act, Pub. L. No. 104=191.

6 20 Sec. 8. Section 509A.13B, Code 2009, is amended to
6 21 read as follows:

6 22 509A.13B ~~CONTINUATION OF DEPENDENT COVERAGE OF~~
6 23 ~~CHILDREN~~ == CONTINUATION OR REENROLLMENT.

6 24 If a governing body, a county board of supervisors,
6 25 or a city council has procured accident or health care
6 26 coverage for its employees under this chapter such
6 27 coverage shall permit continuation of existing
6 28 coverage or reenrollment in previously existing
6 29 coverage for an individual who meets the requirements
6 30 of section 513B.2, subsection 14, paragraph "a", "b",
6 31 "c", "d", or "e", and who is an unmarried child of an
6 32 insured or enrollee who so elects, at least through
6 33 the policy anniversary date on or after the date the
6 34 child marries, ceases to be a resident of this state,
6 35 or attains the age of twenty-five years old, whichever
6 36 occurs first, or so long as the unmarried child
6 37 maintains full-time status as a student in an
6 38 accredited institution of postsecondary education.

6 39 Sec. 9. Section 514A.3B, subsection 2, Code 2009,
6 40 is amended to read as follows:

6 41 2. An insurer issuing an individual policy or
6 42 contract of accident and health insurance which
6 43 provides coverage for children of the insured shall
6 44 permit continuation of existing coverage or
6 45 reenrollment in previously existing coverage for an
6 46 individual who meets the requirements of section
6 47 513B.2, subsection 14, paragraph "a", "b", "c", "d",
6 48 or "e", and who is an unmarried child of an insured or
6 49 enrollee who so elects, at least through the policy
6 50 anniversary date on or after the date the child



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7 1 marries, ceases to be a resident of this state, or
7 2 attains the age of twenty=five years old, whichever
7 3 occurs first, or so long as the unmarried child
7 4 maintains full=time status as a student in an
7 5 accredited institution of postsecondary education.

7 6 Sec. 10. NEW SECTION. 514B.9A COVERAGE OF
7 7 CHILDREN == CONTINUATION OR REENROLLMENT.

7 8 A health maintenance organization which provides
7 9 health care coverage pursuant to an individual or
7 10 group health maintenance organization contract
7 11 regulated under this chapter for children of an
7 12 enrollee shall permit continuation of existing
7 13 coverage or reenrollment in previously existing
7 14 coverage for an individual who meets the requirements
7 15 of section 513B.2, subsection 14, paragraph "a", "b",
7 16 "c", "d", or "e", and who is an unmarried child of an
7 17 enrollee who so elects, at least through the policy
7 18 anniversary date on or after the date the child
7 19 marries, ceases to be a resident of this state, or
7 20 attains the age of twenty=five years old, whichever
7 21 occurs first, or so long as the unmarried child
7 22 maintains full=time status as a student in an
7 23 accredited institution of postsecondary education.

7 24 Sec. 11. APPLICABILITY. The sections of this Act
7 25 amending section 509.3, subsection 8, 509A.13B, and
7 26 514A.3B, subsection 2, and enacting section 514B.9A,
7 27 apply to policies, contracts, or plans of accident and
7 28 health insurance delivered, issued for delivery,
7 29 continued, or renewed in this state on or after July
7 30 1, 2009.

7 31 Sec. 12. RETROACTIVE APPLICABILITY DATE. The
7 32 section of this Act enacting section 422.7, subsection
7 33 29A, applies retroactively to January 1, 2009, for tax
7 34 years beginning on or after that date.

7 35 DIVISION III

7 36 MEDICAL ASSISTANCE AND HAWK=I PROVISIONS
7 37 COVERAGE FOR ALL INCOME=ELIGIBLE CHILDREN

7 38 Sec. 13. NEW SECTION. 249A.3A MEDICAL ASSISTANCE
7 39 == ALL INCOME=ELIGIBLE CHILDREN.

7 40 The department shall provide medical assistance to
7 41 individuals under nineteen years of age who meet the
7 42 income eligibility requirements for the state medical
7 43 assistance program and for whom federal financial
7 44 participation is or becomes available for the cost of
7 45 such assistance.

7 46 Sec. 14. NEW SECTION. 514I.8A HAWK=I == ALL
7 47 INCOME=ELIGIBLE CHILDREN.

7 48 The department shall provide coverage to
7 49 individuals under nineteen years of age who meet the
7 50 income eligibility requirements for the hawk=i program



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8 1 and for whom federal financial participation is or
 8 2 becomes available for the cost of such coverage.
 8 3 REQUIRED APPLICATION FOR DEPENDENT CHILD HEALTH CARE
 8 4 COVERAGE
 8 5 Sec. 15. Section 422.12M, Code 2009, is amended to
 8 6 read as follows:
 8 7 422.12M INCOME TAX FORM == INDICATION OF DEPENDENT
 8 8 CHILD HEALTH CARE COVERAGE.
 8 9 1. The director shall draft the income tax form to
 8 10 ~~allow~~ require beginning with the tax returns for tax
 8 11 year ~~2008~~ 2010, a person who files an individual or
 8 12 joint income tax return with the department under
 8 13 section 422.13 to indicate the presence or absence of
 8 14 health care coverage for each dependent child for whom
 8 15 an exemption is claimed.
 8 16 2. Beginning with the income tax return for tax
 8 17 year ~~2008~~ 2010, a person who files an individual or
 8 18 joint income tax return with the department under
 8 19 section 422.13, ~~may~~ shall report on the income tax
 8 20 return, in the form required, the presence or absence
 8 21 of health care coverage for each dependent child for
 8 22 whom an exemption is claimed.
 8 23 a. If the taxpayer indicates on the income tax
 8 24 return that a dependent child does not have health
 8 25 care coverage, and the income of the taxpayer's tax
 8 26 return does not exceed the highest level of income
 8 27 eligibility standard for the medical assistance
 8 28 program pursuant to chapter 249A or the hawk=i program
 8 29 pursuant to chapter 514I, the department shall send a
 8 30 notice to the taxpayer indicating that the dependent
 8 31 child may be eligible for the medical assistance
 8 32 program or the hawk=i program and providing
 8 33 information to the taxpayer about how to enroll the
 8 34 dependent child in the ~~programs~~ appropriate program.
 8 35 The taxpayer shall submit an application for the
 8 36 appropriate program within ninety days of receipt of
 8 37 the enrollment information.
 8 38 ~~b. Notwithstanding any other provision of law to~~
 8 39 ~~the contrary, a taxpayer shall not be subject to a~~
 8 40 ~~penalty for not providing the information required~~
 8 41 ~~under this section.~~
 8 42 e. b. The department shall consult with the
 8 43 department of human services in developing the tax
 8 44 return form and the information to be provided to tax
 8 45 filers under this section.
 8 46 3. The department, in cooperation with the
 8 47 department of human services, shall adopt rules
 8 48 pursuant to chapter 17A to administer this section,
 8 49 including rules defining "health care coverage" for
 8 50 the purpose of indicating its presence or absence on



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9 1 the tax form.

9 2 4. The department, in cooperation with the
9 3 department of human services, shall report, annually,
9 4 to the governor and the general assembly all of the
9 5 following:

9 6 a. The number of Iowa families, by income level,
9 7 claiming the state income tax exemption for dependent
9 8 children.

9 9 b. The number of Iowa families, by income level,
9 10 claiming the state income tax exemption for dependent
9 11 children ~~who also~~ and whether they indicate the
9 12 presence or absence of health care coverage for the
9 13 dependent children.

9 14 c. ~~The effect of the reporting requirements and~~
~~9 15 provision of information requirements under this~~
~~9 16 section on the number and percentage of children in~~
~~9 17 the state who are uninsured. The number of Iowa~~
9 18 families, by income level, claiming the state income
9 19 tax exemption for dependent children who receive
9 20 information from the department pursuant to subsection
9 21 2 and who subsequently apply for and are enrolled in
9 22 the appropriate program.

9 23 PREGNANT WOMEN INCOME ELIGIBILITY FOR MEDICAID

9 24 Sec. 16. Section 249A.3, subsection 1, paragraph
9 25 1, Code 2009, is amended to read as follows:

9 26 1. (1) Is an infant whose income is not more than
9 27 two hundred percent of the federal poverty level, as
9 28 defined by the most recently revised income guidelines
9 29 published by the United States department of health
9 30 and human services.

9 31 (2) Additionally, effective July 1, 2009, medical
9 32 assistance shall be provided to ~~an~~ a pregnant woman or
9 33 infant whose family income is at or below three
9 34 hundred percent of the federal poverty level, as
9 35 defined by the most recently revised poverty income
9 36 guidelines published by the United States department
9 37 of health and human services, if otherwise eligible.

9 38 Sec. 17. Section 514I.8, subsection 1, Code 2009,
9 39 is amended to read as follows:

9 40 1. Effective July 1, 1998, and notwithstanding any
9 41 medical assistance program eligibility criteria to the
9 42 contrary, medical assistance shall be provided to, or
9 43 on behalf of, an eligible child under the age of
9 44 nineteen whose family income does not exceed one
9 45 hundred thirty-three percent of the federal poverty
9 46 level, as defined by the most recently revised poverty
9 47 income guidelines published by the United States
9 48 department of health and human services.

9 49 Additionally, effective July 1, 2000, and
9 50 notwithstanding any medical assistance program



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10 1 eligibility criteria to the contrary, medical
10 2 assistance shall be provided to, or on behalf of, an
10 3 eligible infant whose family income does not exceed
10 4 two hundred percent of the federal poverty level, as
10 5 defined by the most recently revised poverty income
10 6 guidelines published by the United States department
10 7 of health and human services. Effective July 1, 2009,
10 8 and notwithstanding any medical assistance program
10 9 eligibility criteria to the contrary, medical
10 10 assistance shall be provided to, or on behalf of, a
10 11 pregnant woman or an eligible child who is an infant
10 12 and whose family income is at or below three hundred
10 13 percent of the federal poverty level, as defined by
10 14 the most recently revised poverty income guidelines
10 15 published by the United States department of health
10 16 and human services.

10 17 IMPROVING ACCESS AND RETENTION

10 18 Sec. 18. Section 249A.4, Code 2009, is amended by
10 19 adding the following new subsection:

10 20 NEW SUBSECTION. 16. Implement the premium
10 21 assistance program options described under the federal
10 22 Children's Health Insurance Program Reauthorization
10 23 Act of 2009, Pub. L. No. 111=3, for the medical
10 24 assistance program. The department may adopt rules as
10 25 necessary to administer these options.

10 26 Sec. 19. NEW SECTION. 509.3A CREDITABLE
10 27 COVERAGE.

10 28 For the purposes of any policies of group accident
10 29 or health insurance or combination of such policies
10 30 issued in this state, "creditable coverage" means
10 31 health benefits or coverage provided to an individual
10 32 under any of the following:

- 10 33 1. A group health plan.
- 10 34 2. Health insurance coverage.
- 10 35 3. Part A or Part B Medicare pursuant to Title
10 36 XVIII of the federal Social Security Act.
- 10 37 4. Medicaid pursuant to Title XIX of the federal
10 38 Social Security Act, other than coverage consisting
10 39 solely of benefits under section 1928 of that Act.
- 10 40 5. 10 U.S.C. ch. 55.
- 10 41 6. A health or medical care program provided
10 42 through the Indian health service or a tribal
10 43 organization.
- 10 44 7. A state health benefits risk pool.
- 10 45 8. A health plan offered under 5 U.S.C. ch. 89.
- 10 46 9. A public health plan as defined under federal
10 47 regulations.
- 10 48 10. A health benefit plan under section 5(e) of
10 49 the federal Peace Corps Act, 22 U.S.C. } 2504(e).
- 10 50 11. An organized delivery system licensed by the



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11 1 director of public health.

11 2 12. A short-term limited duration policy.

11 3 13. The hawk=i program authorized by chapter 514I.

11 4 Sec. 20. Section 513B.2, subsection 8, Code 2009,
11 5 is amended by adding the following new paragraph:

11 6 NEW PARAGRAPH. m. The hawk=i program authorized
11 7 by chapter 514I.

11 8 Sec. 21. Section 514A.3B, subsection 1, Code 2009,
11 9 is amended to read as follows:

11 10 1. An insurer which accepts an individual for
11 11 coverage under an individual policy or contract of
11 12 accident and health insurance shall waive any time
11 13 period applicable to a preexisting condition exclusion
11 14 or limitation period requirement of the policy or
11 15 contract with respect to particular services in an
11 16 individual health benefit plan for the period of time
11 17 the individual was previously covered by qualifying
11 18 previous coverage as defined in section 513C.3, by
11 19 chapter 249A or 514I, or by Medicare coverage provided
11 20 pursuant to Title XVIII of the federal Social Security

11 21 Act that provided benefits with respect to such

11 22 services, provided that the ~~qualifying previous~~

11 23 coverage was continuous to a date not more than

11 24 sixty-three days prior to the effective date of the

11 25 new policy or contract. ~~Any days of coverage provided~~

11 26 to an individual pursuant to chapter 249A or 514I, or

11 27 Medicare coverage provided pursuant to Title XVIII of

11 28 the federal Social Security Act, do not constitute

11 29 qualifying previous coverage. Such days of chapter

11 30 249A or 514I or Medicare coverage shall be counted as

11 31 part of the maximum sixty-three-day grace period and

11 32 shall not constitute a basis for the waiver of any

11 33 preexisting condition exclusion or limitation period.

11 34 Sec. 22. Section 514A.3B, Code 2009, is amended by
11 35 adding the following new subsection:

11 36 NEW SUBSECTION. 3. For the purposes of any

11 37 policies of accident and sickness insurance issued in

11 38 this state, "creditable coverage" means health

11 39 benefits or coverage provided to an individual under

11 40 any of the following:

11 41 a. A group health plan.

11 42 b. Health insurance coverage.

11 43 c. Part A or Part B Medicare pursuant to Title

11 44 XVIII of the federal Social Security Act.

11 45 d. Medicaid pursuant to Title XIX of the federal

11 46 Social Security Act, other than coverage consisting

11 47 solely of benefits under section 1928 of that Act.

11 48 e. 10 U.S.C. ch. 55.

11 49 f. A health or medical care program provided

11 50 through the Indian health service or a tribal



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12 1 organization.
12 2 g. A state health benefits risk pool.
12 3 h. A health plan offered under 5 U.S.C. ch. 89.
12 4 i. A public health plan as defined under federal
12 5 regulations.
12 6 j. A health benefit plan under section 5(e) of the
12 7 federal Peace Corps Act, 22 U.S.C. } 2504(e).
12 8 k. An organized delivery system licensed by the
12 9 director of public health.
12 10 l. A short-term limited duration policy.
12 11 m. The hawk=i program authorized by chapter 514I.
12 12 Sec. 23. Section 514I.1, subsection 4, Code 2009,
12 13 is amended to read as follows:
12 14 4. It is the intent of the general assembly that
12 15 the hawk=i program be an integral part of the
12 16 continuum of health insurance coverage and that the
12 17 program be developed and implemented in such a manner
12 18 as to facilitate movement of families between health
12 19 insurance providers and to facilitate the transition
12 20 of families to private sector health insurance
12 21 coverage. ~~It is the intent of the general assembly in~~
~~12 22 developing such continuum of health insurance coverage~~
~~12 23 and in facilitating such transition, that beginning~~
~~12 24 July 1, 2009, the department implement the hawk=i~~
~~12 25 expansion program.~~
12 26 Sec. 24. Section 514I.2, subsection 8, Code 2009,
12 27 is amended by striking the subsection.
12 28 Sec. 25. Section 514I.3, Code 2009, is amended by
12 29 adding the following new subsection:
12 30 NEW SUBSECTION. 6. Health care coverage provided
12 31 under this chapter in accordance with Title XXI of the
12 32 federal Social Security Act shall be recognized as
12 33 prior creditable coverage for the purposes of private
12 34 individual and group health insurance coverage.
12 35 Sec. 26. Section 514I.4, subsection 2, Code 2009,
12 36 is amended to read as follows:
12 37 2. a. The director, with the approval of the
12 38 board, may contract with participating insurers to
12 39 provide dental-only services.
12 40 b. The director, with the approval of the board,
12 41 may contract with participating insurers to provide
12 42 the supplemental dental-only coverage to otherwise
12 43 eligible children who have private health care
12 44 coverage as specified in the federal Children's Health
12 45 Insurance Program Reauthorization Act of 2009, Pub. L.
12 46 No. 111-3.
12 47 Sec. 27. Section 514I.4, subsection 5, paragraphs
12 48 a and b, Code 2009, are amended to read as follows:
12 49 a. Develop a joint program application form ~~not to~~
~~12 50 exceed two pages in length, which is consistent with~~



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~~13 1 the rules of the board, which is easy to understand,~~
~~13 2 complete, and concise, and which, to the greatest~~
~~13 3 extent possible, coordinates with the supplemental~~
~~13 4 forms, and the same application and renewal~~
~~13 5 verification process for both the hawk=i and medical~~
~~13 6 assistance program programs.~~
~~13 7 b. (1) Establish the family cost sharing amounts~~
~~13 8 for children of families with incomes of one hundred~~
~~13 9 fifty percent or more but not exceeding two hundred~~
~~13 10 percent of the federal poverty level, of not less than~~
~~13 11 ten dollars per individual and twenty dollars per~~
~~13 12 family, if not otherwise prohibited by federal law,~~
~~13 13 with the approval of the board.~~
~~13 14 (2) Establish for children of families with~~
~~13 15 incomes exceeding two hundred percent but not~~
~~13 16 exceeding three hundred percent of the federal poverty~~
~~13 17 level, family cost-sharing amounts, and graduated~~
~~13 18 premiums based on a rationally developed sliding fee~~
~~13 19 schedule, in accordance with federal law, with the~~
~~13 20 approval of the board.~~
~~13 21 Sec. 28. Section 514I.5, subsection 7, paragraph~~
~~13 22 1, Code 2009, is amended to read as follows:~~
~~13 23 1. Develop options and recommendations to allow~~
~~13 24 children eligible for the hawk=i or hawk=i expansion~~
~~13 25 program to participate in qualified employer-sponsored~~
~~13 26 health plans through a premium assistance program.~~
~~13 27 The options and recommendations shall ensure~~
~~13 28 reasonable alignment between the benefits and costs of~~
~~13 29 the hawk=i and hawk=i expansion programs program and~~
~~13 30 the employer-sponsored health plans consistent with~~
~~13 31 federal law. The options and recommendations shall be~~
~~13 32 completed by January 1, 2009, and submitted to the~~
~~13 33 governor and the general assembly for consideration as~~
~~13 34 part of the hawk=i and hawk=i expansion programs. In~~
~~13 35 addition, the board shall implement the premium~~
~~13 36 assistance program options described under the federal~~
~~13 37 Children's Health Insurance Program Reauthorization~~
~~13 38 Act of 2009, Pub. L. No. 111=3, for the hawk=i~~
~~13 39 program.~~
~~13 40 Sec. 29. Section 514I.5, subsection 8, paragraph~~
~~13 41 e, Code 2009, is amended by adding the following new~~
~~13 42 subparagraph:~~
~~13 43 NEW SUBPARAGRAPH. (15) Translation and~~
~~13 44 interpreter services as specified pursuant to the~~
~~13 45 federal Children's Health Insurance Program~~
~~13 46 Reauthorization Act of 2009, Pub. L. No. 111=3.~~
~~13 47 Sec. 30. Section 514I.5, subsection 8, paragraph~~
~~13 48 g, Code 2009, is amended to read as follows:~~
~~13 49 g. Presumptive eligibility criteria for the~~
~~13 50 program. Beginning January 1, 2010, presumptive~~



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14 1 eligibility shall be provided for eligible children.

14 2 Sec. 31. Section 514I.5, subsection 9, Code 2009,
14 3 is amended to read as follows:

14 4 9. a. The hawk=i board may provide approval to
14 5 the director to contract with participating insurers
14 6 to provide dental-only services. In determining
14 7 whether to provide such approval to the director, the
14 8 board shall take into consideration the impact on the
14 9 overall program of single source contracting for
14 10 dental services.

14 11 b. The hawk=i board may provide approval to the
14 12 director to contract with participating insurers to
14 13 provide the supplemental dental-only coverage to
14 14 otherwise eligible children who have private health
14 15 care coverage as specified in the federal Children's
14 16 Health Insurance Program Reauthorization Act of 2009,
14 17 Pub. L. No. 111=3.

14 18 Sec. 32. Section 514I.6, subsections 2 and 3, Code
14 19 2009, are amended to read as follows:

14 20 2. Provide or reimburse accessible, quality
14 21 medical or dental services.

14 22 3. Require that any plan provided by the
14 23 participating insurer establishes and maintains a
14 24 conflict management system that includes methods for
14 25 both preventing and resolving disputes involving the
14 26 health or dental care needs of eligible children, and
14 27 a process for resolution of such disputes.

14 28 Sec. 33. Section 514I.6, subsection 4, paragraph
14 29 a, Code 2009, is amended to read as follows:

14 30 a. A list of providers of medical or dental
14 31 services under the plan.

14 32 Sec. 34. Section 514I.7, subsection 2, paragraph
14 33 d, Code 2009, is amended to read as follows:

14 34 d. Monitor and assess the medical and dental care
14 35 provided through or by participating insurers as well
14 36 as complaints and grievances.

14 37 Sec. 35. Section 514I.8, subsection 2, paragraph
14 38 c, Code 2009, is amended to read as follows:

14 39 c. Is a member of a family whose income does not
14 40 exceed ~~two~~ three hundred percent of the federal
14 41 poverty level, as defined in 42 U.S.C. } 9902(2),
14 42 including any revision required by such section, and
14 43 in accordance with the federal Children's Health

14 44 Insurance Program Reauthorization Act of 2009, Pub. L.
14 45 No. 111=3.

14 46 Sec. 36. Section 514I.10, Code 2009, is amended by
14 47 adding the following new subsection:

14 48 NEW SUBSECTION. 2A. Cost sharing for an eligible
14 49 child whose family income exceeds two hundred percent
14 50 but does not exceed three hundred percent of the



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15 1 federal poverty level may include copayments and
15 2 graduated premium amounts which do not exceed the
15 3 limitations of federal law.

15 4 Sec. 37. Section 514I.11, subsections 1 and 3,
15 5 Code 2009, are amended to read as follows:

15 6 1. A hawk=i trust fund is created in the state
15 7 treasury under the authority of the department of
15 8 human services, in which all appropriations and other
15 9 revenues of the program ~~and the hawk=i expansion~~

~~15 10 program~~ such as grants, contributions, and participant
15 11 payments shall be deposited and used for the purposes
15 12 of the program ~~and the hawk=i expansion program~~. The
15 13 moneys in the fund shall not be considered revenue of
15 14 the state, but rather shall be funds of the program.

15 15 3. Moneys in the fund are appropriated to the
15 16 department and shall be used to offset any program ~~and~~
~~15 17 hawk=i expansion program~~ costs.

15 18 Sec. 38. MEDICAL ASSISTANCE PROGRAM ==
15 19 PROGRAMMATIC AND PROCEDURAL PROVISIONS. The
15 20 department of human services shall adopt rules
15 21 pursuant to chapter 17A to provide for all of the
15 22 following:

15 23 1. To allow for the submission of one pay stub per
15 24 employer by an individual as verification of earned
15 25 income for the medical assistance program when it is
15 26 indicative of future income.

15 27 2. To allow for an averaging of three years of
15 28 income for self-employed families to establish
15 29 eligibility for the medical assistance program.

15 30 3. To extend the period for annual renewal by
15 31 medical assistance members by mailing the renewal form
15 32 to the member on the first day of the month prior to
15 33 the month of renewal.

15 34 4. To provide for all of the following in
15 35 accordance with the requirements for qualification for
15 36 the performance bonus payments described under the
15 37 federal Children's Health Insurance Program
15 38 Reauthorization Act of 2009, Pub. L. No. 111=3:

15 39 a. Utilization of joint applications and
15 40 supplemental forms, and the same application and
15 41 renewal verification processes for the medical
15 42 assistance and hawk=i programs.

15 43 b. Implementation of administrative or paperless
15 44 verification at renewal for the medical assistance
15 45 program.

15 46 c. Utilization of presumptive eligibility when
15 47 determining a child's eligibility for the medical
15 48 assistance program.

15 49 d. Utilization of the express lane option,
15 50 including utilization of other public program



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16 1 databases to reach and enroll children in the medical
16 2 assistance program.
16 3 5. To provide translation and interpretation
16 4 services under the medical assistance program as
16 5 specified pursuant to the federal Children's Health
16 6 Insurance Program Reauthorization Act of 2009, Pub. L.
16 7 No. 111=3.
16 8 Sec. 39. HAWK=I PROGRAM == PROGRAMMATIC AND
16 9 PROCEDURAL PROVISIONS. The hawk=i board, in
16 10 consultation with the department of human services,
16 11 shall adopt rules pursuant to chapter 17A to provide
16 12 for all of the following:
16 13 1. To allow for the submission of one pay stub per
16 14 employer by an individual as verification of earned
16 15 income for the hawk=i program when it is indicative of
16 16 future income.
16 17 2. To allow for an averaging of three years of
16 18 income for self=employed families to establish
16 19 eligibility for the hawk=i program.
16 20 3. To provide for all of the following in
16 21 accordance with the requirements for qualification for
16 22 the performance bonus payments described under the
16 23 federal Children's Health Insurance Program
16 24 Reauthorization Act of 2009, Pub. L. No. 111=3:
16 25 a. Utilization of joint applications and
16 26 supplemental forms, and the same application and
16 27 renewal verification processes for the hawk=i and
16 28 medical assistance programs.
16 29 b. Implementation of administrative or paperless
16 30 verification at renewal for the hawk=i program.
16 31 c. Utilization of presumptive eligibility when
16 32 determining a child's eligibility for the hawk=i
16 33 program.
16 34 d. Utilization of the express lane option,
16 35 including utilization of other public program
16 36 databases to reach and enroll children in the hawk=i
16 37 program.
16 38 Sec. 40. DEMONSTRATION GRANTS == CHIPRA. The
16 39 department of human services in cooperation with the
16 40 department of public health and other appropriate
16 41 agencies, shall apply for grants available under the
16 42 Children's Health Insurance Program Reauthorization
16 43 Act of 2009, Pub. L. No. 111=3, to promote outreach
16 44 activities and quality child health outcomes under the
16 45 medical assistance and hawk=i programs.
16 46 Sec. 41. Section 514I.12, Code 2009, is repealed.
16 47 Sec. 42. EFFECTIVE DATE. The section of this
16 48 division of this Act amending section 422.12M, takes
16 49 effect July 1, 2010.
16 50 DIVISION IV



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17 1 VOLUNTEER HEALTH CARE PROVIDERS
17 2 Sec. 43. Section 135.24, Code 2009, is amended to
17 3 read as follows:
17 4 135.24 VOLUNTEER HEALTH CARE PROVIDER PROGRAM
17 5 ESTABLISHED == IMMUNITY FROM CIVIL LIABILITY.
17 6 1. The director shall establish within the
17 7 department a program to provide to eligible hospitals,
17 8 clinics, free clinics, field dental clinics, specialty
17 9 health care provider offices, or other health care
17 10 facilities, health care referral programs, or
17 11 charitable organizations, free medical, dental,
17 12 chiropractic, pharmaceutical, nursing, optometric,
17 13 psychological, social work, behavioral science,
17 14 podiatric, physical therapy, occupational therapy,
17 15 respiratory therapy, and emergency medical care
17 16 services given on a voluntary basis by health care
17 17 providers. A participating health care provider shall
17 18 register with the department and obtain from the
17 19 department a list of eligible, participating
17 20 hospitals, clinics, free clinics, field dental
17 21 clinics, specialty health care provider offices, or
17 22 other health care facilities, health care referral
17 23 programs, or charitable organizations.
17 24 2. The department, in consultation with the
17 25 department of human services, shall adopt rules to
17 26 implement the volunteer health care provider program
17 27 which shall include the following:
17 28 a. Procedures for registration of health care
17 29 providers deemed qualified by the board of medicine,
17 30 the board of physician assistants, the dental board,
17 31 the board of nursing, the board of chiropractic, the
17 32 board of psychology, the board of social work, the
17 33 board of behavioral science, the board of pharmacy,
17 34 the board of optometry, the board of podiatry, the
17 35 board of physical and occupational therapy, the board
17 36 of respiratory care, and the Iowa department of public
17 37 health, as applicable.
17 38 b. Procedures for registration of free clinics,
17 39 ~~and~~ field dental clinics, and specialty health care
17 40 provider offices.
17 41 c. Criteria for and identification of hospitals,
17 42 clinics, free clinics, field dental clinics, specialty
17 43 health care provider offices, or other health care
17 44 facilities, health care referral programs, or
17 45 charitable organizations, eligible to participate in
17 46 the provision of free medical, dental, chiropractic,
17 47 pharmaceutical, nursing, optometric, psychological,
17 48 social work, behavioral science, podiatric, physical
17 49 therapy, occupational therapy, respiratory therapy, or
17 50 emergency medical care services through the volunteer



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18 1 health care provider program. A free clinic, a field
18 2 dental clinic, a specialty health care provider
18 3 office, a health care facility, a health care referral
18 4 program, a charitable organization, or a health care
18 5 provider participating in the program shall not bill
18 6 or charge a patient for any health care provider
18 7 service provided under the volunteer health care
18 8 provider program.

18 9 d. Identification of the services to be provided
18 10 under the program. The services provided may include,
18 11 but shall not be limited to, obstetrical and
18 12 gynecological medical services, psychiatric services
18 13 provided by a physician licensed under chapter 148,
18 14 dental services provided under chapter 153, or other
18 15 services provided under chapter 147A, 148A, 148B,
18 16 148C, 149, 151, 152, 152B, 152E, 154, 154B, 154C,
18 17 154D, 154F, or 155A.

18 18 3. A health care provider providing free care
18 19 under this section shall be considered an employee of
18 20 the state under chapter 669, shall be afforded
18 21 protection as an employee of the state under section
18 22 669.21, and shall not be subject to payment of claims
18 23 arising out of the free care provided under this
18 24 section through the health care provider's own
18 25 professional liability insurance coverage, provided
18 26 that the health care provider has done all of the
18 27 following:

18 28 a. Registered with the department pursuant to
18 29 subsection 1.

18 30 b. Provided medical, dental, chiropractic,
18 31 pharmaceutical, nursing, optometric, psychological,
18 32 social work, behavioral science, podiatric, physical
18 33 therapy, occupational therapy, respiratory therapy, or
18 34 emergency medical care services through a hospital,
18 35 clinic, free clinic, field dental clinic, specialty
18 36 health care provider office, or other health care
18 37 facility, health care referral program, or charitable
18 38 organization listed as eligible and participating by
18 39 the department pursuant to subsection 1.

18 40 4. A free clinic providing free care under this
18 41 section shall be considered a state agency solely for
18 42 the purposes of this section and chapter 669 and shall
18 43 be afforded protection under chapter 669 as a state
18 44 agency for all claims arising from the provision of
18 45 free care by a health care provider registered under
18 46 subsection 3 who is providing services at the free
18 47 clinic in accordance with this section or from the
18 48 provision of free care by a health care provider who
18 49 is covered by adequate medical malpractice insurance
18 50 as determined by the department, if the free clinic



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19 1 has registered with the department pursuant to
19 2 subsection 1.
19 3 5. A field dental clinic providing free care under
19 4 this section shall be considered a state agency solely
19 5 for the purposes of this section and chapter 669 and
19 6 shall be afforded protection under chapter 669 as a
19 7 state agency for all claims arising from the provision
19 8 of free care by a health care provider registered
19 9 under subsection 3 who is providing services at the
19 10 field dental clinic in accordance with this section or
19 11 from the provision of free care by a health care
19 12 provider who is covered by adequate medical
19 13 malpractice insurance, as determined by the
19 14 department, if the field dental clinic has registered
19 15 with the department pursuant to subsection 1.
19 16 5A. A specialty health care provider office
19 17 providing free care under this section shall be
19 18 considered a state agency solely for the purposes of
19 19 this section and chapter 669 and shall be afforded
19 20 protection under chapter 669 as a state agency for all
19 21 claims arising from the provision of free care by a
19 22 health care provider registered under subsection 3 who
19 23 is providing services at the specialty health care
19 24 provider office in accordance with this section or
19 25 from the provision of free care by a health care
19 26 provider who is covered by adequate medical
19 27 malpractice insurance, as determined by the
19 28 department, if the specialty health care provider
19 29 office has registered with the department pursuant to
19 30 subsection 1.
19 31 6. For the purposes of this section:
19 32 a. "Charitable organization" means a charitable
19 33 organization within the meaning of section 501(c)(3)
19 34 of the Internal Revenue Code.
19 35 b. "Field dental clinic" means a dental clinic
19 36 temporarily or periodically erected at a location
19 37 utilizing mobile dental equipment, instruments, or
19 38 supplies, as necessary, to provide dental services.
19 39 c. "Free clinic" means a facility, other than a
19 40 hospital or health care provider's office which is
19 41 exempt from taxation under section 501(c)(3) of the
19 42 Internal Revenue Code and which has as its sole
19 43 purpose the provision of health care services without
19 44 charge to individuals who are otherwise unable to pay
19 45 for the services.
19 46 d. "Health care provider" means a physician
19 47 licensed under chapter 148, a chiropractor licensed
19 48 under chapter 151, a physical therapist licensed
19 49 pursuant to chapter 148A, an occupational therapist
19 50 licensed pursuant to chapter 148B, a podiatrist



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20 1 licensed pursuant to chapter 149, a physician
20 2 assistant licensed and practicing under a supervising
20 3 physician pursuant to chapter 148C, a licensed
20 4 practical nurse, a registered nurse, or an advanced
20 5 registered nurse practitioner licensed pursuant to
20 6 chapter 152 or 152E, a respiratory therapist licensed
20 7 pursuant to chapter 152B, a dentist, dental hygienist,
20 8 or dental assistant registered or licensed to practice
20 9 under chapter 153, an optometrist licensed pursuant to
20 10 chapter 154, a psychologist licensed pursuant to
20 11 chapter 154B, a social worker licensed pursuant to
20 12 chapter 154C, a mental health counselor or a marital
20 13 and family therapist licensed pursuant to chapter
20 14 154D, a pharmacist licensed pursuant to chapter 155A,
20 15 or an emergency medical care provider certified
20 16 pursuant to chapter 147A.

20 17 e. "Specialty health care provider office" means
20 18 the private office or clinic of an individual
20 19 specialty health care provider or group of specialty
20 20 health care providers as referred by the Iowa
20 21 collaborative safety net provider network established
20 22 in section 135.153, but does not include a field
20 23 dental clinic, a free clinic, or a hospital.

20 24 DIVISION V

20 25 HEALTH CARE WORKFORCE SUPPORT INITIATIVE

20 26 Sec. 44. NEW SECTION. 135.153A SAFETY NET
20 27 PROVIDER RECRUITMENT AND RETENTION INITIATIVES PROGRAM
20 28 REPEAL.

20 29 The department, in accordance with efforts pursuant
20 30 to sections 135.163 and 135.164 and in cooperation
20 31 with the Iowa collaborative safety net provider
20 32 network governing group as described in section
20 33 135.153, shall establish and administer a safety net
20 34 provider recruitment and retention initiatives program
20 35 to address the health care workforce shortage relative
20 36 to safety net providers. Funding for the program may
20 37 be provided through the health care workforce shortage
20 38 fund or the safety net provider network workforce
20 39 shortage account created in section 135.175. The
20 40 department, in cooperation with the governing group,
20 41 shall adopt rules pursuant to chapter 17A to implement
20 42 and administer such program. This section is repealed
20 43 June 30, 2014.

20 44 Sec. 45. NEW SECTION. 135.175 HEALTH CARE
20 45 WORKFORCE SUPPORT INITIATIVE == WORKFORCE SHORTAGE
20 46 FUND == ACCOUNTS == REPEAL.

20 47 1. a. A health care workforce support initiative
20 48 is established to provide for the coordination and
20 49 support of various efforts to address the health care
20 50 workforce shortage in this state. This initiative



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21 1 shall include the medical residency training state
21 2 matching grants program created in section 135.176,
21 3 the health care professional and nursing workforce
21 4 shortage initiative created in sections 261.128 and
21 5 261.129, the safety net provider recruitment and
21 6 retention initiatives program credited in section
21 7 135.153A, health care workforce shortage national
21 8 initiatives, and the physician assistant mental health
21 9 fellowship program created in section 135.177.
21 10 b. A health care workforce shortage fund is
21 11 created in the state treasury as a separate fund under
21 12 the control of the department, in cooperation with the
21 13 entities identified in this section as having control
21 14 over the accounts within the fund. The fund and the
21 15 accounts within the fund shall be controlled and
21 16 managed in a manner consistent with the principles
21 17 specified and the strategic plan developed pursuant to
21 18 sections 135.163 and 135.164.
21 19 2. The fund and the accounts within the fund shall
21 20 consist of moneys appropriated from the general fund
21 21 of the state for the purposes of the fund or the
21 22 accounts within the fund; moneys received from the
21 23 federal government for the purposes of addressing the
21 24 health care workforce shortage; contributions, grants,
21 25 and other moneys from communities and health care
21 26 employers; and moneys from any other public or private
21 27 source available.
21 28 3. The department and any entity identified in
21 29 this section as having control over any of the
21 30 accounts within the fund, may receive contributions,
21 31 grants, and in-kind contributions to support the
21 32 purposes of the fund and the accounts within the fund.
21 33 4. The fund and the accounts within the fund shall
21 34 be separate from the general fund of the state and
21 35 shall not be considered part of the general fund of
21 36 the state. The moneys in the fund and the accounts
21 37 within the fund shall not be considered revenue of the
21 38 state, but rather shall be moneys of the fund or the
21 39 accounts. The moneys in the fund and the accounts
21 40 within the fund are not subject to section 8.33 and
21 41 shall not be transferred, used, obligated,
21 42 appropriated, or otherwise encumbered, except to
21 43 provide for the purposes of this section.
21 44 Notwithstanding section 12C.7, subsection 2, interest
21 45 or earnings on moneys deposited in the fund shall be
21 46 credited to the fund and the accounts within the fund.
21 47 5. The fund shall consist of the following
21 48 accounts:
21 49 a. The medical residency training account. The
21 50 medical residency training account shall be under the



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22 1 control of the department and the moneys in the
22 2 account shall be used for the purposes of the medical
22 3 residency training state matching grants program as
22 4 specified in section 135.176. Moneys in the account
22 5 shall consist of moneys appropriated or allocated for
22 6 deposit in or received by the fund or the account and
22 7 specifically dedicated to the medical residency
22 8 training state matching grants program or account for
22 9 the purposes of such account.
22 10 b. The health care professional and nurse
22 11 workforce shortage initiative account. The health
22 12 care professional and nurse workforce shortage
22 13 initiative account shall be under the control of the
22 14 college student aid commission created in section
22 15 261.1 and the moneys in the account shall be used for
22 16 the purposes of the health care professional incentive
22 17 payment program and the nurse workforce shortage
22 18 initiative as specified in sections 261.128 and
22 19 261.129. Moneys in the account shall consist of
22 20 moneys appropriated or allocated for deposit in or
22 21 received by the fund or the account and specifically
22 22 dedicated to the health care professional and nurse
22 23 workforce shortage initiative or the account for the
22 24 purposes of the account.
22 25 c. The safety net provider network workforce
22 26 shortage account. The safety net provider network
22 27 workforce shortage account shall be under the control
22 28 of the governing group of the Iowa collaborative
22 29 safety net provider network created in section 135.153
22 30 and the moneys in the account shall be used for the
22 31 purposes of the safety net provider recruitment and
22 32 retention initiatives program as specified in section
22 33 135.153A. Moneys in the account shall consist of
22 34 moneys appropriated or allocated for deposit in or
22 35 received by the fund or the account and specifically
22 36 dedicated to the safety net provider recruitment and
22 37 retention initiatives program or the account for the
22 38 purposes of the account.
22 39 d. The health care workforce shortage national
22 40 initiatives account. The health care workforce
22 41 shortage national initiatives account shall be under
22 42 the control of the state entity identified for receipt
22 43 of the federal funds by the federal government entity
22 44 through which the federal funding is available for a
22 45 specified health care workforce shortage initiative.
22 46 Moneys in the account shall consist of moneys
22 47 appropriated or allocated for deposit in or received
22 48 by the fund or the account and specifically dedicated
22 49 to health care workforce shortage national initiatives
22 50 or the account and for a specified health care



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23 1 workforce shortage initiative.
23 2 e. The physician assistant mental health
23 3 fellowship program account. The physician assistant
23 4 mental health fellowship program account shall be
23 5 under the control of the department and the moneys in
23 6 the account shall be used for the purposes of the
23 7 physician assistant mental health fellowship program
23 8 as specified in section 135.177. Moneys in the
23 9 account shall consist of moneys appropriated or
23 10 allocated for deposit in or received by the fund or
23 11 the account and specifically dedicated to the
23 12 physician assistant mental health fellowship program
23 13 or the account for the purposes of the account.
23 14 6. a. Moneys in the fund and the accounts in the
23 15 fund shall only be appropriated in a manner consistent
23 16 with the principles specified and the strategic plan
23 17 developed pursuant to sections 135.163 and 135.164 to
23 18 support the medical residency training state matching
23 19 grants program, the health care professional incentive
23 20 payment program, the nurse educator incentive payment
23 21 and nursing faculty fellowship programs, the safety
23 22 net recruitment and retention initiatives program, for
23 23 national health care workforce shortage initiatives,
23 24 for the physician assistant mental health fellowship
23 25 program, and to provide funding for state health care
23 26 workforce shortage programs as provided in this
23 27 section.
23 28 b. State programs that may receive funding from
23 29 the fund and the accounts in the fund, if specifically
23 30 designated for the purpose of drawing down federal
23 31 funding, are the primary care recruitment and
23 32 retention endeavor (PRIMECARRE), the Iowa affiliate of
23 33 the national rural recruitment and retention network,
23 34 the primary care office shortage designation program,
23 35 the state office of rural health, and the Iowa health
23 36 workforce center, administered through the bureau of
23 37 health care access of the department of public health;
23 38 the area health education centers programs at Des
23 39 Moines university == osteopathic medical center and
23 40 the university of Iowa; the Iowa collaborative safety
23 41 net provider network established pursuant to section
23 42 135.153; any entity identified by the federal
23 43 government entity through which federal funding for a
23 44 specified health care workforce shortage initiative is
23 45 received; and a program developed in accordance with
23 46 the strategic plan developed by the department of
23 47 public health in accordance with sections 135.163 and
23 48 135.164.
23 49 c. State appropriations to the fund shall be
23 50 allocated in equal amounts to each of the accounts



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24 1 within the fund, unless otherwise specified in the
24 2 appropriation or allocation. Any federal funding
24 3 received for the purposes of addressing state health
24 4 care workforce shortages shall be deposited in the
24 5 health care workforce shortage national initiatives
24 6 account, unless otherwise specified by the source of
24 7 the funds, and shall be used as required by the source
24 8 of the funds. If use of the federal funding is not
24 9 designated, twenty-five percent of such funding shall
24 10 be deposited in the safety net provider network
24 11 workforce shortage account to be used for the purposes
24 12 of the account and the remainder of the funds shall be
24 13 used in accordance with the strategic plan developed
24 14 by the department of public health in accordance with
24 15 sections 135.163 and 135.164, or to address workforce
24 16 shortages as otherwise designated by the department of
24 17 public health. Other sources of funding shall be
24 18 deposited in the fund or account and used as specified
24 19 by the source of the funding.

24 20 7. No more than five percent of the moneys in any
24 21 of the accounts within the fund, not to exceed one
24 22 hundred thousand dollars in each account, shall be
24 23 used for administrative purposes, unless otherwise
24 24 provided by the appropriation, allocation, or source
24 25 of the funds.

24 26 8. The department, in cooperation with the
24 27 entities identified in this section as having control
24 28 over any of the accounts within the fund, shall submit
24 29 an annual report to the governor and the general
24 30 assembly regarding the status of the health care
24 31 workforce support initiative, including the balance
24 32 remaining in and appropriations from the health care
24 33 workforce shortage fund and the accounts within the
24 34 fund.

24 35 9. This section is repealed June 30, 2014.

24 36 Sec. 46. NEW SECTION. 135.176 MEDICAL RESIDENCY
24 37 TRAINING STATE MATCHING GRANTS PROGRAM == REPEAL.

24 38 1. The department shall establish a medical
24 39 residency training state matching grants program to
24 40 provide matching state funding to sponsors of
24 41 accredited graduate medical education residency
24 42 programs in this state to establish, expand, or
24 43 support medical residency training programs. Funding
24 44 for the program may be provided through the health
24 45 care workforce shortage fund or the medical residency
24 46 training account created in section 135.175. For the
24 47 purposes of this section, unless the context otherwise
24 48 requires, "accredited" means a graduate medical
24 49 education program approved by the accreditation
24 50 council for graduate medical education or the American



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25 1 osteopathic association. The grant funds may be used
25 2 to support medical residency programs through any of
25 3 the following:

25 4 a. The establishment of new or alternative campus
25 5 accredited medical residency training programs. For
25 6 the purposes of this paragraph, "new or alternative
25 7 campus accredited medical residency training program"
25 8 means a program that is accredited by a recognized
25 9 entity approved for such purpose by the accreditation
25 10 council for graduate medical education or the American
25 11 osteopathic association with the exception that a new
25 12 medical residency training program that, by reason of
25 13 an insufficient period of operation is not eligible
25 14 for accreditation on or before the date of submission
25 15 of an application for a grant, may be deemed
25 16 accredited if the accreditation council for graduate
25 17 medical education or the American osteopathic
25 18 association finds, after consultation with the
25 19 appropriate accreditation entity, that there is
25 20 reasonable assurance that the program will meet the
25 21 accreditation standards of the entity prior to the
25 22 date of graduation of the initial class in the
25 23 program.

25 24 b. The provision of new residency positions within
25 25 existing accredited medical residency or fellowship
25 26 training programs.

25 27 c. The funding of residency positions which are in
25 28 excess of the federal residency cap. For the purposes
25 29 of this paragraph, "in excess of the federal residency
25 30 cap" means a residency position for which no federal
25 31 Medicare funding is available because the residency
25 32 position is a position beyond the cap for residency
25 33 positions established by the federal Balanced Budget
25 34 Act of 1997, Pub. L. No. 105=33.

25 35 2. The department shall adopt rules pursuant to
25 36 chapter 17A to provide for all of the following:

25 37 a. Eligibility requirements for and qualifications
25 38 of a sponsor of an accredited graduate medical
25 39 education residency program to receive a grant. The
25 40 requirements and qualifications shall include but are
25 41 not limited to all of the following:

25 42 (1) Only a sponsor that establishes a dedicated
25 43 fund to support a residency program that meets the
25 44 specifications of this section shall be eligible to
25 45 receive a matching grant. A sponsor funding residency
25 46 positions in excess of the federal residency cap, as
25 47 defined in subsection 1, paragraph "c", exclusive of
25 48 funds provided under the medical residency training
25 49 state matching grants program established in this
25 50 section, is deemed to have satisfied this requirement



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26 1 and shall be eligible for a matching grant equal to
26 2 the amount of funds expended for such residency
26 3 positions, subject to the limitation on the maximum
26 4 award of grant funds specified in paragraph "e".
26 5 (2) A sponsor shall demonstrate through documented
26 6 financial information as prescribed by rule of the
26 7 department, that funds have been reserved and will be
26 8 expended by the sponsor in the amount required to
26 9 provide matching funds for each residency proposed in
26 10 the request for state matching funds.
26 11 (3) A sponsor shall demonstrate through objective
26 12 evidence as prescribed by rule of the department, a
26 13 need for such residency program in the state.
26 14 b. The application process for the grant.
26 15 c. Criteria for preference in awarding of the
26 16 grants, including preference in the residency
26 17 specialty.
26 18 d. Determination of the amount of a grant. The
26 19 total amount of a grant awarded to a sponsor shall be
26 20 limited to no more than twenty=five percent of the
26 21 amount that the sponsor has demonstrated through
26 22 documented financial information has been reserved and
26 23 will be expended by the sponsor for each residency
26 24 sponsored for the purpose of the residency program.
26 25 e. The maximum award of grant funds to a
26 26 particular individual sponsor per year. An individual
26 27 sponsor shall not receive more than twenty=five
26 28 percent of the state matching funds available each
26 29 year to support the program. However, if less than
26 30 ninety=five percent of the available funds has been
26 31 awarded in a given year, a sponsor may receive more
26 32 than twenty=five percent of the state matching funds
26 33 available if total funds awarded do not exceed
26 34 ninety=five percent of the available funds. If more
26 35 than one sponsor meets the requirements of this
26 36 section and has established, expanded, or supported a
26 37 graduate medical residency training program, as
26 38 specified in subsection 1, in excess of the sponsor's
26 39 twenty=five percent maximum share of state matching
26 40 funds, the state matching funds shall be divided
26 41 proportionately among such sponsors.
26 42 f. Use of the funds awarded. Funds may be used to
26 43 pay the costs of establishing, expanding, or
26 44 supporting an accredited graduate medical education
26 45 program as specified in this section, including but
26 46 not limited to the costs associated with residency
26 47 stipends and physician faculty stipends.
26 48 3. This section is repealed June 30, 2014.
26 49 Sec. 47. NEW SECTION. 135.177 PHYSICIAN
26 50 ASSISTANT MENTAL HEALTH FELLOWSHIP PROGRAM == REPEAL.



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27 1 1. The department, in cooperation with the college
27 2 student aid commission, shall establish a physician
27 3 assistant mental health fellowship program in
27 4 accordance with this section. Funding for the program
27 5 may be provided through the health care workforce
27 6 shortage fund or the physician assistant mental health
27 7 fellowship program account created in section 135.175.
27 8 The purpose of the program is to determine the effect
27 9 of specialized training and support for physician
27 10 assistants in providing mental health services on
27 11 addressing Iowa's shortage of mental health
27 12 professionals.

27 13 2. The program shall provide for all of the
27 14 following:

27 15 a. Collaboration with a hospital serving a
27 16 thirteen-county area in central Iowa that provides a
27 17 clinic at the Iowa veterans home, a private nonprofit
27 18 agency headquartered in a city with a population of
27 19 more than one hundred ninety thousand that operates a
27 20 freestanding psychiatric medical institution for
27 21 children, a private university with a medical school
27 22 educating osteopathic physicians located in a city
27 23 with a population of more than one hundred ninety
27 24 thousand, the Iowa veterans home, and any other
27 25 clinical partner designated for the program.
27 26 Population figures used in this paragraph refer to the
27 27 most recent certified federal census. The clinical
27 28 partners shall provide supervision, clinical
27 29 experience, training, and other support for the
27 30 program and physician assistant students participating
27 31 in the program.

27 32 b. Elderly, youth, and general population clinical
27 33 experiences.

27 34 c. A fellowship of twelve months for three
27 35 physician assistant students, annually.

27 36 d. Supervision of students participating in the
27 37 program provided by the university and the other
27 38 clinical partners participating in the program.

27 39 e. A student participating in the program shall be
27 40 eligible for a stipend of not more than fifty thousand
27 41 dollars for the twelve months of the fellowship plus
27 42 related fringe benefits. In addition, a student who
27 43 completes the program and practices in Iowa in a
27 44 mental health professional shortage area, as defined
27 45 in section 135.80, shall be eligible for up to twenty
27 46 thousand dollars in loan forgiveness. The stipend and
27 47 loan forgiveness provisions shall be determined by the
27 48 department and the college student aid commission, in
27 49 consultation with the clinical partners.

27 50 f. The state and private entity clinical partners



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28 1 shall regularly evaluate and document their
28 2 experiences with the approaches utilized and outcomes
28 3 achieved by the program to identify an optimal model
28 4 for operating the program. The evaluation process
28 5 shall include but is not limited to identifying ways
28 6 the program's clinical and training components could
28 7 be modified to facilitate other student and practicing
28 8 physician assistants specializing as mental health
28 9 professionals.

28 10 3. This section is repealed June 30, 2014.

28 11 Sec. 48. Section 261.2, Code 2009, is amended by
28 12 adding the following new subsection:

28 13 NEW SUBSECTION. 10. Administer the health care
28 14 professional incentive payment program established in
28 15 section 261.128 and the nursing workforce shortage
28 16 initiative created in section 261.129. This
28 17 subsection is repealed June 30, 2014.

28 18 Sec. 49. Section 261.23, subsection 1, Code 2009,
28 19 is amended to read as follows:

28 20 1. A registered nurse and nurse educator loan
28 21 forgiveness program is established to be administered
28 22 by the commission. The program shall consist of loan
28 23 forgiveness for eligible federally guaranteed loans
28 24 for registered nurses and nurse educators who practice
28 25 or teach in this state. For purposes of this section,
28 26 unless the context otherwise requires, "nurse
28 27 educator" means a registered nurse who holds a
28 28 master's degree or doctorate degree and is employed as
28 29 a faculty member who teaches nursing as provided in
28 30 655 IAC 2.6(152) at a community college, an accredited
28 31 private institution, or an institution of higher
28 32 education governed by the state board of regents.

28 33 Sec. 50. Section 261.23, subsection 2, paragraph
28 34 c, Code 2009, is amended to read as follows:

28 35 c. Complete and return, on a form approved by the
28 36 commission, an affidavit of practice verifying that
28 37 the applicant is a registered nurse practicing in this
28 38 state or a nurse educator teaching at a community
28 39 college, an accredited private institution, or an
28 40 institution of higher learning governed by the state
28 41 board of regents.

28 42 Sec. 51. NEW SECTION. 261.128 HEALTH CARE
28 43 PROFESSIONAL INCENTIVE PAYMENT PROGRAM == REPEAL.

28 44 1. The commission shall establish a health care
28 45 professional incentive payment program to recruit and
28 46 retain health care professionals in this state.
28 47 Funding for the program may be provided through the
28 48 health care workforce shortage fund or the health care
28 49 professional and nurse workforce shortage account
28 50 created in section 135.175.



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29 1 2. The commission shall administer the incentive
29 2 payment program with the assistance of Des Moines
29 3 university == osteopathic medical center.
29 4 3. The commission, with the assistance of Des
29 5 Moines university == osteopathic medical center, shall
29 6 adopt rules pursuant to chapter 17A, relating to the
29 7 establishment and administration of the health care
29 8 professional incentive payment program. The rules
29 9 adopted shall address all of the following:
29 10 a. Eligibility and qualification requirements for
29 11 a health care professional, a community, and a health
29 12 care employer to participate in the incentive payment
29 13 program. Any community in the state and all health
29 14 care specialties shall be considered for
29 15 participation. However, health care employers located
29 16 in and communities that are designated as medically
29 17 underserved areas or populations or that are
29 18 designated as health professional shortage areas by
29 19 the health resources and services administration of
29 20 the United States department of health and human
29 21 services shall have first priority in the awarding of
29 22 incentive payments.
29 23 (1) To be eligible, a health care professional at
29 24 a minimum must not have any unserved obligations to a
29 25 federal, state, or local government or other entity
29 26 that would prevent compliance with obligations under
29 27 the agreement for the incentive payment; must have a
29 28 current and unrestricted license to practice the
29 29 professional's respective profession; and must be able
29 30 to begin full-time clinical practice upon signing an
29 31 agreement for an incentive payment.
29 32 (2) To be eligible, a community must provide a
29 33 clinical setting for full-time practice of a health
29 34 care professional and must provide a fifty thousand
29 35 dollar matching contribution for a physician and a
29 36 fifteen thousand dollar matching contribution for any
29 37 other health care professional to receive an equal
29 38 amount of state matching funds.
29 39 (3) To be eligible, a health care employer must
29 40 provide a clinical setting for a full-time practice of
29 41 a health care professional and must provide a fifty
29 42 thousand dollar matching contribution for a physician
29 43 and a fifteen thousand dollar matching contribution
29 44 for any other health care professional to receive an
29 45 equal amount of state matching funds.
29 46 b. The process for awarding incentive payments.
29 47 The commission shall receive recommendations from the
29 48 department of public health regarding selection of
29 49 incentive payment recipients. The process shall
29 50 require each recipient to enter into an agreement with



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30 1 the commission that specifies the obligations of the
30 2 recipient and the commission prior to receiving the
30 3 incentive payment.
30 4 c. Public awareness regarding the program
30 5 including notification of potential health care
30 6 professionals, communities, and health care employers
30 7 about the program and dissemination of applications to
30 8 appropriate entities.
30 9 d. Measures regarding all of the following:
30 10 (1) The amount of the incentive payment and the
30 11 specifics of obligated service for an incentive
30 12 payment recipient. An incentive payment recipient
30 13 shall agree to provide service in full-time clinical
30 14 practice for a minimum of four consecutive years. If
30 15 an incentive payment recipient is sponsored by a
30 16 community or health care employer, the obligated
30 17 service shall be provided in the sponsoring community
30 18 or health care employer location. An incentive
30 19 payment recipient sponsored by a health care employer
30 20 shall agree to provide health care services as
30 21 specified in an employment agreement with the
30 22 sponsoring health care employer.
30 23 (2) Determination of the conditions of the
30 24 incentive payment applicable to an incentive payment
30 25 recipient. At the time of approval for participation
30 26 in the program, an incentive payment recipient shall
30 27 be required to submit proof of indebtedness incurred
30 28 as the result of obtaining loans to pay for
30 29 educational costs resulting in a degree in health
30 30 sciences. For the purposes of this subparagraph,
30 31 "indebtedness" means debt incurred from obtaining a
30 32 government or commercial loan for actual costs paid
30 33 for tuition, reasonable education expenses, and
30 34 reasonable living expenses related to the graduate,
30 35 undergraduate, or associate education of a health care
30 36 professional.
30 37 (3) Enforcement of the state's rights under an
30 38 incentive payment agreement, including the
30 39 commencement of any court action. A recipient who
30 40 fails to fulfill the requirements of the incentive
30 41 payment agreement is subject to repayment of the
30 42 incentive payment in an amount equal to the amount of
30 43 the incentive payment. A recipient who fails to meet
30 44 the requirements of the incentive payment agreement
30 45 may also be subject to repayment of moneys advanced by
30 46 a community or health care employer as provided in any
30 47 agreement with the community or employer.
30 48 (4) A process for monitoring compliance with
30 49 eligibility requirements, obligated service
30 50 provisions, and use of funds by recipients to verify



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31 1 eligibility of recipients and to ensure that state,
31 2 federal, and other matching funds are used in
31 3 accordance with program requirements.
31 4 (5) The use of the funds received. Any portion of
31 5 the incentive payment that is attributable to federal
31 6 funds shall be used as required by the federal entity
31 7 providing the funds. Any portion of the incentive
31 8 payment that is attributable to state funds shall
31 9 first be used toward payment of any outstanding loan
31 10 indebtedness of the recipient. The remaining portion
31 11 of the incentive payment shall be used as specified in
31 12 the incentive payment agreement.
31 13 4. A recipient is responsible for reporting on
31 14 federal income tax forms any amount received through
31 15 the program, to the extent required by federal law.
31 16 Incentive payments received through the program by a
31 17 recipient in compliance with the requirements of the
31 18 incentive payment program are exempt from state income
31 19 taxation.
31 20 5. This section is repealed June 30, 2014.
31 21 Sec. 52. NEW SECTION. 261.129 NURSING WORKFORCE
31 22 SHORTAGE INITIATIVE == REPEAL.
31 23 1. NURSE EDUCATOR INCENTIVE PAYMENT PROGRAM.
31 24 a. The commission shall establish a nurse educator
31 25 incentive payment program. Funding for the program
31 26 may be provided through the health care workforce
31 27 shortage fund or the health care professional and
31 28 nurse workforce shortage initiative account created in
31 29 section 135.175. For the purposes of this subsection,
31 30 "nurse educator" means a registered nurse who holds a
31 31 master's degree or doctorate degree and is employed as
31 32 a faculty member who teaches nursing in a nursing
31 33 education program as provided in 655 IAC 2.6 at a
31 34 community college, an accredited private institution,
31 35 or an institution of higher education governed by the
31 36 state board of regents.
31 37 b. The program shall consist of incentive payments
31 38 to recruit and retain nurse educators. The program
31 39 shall provide for incentive payments of up to twenty
31 40 thousand dollars for a nurse educator who remains
31 41 teaching in a qualifying teaching position for a
31 42 period of not less than four consecutive academic
31 43 years.
31 44 c. The nurse educator and the commission shall
31 45 enter into an agreement specifying the obligations of
31 46 the nurse educator and the commission. If the nurse
31 47 educator leaves the qualifying teaching position prior
31 48 to teaching for four consecutive academic years, the
31 49 nurse educator shall be liable to repay the incentive
31 50 payment amount to the state, plus interest as



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32 1 specified by rule. However, if the nurse educator
32 2 leaves the qualifying teaching position involuntarily,
32 3 the nurse educator shall be liable to repay only a pro
32 4 rata amount of the incentive payment based on
32 5 incompleting years of service.
32 6 d. The commission, in consultation with the
32 7 department of public health, shall adopt rules
32 8 pursuant to chapter 17A relating to the establishment
32 9 and administration of the nurse educator incentive
32 10 payment program. The rules shall include provisions
32 11 specifying what constitutes a qualifying teaching
32 12 position.
32 13 2. NURSING FACULTY FELLOWSHIP PROGRAM.
32 14 a. The commission shall establish a nursing
32 15 faculty fellowship program to provide funds to nursing
32 16 schools in the state, including but not limited to
32 17 nursing schools located at community colleges, for
32 18 fellowships for individuals employed in qualifying
32 19 positions on the nursing faculty. Funding for the
32 20 program may be provided through the health care
32 21 workforce shortage fund or the health care
32 22 professional and nurse workforce shortage initiative
32 23 account created in section 135.175. The program shall
32 24 be designed to assist nursing schools in filling
32 25 vacancies in qualifying positions throughout the
32 26 state.
32 27 b. The commission, in consultation with the
32 28 department of public health and in cooperation with
32 29 nursing schools throughout the state, shall develop a
32 30 distribution formula which shall provide that no more
32 31 than thirty percent of the available moneys are
32 32 awarded to a single nursing school. Additionally, the
32 33 program shall limit funding for a qualifying position
32 34 in a nursing school to no more than ten thousand
32 35 dollars per year for up to three years.
32 36 c. The commission, in consultation with the
32 37 department of public health, shall adopt rules
32 38 pursuant to chapter 17A to administer the program.
32 39 The rules shall include provisions specifying what
32 40 constitutes a qualifying position at a nursing school.
32 41 d. In determining eligibility for a fellowship,
32 42 the commission shall consider all of the following:
32 43 (1) The length of time a qualifying position has
32 44 gone unfilled at a nursing school.
32 45 (2) Documented recruiting efforts by a nursing
32 46 school.
32 47 (3) The geographic location of a nursing school.
32 48 (4) The type of nursing program offered at the
32 49 nursing school, including associate, bachelor's,
32 50 master's, or doctoral degrees in nursing, and the need



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33 1 for the specific nursing program in the state.
33 2 3. REPEAL. This section is repealed June 30,
33 3 2014.
33 4 Sec. 53. HEALTH CARE WORKFORCE INITIATIVES ==
33 5 FEDERAL FUNDING. The department of public health
33 6 shall work with the department of workforce
33 7 development and health care stakeholders to apply for
33 8 federal moneys allocated in the federal American
33 9 Recovery and Reinvestment Act of 2009 for health care
33 10 workforce initiatives that are available through a
33 11 competitive grant process administered by the health
33 12 resources and services administration of the United
33 13 States department of health and human services or the
33 14 United States department of health and human services.
33 15 Any federal moneys received shall be deposited in the
33 16 health care workforce shortage fund created in section
33 17 135.175 as enacted by this division of this Act and
33 18 shall be used for the purposes specified for the fund
33 19 and for the purposes specified in the federal American
33 20 Recovery and Reinvestment Act of 2009.
33 21 Sec. 54. IMPLEMENTATION. This division of this
33 22 Act shall be implemented only to the extent funding is
33 23 available.
33 24 Sec. 55. CODE EDITOR DIRECTIVES. The Code editor
33 25 shall do all of the following:
33 26 1. Create a new division in chapter 135 codifying
33 27 section 135.175, as enacted in this division of this
33 28 Act, as the health care workforce support initiative
33 29 and fund.
33 30 2. Create a new division in chapter 135 codifying
33 31 sections 135.176 and 135.177, as enacted in this
33 32 division of this Act, as health care workforce
33 33 support.
33 34 3. Create a new division in chapter 261 codifying
33 35 section 261.128, as enacted in this division of this
33 36 Act, as the health care professional incentive payment
33 37 program.
33 38 4. Create a new division in chapter 261 codifying
33 39 section 261.129, as enacted in this division of this
33 40 Act, as the nursing workforce shortage initiative.
33 41 DIVISION VI
33 42 GIFTS == REPORTING OF SANCTIONS
33 43 Sec. 56. REPORTING OF SANCTIONS FOR GIFTS. The
33 44 health profession boards established in chapter 147
33 45 shall report to the general assembly by January 15,
33 46 2010, any public information regarding sanctions
33 47 levied against a health care professional for receipt
33 48 of gifts in a manner not in compliance with the
33 49 requirements and limitations of the respective health
33 50 profession as established by the respective board.



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House Amendment 1639

PAG LIN

1 1 Amend House File 816 as follows:
1 2 #1. Page 1, by inserting before line 34 the
1 3 following:
1 4 <Sec. _____. NEW SECTION. 422.72A SUSPECTED MISUSE
1 5 OF PERSONAL INFORMATION == NOTICE REQUIRED.
1 6 1. For the purposes of this section, the following
1 7 definitions apply:
1 8 a. "Affected individual" means an individual who
1 9 is identified by or connected with personal
1 10 information contained in the department's records.
1 11 b. "Personal information" means all of the
1 12 following:
1 13 (1) Social security number.
1 14 (2) Tax identification number.
1 15 (3) Driver's license number or other unique
1 16 identification number created or collected by a
1 17 government body.
1 18 (4) Financial account number, credit card number,
1 19 or debit card number in combination with any required
1 20 security code, access code, or password that would
1 21 permit access to an individual's financial account.
1 22 (5) Unique electronic identifier or routing code,
1 23 in combination with any required security code, access
1 24 code, or password.
1 25 c. "Suspected misuse of personal information"
1 26 means circumstances exist which would cause a
1 27 reasonable person to believe that an individual's
1 28 personal information is being used by an unauthorized
1 29 individual. Such circumstances include but are not
1 30 limited to either of the following:
1 31 (1) A tax identification number under which wages
1 32 are being reported by two or more individuals.
1 33 (2) A tax identification number of an individual
1 34 under the age of sixteen with reported wages exceeding
1 35 one thousand dollars for a single quarterly period.
1 36 2. a. Unless otherwise prohibited by state or
1 37 federal law, the department shall provide notice to
1 38 each affected individual if department records
1 39 indicate a suspected misuse of personal information.
1 40 Notice shall be made without unreasonable delay. If
1 41 the affected individual is a minor, notice shall be
1 42 provided to the minor's parent or guardian.
1 43 b. If notice is provided to an affected individual
1 44 under paragraph "a", notice of the suspected misuse of
1 45 personal information shall also be provided to an
1 46 appropriate law enforcement agency.
1 47 3. Notice provided to an affected individual shall
1 48 be clear and conspicuous and be provided by at least
1 49 one of the following:
1 50 a. Written notice to the affected individual's



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2 1 last address of record.
2 2 b. Electronic mail notice, if the affected
2 3 individual has agreed to receive communications
2 4 electronically.
2 5 c. Telephonic notice, if the communication is made
2 6 directly with the affected individual.>
2 7 #2. Title page, line 3, by inserting after the
2 8 word <interest> the following: <and requiring the
2 9 department to provide notice of suspected misuse of
2 10 personal information>.
2 11 #3. By renumbering as necessary.
2 12
2 13
2 14
2 15 PETTENGILL of Benton
2 16 HF 816.203 83
2 17 tw/sc/24524



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House Amendment 1640

PAG LIN

1 1 Amend House File 764 as follows:
1 2 #1. Page 2, by inserting after line 30 the
1 3 following:
1 4 <Sec. _____. 2008 Iowa Acts, chapter 1109, section
1 5 11, subsection 3, paragraph b, is amended to read as
1 6 follows:
1 7 b. Make recommendations for creating and enhancing
1 8 comprehensive sustainable recycling programs. Such
1 9 recommendations may include methods of collecting and
1 10 paying for the recycling of residential, industrial,
1 11 and commercial waste, mechanisms for increasing the
1 12 recycling of construction and demolition waste, and
1 13 incentives for increasing the recycling of yard waste,
1 14 food or other organic waste, hazardous household
1 15 waste, household-generated medical sharps, and
1 16 electronic waste.>
1 17 #2. By renumbering as necessary.
1 18
1 19
1 20
1 21 D. OLSON of Boone
1 22 HF 764.701 83
1 23 tm/rj/24522
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House Amendment 1641

PAG LIN

1 1 Amend the amendment, H=1638, to Senate File 389, as
1 2 amended, passed, and reprinted by the Senate, as
1 3 follows:
1 4 #1. Page 3, line 5, by inserting after the word
1 5 <coverage.> the following: <Affordable health care
1 6 coverage options for purchase by adults and families
1 7 shall be developed with the goal of including options
1 8 for which the contribution requirement for all
1 9 cost-sharing expenses is no more than six and one-half
1 10 percent of family income.>
1 11
1 12
1 13
1 14 SMITH of Marshall
1 15
1 16
1 17
1 18 UPMEYER of Hancock
1 19 SF 389.511 83
1 20 av/rj/24525
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House Amendment 1642

PAG LIN

1 1 Amend the amendment, H=1150, to House File 712, as
1 2 follows:
1 3 #1. By striking page 1, line 4, through page 6,
1 4 line 16 and inserting the following:
1 5 <<Section 1. NEW SECTION. 714H.1 TITLE.
1 6 This chapter shall be known and may be cited as the
1 7 "Private Right of Action for Consumer Frauds Act".
1 8 Sec. 2. NEW SECTION. 714H.2 DEFINITIONS.
1 9 1. "Actual damages" means all compensatory damages
1 10 proximately caused by the prohibited practice or act
1 11 that are reasonably ascertainable in amount. "Actual
1 12 damages" does not include damages for bodily injury,
1 13 pain and suffering, mental distress, or loss of
1 14 consortium, loss of life, or loss of enjoyment of
1 15 life.
1 16 2. "Advertisement" means the same as defined in
1 17 section 714.16.
1 18 3. "Consumer" means a natural person or the
1 19 person's legal representative.
1 20 4. "Consumer merchandise" means merchandise
1 21 offered for sale or lease, or sold or leased,
1 22 primarily for personal, family, or household purposes.
1 23 5. "Deception" means an act or practice that is
1 24 likely to mislead a substantial number of consumers as
1 25 to a material fact or facts.
1 26 6. "Merchandise" means the same as defined in
1 27 section 714.16.
1 28 7. "Person" means the same as defined in section
1 29 714.16.
1 30 8. "Sale" means any sale or offer for sale of
1 31 consumer merchandise for cash or credit.
1 32 9. "Unfair practice" means the same as defined in
1 33 section 714.16.
1 34 Sec. 3. NEW SECTION. 714H.3 PROHIBITED PRACTICES
1 35 AND ACTS.
1 36 1. A person shall not engage in a practice or act
1 37 the person knows or reasonably should know is an
1 38 unfair practice, deception, fraud, false pretense, or
1 39 false promise, or the misrepresentation, concealment,
1 40 suppression, or omission of a material fact, with the
1 41 intent that others rely upon the unfair practice,
1 42 deception, fraud, false pretense, false promise,
1 43 misrepresentation, concealment, suppression, or
1 44 omission in connection with the advertisement, sale,
1 45 or lease of consumer merchandise, or the solicitation
1 46 of contributions for charitable purposes. For the
1 47 purposes of this chapter, a claimant alleging an
1 48 unfair practice, deception, fraud, false pretense,
1 49 false promise, or misrepresentation must prove that
1 50 the prohibited practice related to a material fact or



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House Amendment 1642 continued

2 1 facts. "Solicitations of contributions for charitable
2 2 purposes" does not include solicitations made on
2 3 behalf of a political organization as defined in
2 4 section 13C.1, solicitations made on behalf of a
2 5 religious organization as defined in section 13C.1,
2 6 solicitations made on behalf of a state, regionally,
2 7 or nationally accredited college or university, or
2 8 solicitations made on behalf of a nonprofit foundation
2 9 benefiting a state, regionally, or nationally
2 10 accredited college or university subject to section
2 11 509(a)(1) or 509(a)(3) of the Internal Revenue Code of
2 12 1986.

2 13 2. A person shall not engage in any practice or
2 14 act that is in violation of any of the following:

2 15 a. Section 321.69.
2 16 b. Chapter 516D.
2 17 c. Section 516E.5, 516E.9, or 516E.10.
2 18 d. Chapter 555A.
2 19 e. Section 714.16, subsection 2, paragraphs "b"
2 20 through "n".
2 21 f. Chapter 714A.

2 22 Sec. 4. NEW SECTION. 714H.4 EXCLUSIONS.

2 23 1. This chapter shall not apply to any of the
2 24 following:

2 25 a. Merchandise offered or provided by any of the
2 26 following persons, including business entities
2 27 organized under Title XII by those persons and the
2 28 officers, directors, employees, and agents of those
2 29 persons or business entities, pursuant to a profession
2 30 or business for which they are licensed or registered:

2 31 (1) Insurance companies subject to Title XIII.
2 32 (2) Attorneys licensed to practice law in this
2 33 state.
2 34 (3) Financial institutions which includes any bank
2 35 incorporated under the provisions of any state or
2 36 federal law, any savings and loan association or
2 37 savings bank incorporated under the provisions of any
2 38 state or federal law, and any credit union organized
2 39 under the provisions of any state or federal law, and
2 40 any affiliate or subsidiary of a bank, savings and
2 41 loan association, savings bank, or credit union.
2 42 (4) Persons or facilities licensed, certified, or
2 43 registered under chapters 135B, 135C, 135J, 148, 148A,
2 44 148B, 148C, 149, 151, 152, 152A, 152B, 153, 154, 154B,
2 45 154C, 154D, 155A, 156, 169, 522B, 542, 542B, 543B,
2 46 544A, or 544B.

2 47 b. Advertising by a retailer for a product, other
2 48 than a drug or other product claiming to have a
2 49 health-related benefit or use, if the advertising is
2 50 prepared by a supplier, unless the retailer



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House Amendment 1642 continued

3 1 participated in the preparation of the advertisement
3 2 or knew or should have known that the advertisement
3 3 was deceptive, false, or misleading.
3 4 c. In connection with an advertisement that
3 5 violates this chapter, the newspaper, magazine,
3 6 publication, or other print media in which the
3 7 advertisement appears, including the publisher of the
3 8 newspaper, magazine, publication, or other print media
3 9 in which the advertisement appears, or the radio
3 10 station, television station, or other electronic media
3 11 which disseminates the advertisement, including an
3 12 employee, agent, or representative of the publisher,
3 13 newspaper, magazine, publication or other print media,
3 14 or the radio station, television station, or other
3 15 electronic media.
3 16 d. The provision of local exchange carrier
3 17 telephone service pursuant to a certificate issued
3 18 under section 476.29.
3 19 e. Public utilities as defined in section 476.1
3 20 that furnish gas by a piped distribution system or
3 21 electricity to the public for compensation.
3 22 f. Any advertisement that complies with the
3 23 statutes, rules, and regulations of the federal trade
3 24 commission.
3 25 g. Conduct that is required or permitted by the
3 26 orders or rules of, or a statute administered by, a
3 27 federal, state, or local governmental agency.
3 28 h. An affirmative act that violates this chapter
3 29 but is specifically required by other applicable law,
3 30 to the extent that the actor could not reasonably
3 31 avoid a violation of this chapter.
3 32 i. In any action relating to a charitable
3 33 solicitation, an individual who has engaged in the
3 34 charitable solicitation as an unpaid, uncompensated
3 35 volunteer and who does not receive monetary gain of
3 36 any sort from engaging in the solicitation.
3 37 j. The provision of cable television service or
3 38 video service pursuant to a franchise under section
3 39 364.2 or 477A.2.
3 40 k. A corporation holding one or more industrial
3 41 loan licenses pursuant to chapter 536A and employing
3 42 fewer than sixty full-time employees or a corporation
3 43 holding one or more regulated loan licenses pursuant
3 44 to chapter 536 and employing fewer than sixty
3 45 full-time employees. For purposes of this paragraph,
3 46 "corporation" means the same as defined in section
3 47 536A.2.
3 48 2. "Material fact" as used in this chapter does
3 49 not include repairs of damage to, adjustments on, or
3 50 replacements of parts with new parts of otherwise new



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House Amendment 1642 continued

4 1 merchandise if the repairs, adjustments, or
4 2 replacements are made to achieve compliance with
4 3 factory specifications and are made before sale of the
4 4 merchandise at retail and the actual cost of any labor
4 5 and parts charged to or performed by a retailer for
4 6 any such repairs, adjustments, and parts does not
4 7 exceed three hundred dollars or ten percent of the
4 8 actual cost to a retailer including freight of the
4 9 merchandise, whichever is less, provided that the
4 10 seller posts in a conspicuous place notice that
4 11 repairs, adjustments, or replacements will be
4 12 disclosed upon request. The exclusion provided in
4 13 this subsection does not apply to the concealment,
4 14 suppression, or omission of a material fact if the
4 15 purchaser requests disclosure of any repair,
4 16 adjustment, or replacement.

4 17 Sec. 5. NEW SECTION. 714H.5 PRIVATE RIGHT OF
4 18 ACTION.

4 19 1. A consumer who suffers an ascertainable loss of
4 20 money or property as the result of a prohibited
4 21 practice or act in violation of this chapter may bring
4 22 an action at law to recover actual damages. The court
4 23 may order such equitable relief as it deems necessary
4 24 to protect the public from further violations,
4 25 including temporary and permanent injunctive relief.

4 26 2. If the court finds that a person has violated
4 27 this chapter and the consumer is awarded actual
4 28 damages, the court shall award to the consumer the
4 29 costs of the action and to the consumer's attorney
4 30 reasonable fees. Reasonable attorney fees shall be
4 31 determined by the value of the time reasonably
4 32 expended by the attorney including but not limited to
4 33 consideration of the following factors:

- 4 34 a. The time and labor required.
- 4 35 b. The novelty and difficulty of the issues in the
4 36 case.
- 4 37 c. The skills required to perform the legal
4 38 services properly.
- 4 39 d. The preclusion of other employment by the
4 40 attorney due to the attorney's acceptance of the case.
- 4 41 e. The customary fee.
- 4 42 f. Whether the fee is fixed or contingent.
- 4 43 g. The time limitations imposed by the client or
4 44 the circumstances of the case.
- 4 45 h. The amount of money involved in the case and
4 46 the results obtained.
- 4 47 i. The experience, reputation, and ability of the
4 48 attorney.
- 4 49 j. The undesirability of the case.
- 4 50 k. The nature and length of the professional



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5 1 relationship between the attorney and the client.
5 2 1. Attorney fee awards in similar cases.
5 3 3. In order to recover damages, a claim under this
5 4 section shall be proved by a preponderance of the
5 5 evidence.
5 6 4. If the finder of fact finds by a preponderance
5 7 of clear, convincing, and satisfactory evidence that a
5 8 prohibited practice or act in violation of this
5 9 chapter constitutes willful and wanton disregard for
5 10 the rights or safety of another, in addition to an
5 11 award of actual damages, statutory damages up to three
5 12 times the amount of actual damages may be awarded to a
5 13 prevailing consumer.
5 14 5. An action pursuant to this chapter must be
5 15 brought within two years of the occurrence of the last
5 16 event giving rise to the cause of action under this
5 17 chapter or within two years of the discovery of the
5 18 violation of this chapter by the person bringing the
5 19 action, whichever is later.
5 20 6. This section shall not affect a consumer's
5 21 right to seek relief under any other theory of law.
5 22 7. A person shall not be held liable in any action
5 23 brought under this section for a violation of this
5 24 chapter if the person shows by a preponderance of the
5 25 evidence that the violation was not intentional and
5 26 resulted from a bona fide error notwithstanding the
5 27 maintenance of procedures reasonably adopted to avoid
5 28 the error.
5 29 Sec. 6. NEW SECTION. 714H.6 ATTORNEY GENERAL
5 30 NOTIFICATION.
5 31 1. A party filing a petition, counterclaim,
5 32 cross-petition, or pleading, or any count thereof, in
5 33 intervention alleging a violation under this chapter,
5 34 within seven days following the date of filing such
5 35 pleading, shall provide a copy to the attorney general
5 36 and, within seven days following entry of any final
5 37 judgment in the action, shall provide a copy of the
5 38 judgment to the attorney general.
5 39 2. A party appealing to district court a small
5 40 claims order or judgment involving an issue raised
5 41 under this chapter, within seven days of providing
5 42 notice of the appeal, shall notify the attorney
5 43 general in writing and provide a copy of the pleading
5 44 raising the issue and a copy of the small claims court
5 45 order or judgment.
5 46 3. A party appealing an order or judgment
5 47 involving an issue raised under this chapter, within
5 48 seven days following the date such notice of appeal is
5 49 filed with the court, shall notify the attorney
5 50 general in writing and provide a copy of the pleading



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6 1 raising the issue and a copy of the court order or
6 2 judgment being appealed.
6 3 4. Upon timely application to the court in which
6 4 an action involving an issue raised under this chapter
6 5 is pending, the attorney general may intervene as a
6 6 party at any time or may be heard at any time. The
6 7 attorney general's failure to intervene shall not
6 8 preclude the attorney general from bringing a separate
6 9 enforcement action.
6 10 5. All copies of pleadings, orders, judgments, and
6 11 notices required by this section to be sent to the
6 12 attorney general shall be sent by certified mail
6 13 unless the attorney general has previously been
6 14 provided such copies of pleadings, orders, judgments,
6 15 or notices in the same action by certified mail, in
6 16 which case subsequent mailings may be made by regular
6 17 mail. Failure to provide the required mailings to the
6 18 attorney general shall not be grounds for dismissal of
6 19 an action under this chapter, but shall be grounds for
6 20 a subsequent action by the attorney general to vacate
6 21 or modify the judgment.
6 22 Sec. 7. NEW SECTION. 714H.7 CLASS ACTIONS.
6 23 A class action lawsuit alleging a violation of this
6 24 chapter shall not be filed with a court unless it has
6 25 been approved by the attorney general. The attorney
6 26 general shall approve the filing of a class action
6 27 lawsuit alleging a violation of this chapter unless
6 28 the attorney general determines that the lawsuit is
6 29 frivolous. This section shall not affect the
6 30 requirements of any other law or of the Iowa rules of
6 31 civil procedure relating to class action lawsuits.
6 32 Sec. 8. NEW SECTION. 714H.8 SEVERABILITY CLAUSE.
6 33 If any provision of this chapter or its application
6 34 to any person or circumstances is held invalid, the
6 35 invalidity does not affect other provisions or
6 36 applications of this chapter that can be given effect
6 37 without the invalid provision or application, and to
6 38 this end the provisions of this chapter are severable.
6 39 Sec. 9. APPLICABILITY. This Act applies to causes
6 40 of actions accruing on or after the effective date of
6 41 this Act.>
6 42 #____. Title page, line 1, by striking the word
6 43 <cause> and inserting the following: <right>.
6 44 #____. Title page, line 2, by striking the word
6 45 <providing> and inserting the following:
6 46 <including>.>
6 47
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6 49
6 50 HUSER of Polk



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House Amendment 1642 continued

7 1
7 2
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7 4 SWAIM of Davis
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7 8 STRUYK of Pottawattamie
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7 12 PALMER of Mahaska
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7 14
7 15
7 16 R. OLSON of Polk
7 17 HF 712.509 83
7 18 rh/rh/24386



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House Amendment 1643

PAG LIN

1 1 Amend the amendment, H=1636, to Senate File 224, as
1 2 amended, passed, and reprinted by the Senate, as
1 3 follows:
1 4 #1. Page 1, by inserting after line 23 the
1 5 following:
1 6 <#____. Page 8, by inserting after line 19 the
1 7 following:
1 8 <A person may simultaneously hold an active
1 9 journeyperson license and an inactive master
1 10 license.>>
1 11 #2. Page 1, line 40, by inserting after the word
1 12 <board> the following: <and city and county building
1 13 officials>.
1 14 #3. By renumbering as necessary.
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1 18 QUIRK of Chickasaw
1 19 SF 224.504 83
1 20 jr/rj/24530
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House Amendment 1644

PAG LIN

1 1 Amend House File 826 as follows:
1 2 #1. Page 2, by inserting after line 35 the
1 3 following:
1 4 <Sec. _____. 2008 Iowa Acts, chapter 1109, section
1 5 11, subsection 3, paragraph b, is amended to read as
1 6 follows:
1 7 b. Make recommendations for creating and enhancing
1 8 comprehensive sustainable recycling programs. Such
1 9 recommendations may include methods of collecting and
1 10 paying for the recycling of residential, industrial,
1 11 and commercial waste, mechanisms for increasing the
1 12 recycling of construction and demolition waste, and
1 13 incentives for increasing the recycling of yard waste,
1 14 food or other organic waste, hazardous household
1 15 waste, household-generated medical sharps, and
1 16 electronic waste.>
1 17 #2. By renumbering as necessary.
1 18
1 19
1 20
1 21 D. OLSON of Boone
1 22 HF 826.501 83
1 23 tm/rj/24235
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House Amendment 1645

PAG LIN

1 1 Amend Senate File 413, as amended, passed, and
1 2 reprinted by the Senate, as follows:
1 3 #1. Page 5, by striking lines 5 through 29.
1 4 #2. By renumbering as necessary.
1 5
1 6
1 7
1 8 ANDERSON of Page
1 9 SF 413.703 83
1 10 ak/rj/24520
1 11
1 12
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House Amendment 1646

PAG LIN

1 1 Amend Senate File 413, as amended, passed, and
1 2 reprinted by the Senate, as follows:
1 3 #1. Page 5, by striking line 23 and inserting the
1 4 following:
1 5 <b. The person has more than fifty percent
1 6 controlling interest or ownership in>.
1 7 #2. Page 5, line 24, by striking the word
1 8 <knowingly> and inserting the following: <willfully>.
1 9 #3. Page 5, by inserting after line 25 the
1 10 following:
1 11 <c. The person engages in acts or omissions that
1 12 involve intentional misconduct or a knowing violation
1 13 of the law, or engages in a transaction from which the
1 14 person derives an improper personal benefit.>
1 15 #4. By renumbering as necessary.
1 16
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1 18
1 19 ANDERSON of Page
1 20 SF 413.201 83
1 21 ak/rj/24392
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House Amendment 1647

PAG LIN

1 1 Amend the amendment, H=1308, to Senate File 3, as
1 2 amended, passed, and reprinted by the Senate, as
1 3 follows:
1 4 #1. Page 1, by inserting after line 2 the
1 5 following:
1 6 <#____. Page 1, by inserting after line 11 the
1 7 following:
1 8 <Sec. _____. Section 462A.14, subsection 2,
1 9 paragraph e, Code 2009, is amended to read as follows:
1 10 e. A class "B" felony for any offense under this
1 11 section resulting in the death of persons other than
1 12 the defendant, if the court determines that the person
1 13 who committed the offense caused the death, ~~and shall~~
~~1 14 be imprisoned for a determinate sentence of not more~~
~~1 15 than twenty-five years, or committed to the custody of~~
~~1 16 the director of the department of corrections. A~~
~~1 17 person convicted of a felony offense may be committed~~
~~1 18 to the custody of the director of the department of~~
~~1 19 corrections, who shall assign the person to a facility~~
~~1 20 pursuant to section 904.513. However, a person~~
~~1 21 sentenced for a violation classified as a class "B"~~
~~1 22 felony pursuant to this paragraph shall not be~~
~~1 23 eligible for parole until the person has served a~~
~~1 24 minimum period of confinement of ten years. The court~~
~~1 25 shall also order that the person not operate a~~
~~1 26 motorboat or sailboat for six years beginning on the~~
~~1 27 date the person is placed on parole or work release,~~
~~1 28 or is otherwise released from a correctional facility.~~
1 29 The court shall also assign the defendant to substance
1 30 abuse evaluation and treatment pursuant to subsections
1 31 12 and 13, and a course for drinking drivers.>>
1 32 #2. Page 1, by inserting after line 22 the
1 33 following:
1 34 <Sec. _____. Section 707.6A, subsection 1,
1 35 unnumbered paragraph 1, Code 2009, is amended to read
1 36 as follows:
1 37 A person commits a class "B" felony when the person
1 38 unintentionally causes the death of another by
1 39 operating a motor vehicle while intoxicated, as
1 40 prohibited by section 321J.2. A person sentenced for
1 41 a violation of this subsection shall not be eligible
1 42 for parole until the person has served a minimum
1 43 period of confinement of ten years. Upon a plea or
1 44 verdict of guilty of a violation of this subsection,
1 45 the court shall do the following:
1 46 Sec. _____. Section 902.12, Code 2009, is amended by
1 47 adding the following new subsection:
1 48 NEW SUBSECTION. 7. Operating a motorboat or
1 49 sailboat while intoxicated in violation of section
1 50 462A.14, subsection 2, paragraph "e", if the person



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House Amendment 1647 continued

2 1 was also convicted under section 462A.7, subsection 5,
2 2 paragraph "d", or section 462A.34B, subsection 2 or 3,
2 3 based on the same facts or event that resulted in the
2 4 conviction under section 462A.14, subsection 2,
2 5 paragraph "e".

2 6 Sec. _____. Section 903A.5, subsection 1, Code 2009,
2 7 is amended to read as follows:

2 8 1. An inmate shall not be discharged from the
2 9 custody of the director of the Iowa department of
2 10 corrections until the inmate has served the full term
2 11 for which the inmate was sentenced, less earned time
2 12 and other credits earned and not forfeited, unless the
2 13 inmate is pardoned or otherwise legally released.

2 14 Earned time accrued and not forfeited shall apply to
2 15 reduce a mandatory minimum sentence being served
2 16 pursuant to section 124.406~~7~~ or 124.413, section
2 17 462A.14, subsection 2, paragraph "e", section 707.6A,
2 18 subsection 1, or section 902.7, 902.8, 902.8A, or

2 19 902.11. An inmate shall be deemed to be serving the
2 20 sentence from the day on which the inmate is received
2 21 into the institution. If an inmate was confined to a
2 22 county jail or other correctional or mental facility
2 23 at any time prior to sentencing, or after sentencing
2 24 but prior to the case having been decided on appeal,
2 25 because of failure to furnish bail or because of being
2 26 charged with a nonbailable offense, the inmate shall
2 27 be given credit for the days already served upon the
2 28 term of the sentence. However, if a person commits
2 29 any offense while confined in a county jail or other
2 30 correctional or mental health facility, the person
2 31 shall not be granted jail credit for that offense.
2 32 Unless the inmate was confined in a correctional
2 33 facility, the sheriff of the county in which the
2 34 inmate was confined shall certify to the clerk of the
2 35 district court from which the inmate was sentenced and
2 36 to the department of corrections' records
2 37 administrator at the Iowa medical and classification
2 38 center the number of days so served. The department
2 39 of corrections' records administrator, or the
2 40 administrator's designee, shall apply jail credit as
2 41 ordered by the court of proper jurisdiction or as
2 42 authorized by this section and section 907.3,
2 43 subsection 3.>>

2 44 #3. Page 1, by inserting before line 23 the
2 45 following:

2 46 #_____. Title page, line 1, by striking the words <a
2 47 .08 blood alcohol limit for>.

2 48 #_____. Title page, line 2, by inserting after the
2 49 word <offenses> the following: <and modifying
2 50 penalties>.>



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House Amendment 1647 continued

3 1 #4. By renumbering as necessary.
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3 5 ALONS of Sioux
3 6 SF 3.504 83
3 7 jm/nh/24405



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House Amendment 1648

PAG LIN

1 1 Amend the amendment, H=1308, to Senate File 3, as
1 2 amended, passed, and reprinted by the Senate, as
1 3 follows:
1 4 #1. Page 1, line 20, by inserting after the word
1 5 <more> the following: <and is moving at a speed great
1 6 enough to cause a wake>.
1 7 #2. By renumbering as necessary.
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1 11 HORBACH of Tama
1 12 SF 3.704 83
1 13 rh/nh/24539
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House Amendment 1649

PAG LIN

1 1 Amend the amendment, H=1629, to House File 756, as
1 2 follows:
1 3 #1. Page 1, line 16, by inserting after the word
1 4 <organizations,> the following: <and>.
1 5 #2. Page 1, by striking lines 17 and 18 and
1 6 inserting the following: <landowners and other
1 7 stakeholders along the Mississippi river.>
1 8 #3. Page 1, line 35, by striking the word <Five>
1 9 and inserting the following: <Six>.
1 10 #4. Page 1, line 35, by inserting after the word
1 11 <governor,> the following: <each of whom shall reside
1 12 in one of the ten Iowa counties bordering the
1 13 Mississippi river,>.
1 14 #5. Page 1, by inserting after line 45 the
1 15 following:
1 16 <() One person representing agricultural
1 17 interests who is actively engaged in farming.>
1 18 #6. Page 3, by inserting after line 6 the
1 19 following:
1 20 < . The Mississippi river partnership council,
1 21 including any of its committees, is a governmental
1 22 body for purposes of chapter 21 and a government body
1 23 for purposes of chapter 22.>
1 24 #7. Page 3, by striking lines 9 through 13 and
1 25 inserting the following:
1 26 < . The Mississippi river partnership council
1 27 may collaborate with the water resources coordinating
1 28 council established pursuant to section 466B.3.>
1 29 #8. Page 3, line 14, by striking the figure <2.>
1 30 and inserting the following: <2. a.>
1 31 #9. Page 3, line 16, by striking the word <a.> and
1 32 inserting the following: <(1)>.
1 33 #10. Page 3, line 18, by striking the words <and
1 34 its watershed>.
1 35 #11. Page 3, line 19, by striking the word <b.>
1 36 and inserting the following: <(2)>.
1 37 #12. Page 3, by striking lines 22 through 27 and
1 38 inserting the following: <in counties along the
1 39 Mississippi river; enhance awareness about the river
1 40 and its uses; encourage the protection, restoration,
1 41 and expansion of critical habitats; and promote the
1 42 adoption of soil conservation and water quality best
1 43 management practices.>
1 44 #13. Page 3, line 28, by striking the word <c.>
1 45 and inserting the following: <(3)>.
1 46 #14. Page 3, line 34, by striking the word <d.>
1 47 and inserting the following: <(4)>.
1 48 #15. Page 3, lines 40 and 41, by striking the
1 49 words <, its watershed,>.
1 50 #16. Page 3, line 43, by striking the word <e.>



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2 1 and inserting the following: <(5)>.
2 2 #17. Page 3, line 43, by striking the word
2 3 <local>.
2 4 #18. Page 3, line 45, by inserting after the word
2 5 <plans> the following: <for their communities>.
2 6 #19. Page 4, line 1, by striking the words <and
2 7 its tributaries>.
2 8 #20. Page 4, by striking lines 2 through 4 and
2 9 inserting the following: <preservation of farmland,
2 10 prairies, and forests.>
2 11 #21. Page 4, line 5, by striking the word <f.> and
2 12 inserting the following: <(6)>.
2 13 #22. Page 4, line 11, by striking the word <g.>
2 14 and inserting the following: <(7)>.
2 15 #23. Page 4, line 14, by striking the word <h.>
2 16 and inserting the following: <(8)>.
2 17 #24. Page 4, lines 14 and 15, by striking the
2 18 words <Performing other duties and responsibilities in
2 19 the> and inserting the following: <Functioning as a
2 20 forum for discussion and providing advice or
2 21 recommendations on matters of>.
2 22 #25. Page 4, by inserting after line 16 the
2 23 following:
2 24 <b. The Mississippi river partnership council
2 25 shall only administer its duties as provided in
2 26 paragraph "a" within the ten Iowa counties bordering
2 27 the Mississippi river.>
2 28 #26. By renumbering as necessary.
2 29
2 30
2 31
2 32 ISENHART of Dubuque
2 33
2 34
2 35
2 36 REICHERT of Muscatine
2 37 HF 756.705 83
2 38 da/nh/23831



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House Amendment 1650

PAG LIN

1 1 Amend House File 795 as follows:
1 2 #1. By striking everything after the enacting
1 3 clause and inserting in lieu thereof the following:
1 4 <Section 1. Section 85.27, subsection 4, Code
1 5 2009, is amended by striking the subsection and
1 6 inserting in lieu thereof the following:
1 7 4. a. For purposes of this section, the employer
1 8 is obligated to furnish reasonable services and
1 9 supplies to treat an injured employee, and has the
1 10 right to choose the initial provider of medical care.
1 11 When an injury occurs, the employer shall promptly
1 12 provide medical care for the injury and designate a
1 13 licensed physician to treat the injury and any
1 14 condition that the physician believes is causally
1 15 related to the injury. For the purposes of this
1 16 section, "physician" means the same as defined in
1 17 section 135.1.
1 18 (1) The designated treating physician shall be
1 19 authorized by the employer to treat the injury at the
1 20 employer's expense, in any manner deemed appropriate
1 21 by the physician, without a requirement of approval at
1 22 any time by a representative or agent of the employer
1 23 or the employer's insurer for diagnostic testing or
1 24 treatment modalities ordered by the designated
1 25 treating physician.
1 26 (2) The designated treating physician shall also
1 27 be authorized by the employer to refer the injured
1 28 employee to other physicians, therapists, or medical
1 29 providers of specialized services at the employer's
1 30 expense without a requirement of approval at any time
1 31 by a representative or agent of the employer or the
1 32 employer's insurer.
1 33 (3) The physicians, therapists, or medical
1 34 providers of specialized services to whom the injured
1 35 employee is referred by the designated treating
1 36 physician shall be authorized to treat the injury at
1 37 the employer's expense, in any manner deemed
1 38 appropriate by the physician, therapist, or medical
1 39 provider of specialized services without a requirement
1 40 of approval at any time by a representative or agent
1 41 of the employer or the employer's insurer for
1 42 diagnostic testing or treatment modalities ordered by
1 43 the physician, therapist, or medical provider.
1 44 b. (1) If at any time prior to an evaluation of
1 45 permanent disability by the treating physician
1 46 designated by the employer or by a physician to whom
1 47 the injured employee has been referred by the
1 48 designated treating physician, the employee has reason
1 49 to be dissatisfied with the treatment options or
1 50 medical opinions of such physicians, the employee may



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2 1 request that the employer pay the reasonable costs of
2 2 an examination of the employee by a physician of the
2 3 employee's choice for purposes of identifying further
2 4 or other treatment options or medical opinions. The
2 5 employer shall also reimburse the employee for the
2 6 reasonably necessary transportation expenses incurred
2 7 by the employee in traveling to and from the place of
2 8 examination.

2 9 (2) If, after examination of the employee, the
2 10 physician chosen by the employee recommends further or
2 11 other treatment for the employee's injury or provides
2 12 other medical opinions, the employee may discontinue
2 13 treatment by the treating physician designated by the
2 14 employer or by a physician, therapist, or medical
2 15 provider of specialized services to whom the employee
2 16 has been referred by the employer's designated
2 17 treating physician, and may commence treatment of the
2 18 injury with the physician chosen by the employee.

2 19 c. If the employer or employee has reason to be
2 20 dissatisfied with any medical care or treatment
2 21 ordered for or provided to the injured employee
2 22 pursuant to this subsection, the employer and the
2 23 employee may mutually agree upon alternate care.

2 24 (1) If the employer and employee cannot agree on
2 25 alternate care, either the employer or the employee
2 26 shall notify an insurance claims specialist with the
2 27 division of workers' compensation who shall, within
2 28 five working days of receiving such notification,
2 29 schedule a conference between the employer and
2 30 employee by any reasonable manner available to review
2 31 the basis for dissatisfaction and at such conference
2 32 provide an advisory opinion to resolve the medical
2 33 care dispute.

2 34 (2) If, following the conference with the
2 35 insurance claims specialist as provided in
2 36 subparagraph (1), the employer and employee cannot
2 37 agree on alternate care, the workers' compensation
2 38 commissioner may, upon application and reasonable
2 39 proof of the necessity therefor, allow and order
2 40 alternate care. The commissioner shall not be bound
2 41 by the advisory opinion of the insurance claims
2 42 specialist. Upon application by either the employer
2 43 or employee, the commissioner shall conduct a hearing
2 44 by any reasonable manner available to effectuate a
2 45 prompt resolution of the alternate care dispute. The
2 46 commissioner shall issue a decision within ten working
2 47 days of receipt of an application for alternate care.

2 48 d. The employer or its insurer is liable for the
2 49 costs of all medical care provided to the employee by
2 50 all physicians, therapists, or medical providers



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3 1 designated by the employer, employee, or commissioner
3 2 pursuant to this section and shall hold the employee
3 3 harmless for the cost of the medical care provided and
3 4 reasonably necessary transportation expenses incurred.
3 5 e. (1) The employer has the right to request, as
3 6 often as is reasonable, that an injured employee
3 7 submit, at a reasonable time and place, to an
3 8 examination by a physician chosen by the employer and
3 9 authorized to practice under the laws of this state or
3 10 another state, for any purpose relevant to the
3 11 employer's duties to provide benefits to the employee
3 12 pursuant to this chapter or chapters 85A, 85B, and 86.
3 13 If the employer requests in writing that the employee
3 14 submit to such an examination and offers to advance or
3 15 reimburse the employee's reasonably necessary
3 16 transportation expenses incurred in traveling to and
3 17 from the place of the examination, the employee shall
3 18 submit to the examination.
3 19 (2) Each time that an employee is requested to and
3 20 submits to an examination requested by the employer as
3 21 provided in subparagraph (1), the employee has the
3 22 right to be examined by a physician chosen by the
3 23 employee and authorized to practice under the laws of
3 24 this state or another state, for any purpose relevant
3 25 to the employer's duties to provide benefits to the
3 26 employee as provided in subparagraph (1).
3 27 (3) Each time that an employer obtains an
3 28 evaluation of an employee's permanent disability by a
3 29 physician chosen by the employer, if the injured
3 30 employee believes that the evaluation of the extent of
3 31 the employee's permanent disability is too low, the
3 32 employee may obtain a subsequent examination and
3 33 evaluation of the employee's permanent disability by a
3 34 physician of the employee's choice. The physician
3 35 chosen by the employee has the right to confer with
3 36 and obtain sufficient medical history of the employee
3 37 from the physician who examined the employee on behalf
3 38 of the employer to make a proper evaluation of the
3 39 employee's permanent disability.
3 40 (4) The employer shall promptly pay the costs of
3 41 any examination obtained pursuant to this paragraph
3 42 "e", or if necessary to obtain the examination,
3 43 advance the costs of the examination, and pay the
3 44 employee's reasonably necessary transportation
3 45 expenses incurred in traveling to and from the place
3 46 of any examination, and shall hold the employee
3 47 harmless for the cost of all examinations and medical
3 48 care provided pursuant to this paragraph "e" as well
3 49 as the employee's reasonably necessary transportation
3 50 expenses.



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4 1 Sec. 2. Section 85.39, Code 2009, is repealed.
4 2 Sec. 3. EFFECTIVE AND APPLICABILITY DATE. This
4 3 Act takes effect January 1, 2010, and applies to
4 4 injuries occurring on or after that date.>
4 5 #2. Title page, by striking line 1, and inserting
4 6 the following: <An Act relating to furnishing
4 7 reasonable medical services and supplies to treat an
4 8 injured>.
4 9
4 10
4 11
4 12 R. OLSON of Polk
4 13 HF 795.201 83
4 14 av/rj/23335



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House Amendment 1651

PAG LIN

1 1 Amend Senate File 304, as passed by the Senate, as
 1 2 follows:
 1 3 #1. By striking everything after the enacting
 1 4 clause and inserting the following:
 1 5 <Section 1. Section 15.104, subsection 9,
 1 6 paragraph k, Code 2009, is amended to read as follows:
 1 7 k. ~~PILOT PROJECT PARTICIPATING CITIES ==~~
 1 8 WITHHOLDING AGREEMENT, TAX CREDITS. Data on the ~~pilot~~
~~1 9 project cities participating in the program~~
 1 10 established pursuant to section 403.19A, including all
 1 11 of the following:
 1 12 (1) The amount each project received from each
 1 13 state economic development and tax credit program.
 1 14 (2) The number of new jobs created as a result of
 1 15 the ~~pilot~~ program.
 1 16 (3) The average wage of the jobs created as a
 1 17 result of the ~~pilot~~ project.
 1 18 (4) An evaluation of the investment made by the
 1 19 state of Iowa in the ~~pilot project cities~~ program,
 1 20 including but not limited to the items described in
 1 21 subparagraphs (1) through (3).
 1 22 Sec. 2. Section 403.19A, Code 2009, is amended to
 1 23 read as follows:
 1 24 403.19A WITHHOLDING AGREEMENT == TAX CREDIT.
 1 25 1. For purposes of this section, unless the
 1 26 context otherwise requires:
 1 27 a. "Business" means any professional services, or
 1 28 industrial enterprise, including medical treatment
 1 29 facilities, manufacturing facilities, corporate
 1 30 headquarters, and research facilities. "Business"
 1 31 does not include a retail operation or a business
 1 32 which closes or substantially reduces its operation in
 1 33 one area of this state and relocates substantially the
 1 34 same operation to another area of this state.
 1 35 b. "Employee" means the individual employed in a
 1 36 targeted job that is subject to a withholding
 1 37 agreement.
 1 38 c. "Employer" means a business creating targeted
 1 39 jobs in an urban renewal area of a ~~pilot project~~
 1 40 participating city pursuant to a withholding
 1 41 agreement.
 1 42 d. ~~"Pilot project~~ "Participating city" means a
 1 43 city that has applied and been approved ~~as a pilot~~
~~1 44 project city~~ pursuant to subsection 2.
 1 45 e. "Qualifying investment" means a capital
 1 46 investment in real property including the purchase
 1 47 price of land and existing buildings, site
 1 48 preparation, building construction, and long-term
 1 49 lease costs. "Qualifying investment" also means a
 1 50 capital investment in depreciable assets.



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2 1 f. "Targeted job" means a job in a business which
2 2 is or will be located in an urban renewal area of a
2 3 ~~pilot project~~ participating city that pays a wage at
2 4 least equal to the countywide average wage. "Targeted
2 5 job" includes new jobs from Iowa business expansions
2 6 or retentions within the city limits of the ~~pilot~~
~~2 7 project~~ participating city and those jobs resulting
2 8 from established out-of-state businesses, as defined
2 9 by the department of economic development, moving to
2 10 or expanding in Iowa.

2 11 g. "Withholding agreement" means the agreement
2 12 between a ~~pilot project~~ participating city and an
2 13 employer concerning the targeted jobs withholding
2 14 credit authorized in subsection 3.

2 15 2. ~~a.~~ An eligible city may apply to the
2 16 department of economic development to be designated as
2 17 a ~~pilot project~~ participating city. An eligible city
2 18 is a city that contains three or more census tracts.
2 19 ~~and is located in a county meeting one of the~~
~~2 20 following requirements:~~

2 21 (1) ~~A county that borders Nebraska.~~
2 22 (2) ~~A county that borders South Dakota.~~
2 23 (3) ~~A county that borders a state other than~~
~~2 24 Nebraska or South Dakota.~~

2 25 ~~b. (1) The department of economic development~~
~~2 26 shall approve four eligible cities as pilot project~~
~~2 27 cities, one pursuant to paragraph "a", subparagraph~~
~~2 28 (1), one pursuant to paragraph "a", subparagraph (2),~~
~~2 29 and two pursuant to paragraph "a", subparagraph (3).~~
~~2 30 If two eligible cities are approved which are located~~
~~2 31 in the same county and the county has a population of~~
~~2 32 less than forty-five thousand, the two approved~~
~~2 33 eligible cities shall be considered one pilot project~~
~~2 34 city. If more than two cities meeting the~~
~~2 35 requirements of paragraph "a", subparagraph (3), apply~~
~~2 36 to be designated as a pilot project city, the~~
~~2 37 department of economic development shall determine~~
~~2 38 which two cities hold the most potential to create new~~
~~2 39 jobs or generate the greatest capital within their~~
~~2 40 areas. Applications from eligible cities filed on or~~
~~2 41 after October 1, 2006, shall not be considered.~~

2 42 (2) ~~If a pilot project city does not enter into a~~
~~2 43 withholding agreement within one year of its approval~~
~~2 44 as a pilot project city, the city shall lose its~~
~~2 45 status as a pilot project city. If two pilot project~~
~~2 46 cities are located in the same county, the loss of~~
~~2 47 status by one pilot project city shall not cause the~~
~~2 48 second pilot project city in the county to lose its~~
~~2 49 status as a pilot project city. Upon such occurrence,~~
~~2 50 the department of economic development shall take~~



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~~3 1 applications from other eligible cities to replace
3 2 that city. Another city shall be designated within
3 3 six months.~~

3 4 3. a. A ~~pilot project~~ participating city may
3 5 provide by ordinance for the deposit into a designated
3 6 account in the special fund described in section
3 7 403.19, subsection 2, of the targeted jobs withholding
3 8 credit described in this section. The targeted jobs
3 9 withholding credit shall be based upon the wages paid
3 10 to employees pursuant to a withholding agreement.

3 11 b. An amount equal to three percent of the gross
3 12 wages paid by an employer to each employee under a
3 13 withholding agreement shall be credited from the
3 14 payment made by the employer pursuant to section
3 15 422.16. If the amount of the withholding by the
3 16 employer is less than three percent of the gross wages
3 17 paid to the employees covered by the withholding
3 18 agreement, the employer shall receive a credit against
3 19 other withholding taxes due by the employer or may
3 20 carry the credit forward for up to ten years or until
3 21 depleted, whichever is the earlier. The employer
3 22 shall remit the amount of the credit quarterly, in the
3 23 same manner as withholding payments are reported to
3 24 the department of revenue, to the ~~pilot project~~
3 25 participating city to be allocated to and when
3 26 collected paid into a designated account in the
3 27 special fund for the urban renewal area in which the
3 28 targeted jobs are located. All amounts so deposited
3 29 shall be used or pledged by the ~~pilot project~~
3 30 participating city for an urban renewal project
3 31 related to the employer pursuant to the withholding
3 32 agreement.

3 33 c. (1) The ~~pilot project~~ participating city shall
3 34 enter into a withholding agreement with each employer
3 35 concerning the targeted jobs withholding credit.
3 36 However, an agreement shall not be entered into by a
3 37 ~~pilot project~~ participating city with a business
3 38 currently located in this state unless the business
3 39 either creates ten new jobs or makes a qualifying
3 40 investment of at least five hundred thousand dollars
3 41 within the urban renewal area. The withholding
3 42 agreement may have a term of up to ten years. An
3 43 employer shall not be obligated to enter into a
3 44 withholding agreement.

3 45 (2) The ~~pilot project~~ participating city shall not
3 46 enter into a withholding agreement after June 30,
3 47 2010.

3 48 d. A withholding agreement shall be disclosed to
3 49 the public and shall contain but is not limited to all
3 50 of the following:



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4 1 (1) A copy of the adopted development agreement
4 2 plan of the employer.
4 3 (2) A list of any other amounts of incentives or
4 4 assistance the employer may be receiving from other
4 5 economic development programs, including grants,
4 6 loans, forgivable loans, and tax credits.
4 7 (3) The approval of local participating
4 8 authorities.
4 9 (4) The amount of local incentives or assistance
4 10 received for each project of the employer.
4 11 e. (1) The employer shall certify to the
4 12 department of revenue that the targeted jobs
4 13 withholding credit is in accordance with the
4 14 withholding agreement and shall provide other
4 15 information the department may require. Notice of any
4 16 withholding agreement shall be provided promptly to
4 17 the department of revenue following execution of the
4 18 agreement by the ~~pilot project~~ participating city and
4 19 the employer.
4 20 (2) Following termination of the withholding
4 21 agreement, the employer credits shall cease and any
4 22 money received by the ~~pilot project~~ participating city
4 23 after termination shall be remitted to the treasurer
4 24 of state to be deposited into the general fund of the
4 25 state. Notice shall be provided promptly to the
4 26 department of revenue following termination.
4 27 f. If the employer ceases to meet the requirements
4 28 of the withholding agreement, the agreement shall be
4 29 terminated and any withholding tax credits for the
4 30 benefit of the employer shall cease. However, in
4 31 regard to the number of new jobs that are to be
4 32 created, if the employer has met the number of new
4 33 jobs to be created pursuant to the withholding
4 34 agreement and subsequently the number of new jobs
4 35 falls below the required level, the employer shall not
4 36 be considered as not meeting the new job requirement
4 37 until eighteen months after the date of the decrease
4 38 in the number of new jobs created.
4 39 g. A ~~pilot project~~ participating city shall
4 40 certify to the department of revenue the amount of the
4 41 targeted jobs withholding credit an employer has
4 42 remitted to the city and shall provide other
4 43 information the department may require.
4 44 h. An employee whose wages are subject to a
4 45 withholding agreement shall receive full credit for
4 46 the amount withheld as provided in section 422.16.
4 47 i. An employer may participate in a new jobs
4 48 credit from withholding under section 260E.5, or a
4 49 supplemental new jobs credit from withholding under
4 50 section 15E.197 or under section 15.331, Code 2005, at



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5 1 the same time as the employer is participating in the
5 2 withholding credit under this section.
5 3 Notwithstanding any other provision in this section,
5 4 the new jobs credit from withholding under section
5 5 260E.5, and the supplemental new jobs credit from
5 6 withholding under section 15E.197 or under section
5 7 15.331, Code 2005, shall be collected and disbursed
5 8 prior to the withholding credit under this section.

~~5 9 j. A pilot project city that enters into a
5 10 withholding agreement shall arrange for a match of at
5 11 least one dollar for each withholding credit dollar
5 12 received by the city. The local match may come from
5 13 the pilot project city, a private donor, or the
5 14 business, or a combination of all three. The local
5 15 match may be in cash or in kind to be used for the
5 16 business project.~~

5 17 j. (1) A participating city entering into a
5 18 withholding agreement shall arrange for matching local
5 19 financial support for the project. The local match
5 20 required under this paragraph "j" shall be in an
5 21 amount equal to one dollar for every dollar of
5 22 withholding credit received by the participating city.

5 23 (2) For purposes of this paragraph "j", "local
5 24 financial support" means cash or in-kind contributions
5 25 to the project from a private donor, a business, or
5 26 the participating city.

5 27 (3) If the project, when completed, will increase
5 28 the amount of property tax revenues collected by the
5 29 participating city by an amount equal to at least ten
5 30 percent of the amount of withholding credit dollars
5 31 received by the participating city, then the
5 32 participating city shall itself contribute at least
5 33 ten percent of the local match amount computed under
5 34 subparagraph (1).

5 35 (4) If the project, when completed, will not
5 36 increase the amount of property tax revenues collected
5 37 by an amount at least equal to ten percent of the
5 38 amount of withholding credit dollars received by the
5 39 participating city, then the participating city shall
5 40 not be required to make a contribution to the local
5 41 match.

5 42 (5) A participating city's contribution, if any,
5 43 to the local match may include the dollar value of any
5 44 tax abatement provided by the city to the business for
5 45 new construction.

5 46 k. At the time of submitting its budget to the
5 47 department of management, the ~~pilot project~~
5 48 participating city shall submit to the department of
5 49 management and the department of economic development
5 50 a description of the activities involving the use of



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6 1 withholding agreements. The description shall include
6 2 but is not limited to the following:

6 3 (1) The total number of targeted jobs and a
6 4 breakdown as to those that are Iowa business
6 5 expansions or retentions within the city limits of the
6 6 ~~pilot project~~ participating city and those that are
6 7 jobs resulting from established out-of-state
6 8 businesses moving to or expanding in Iowa.

6 9 (2) The number of withholding agreements and the
6 10 amount of withholding credits involved.

6 11 (3) The types of businesses that entered into
6 12 agreements, and the types of businesses that declined
6 13 the city's proposal to enter into an agreement.

6 14 1. The department of economic development in
6 15 consultation with the department of revenue shall
6 16 coordinate the ~~pilot project~~ program with the ~~pilot~~
~~project~~ participating cities under this section. The
6 18 department of economic development ~~is authorized to~~
6 19 shall adopt, amend, and repeal rules to implement the
6 20 ~~pilot project~~ program under this section.

6 21 Sec. 3. EFFECTIVE AND APPLICABILITY DATES.

6 22 1. This Act, being deemed of immediate importance,
6 23 takes effect upon enactment.

6 24 2. This Act applies to withholding agreements
6 25 entered into on or after the effective date of the
6 26 Act.>

6 27 #2. Title page, line 3, by inserting after the
6 28 word <program> the following: <and including
6 29 effective date and applicability date provisions>.

6 30 #3. By renumbering as necessary.

6 31

6 32

6 33

6 34 D. OLSON of Boone

6 35 SF 304.502 83

6 36 tw/mg/24383



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House Resolution 49 - Introduced

PAG LIN

H.R. _____ S.R. _____

1 1 HOUSE RESOLUTION NO.
1 2 BY WESSEL=KROESCHELL
1 3 A Resolution honoring the Iowa State University
1 4 Cyclones Women's Basketball team.
1 5 WHEREAS, by any measure the 2008=2009 Iowa State
1 6 University Women's Basketball season has been a
1 7 remarkable success as the team finished number three
1 8 in the nation in attendance, winning 27 games,
1 9 finishing third in the Big 12 Conference, and making
1 10 the Elite Eight of the 2009 National Collegiate
1 11 Athletic Association (NCAA) Championship; and
1 12 WHEREAS, following a 23=7 regular season, where the
1 13 Cyclones played nine games against nationally ranked
1 14 opponents, the team, led by seniors Heather Ezell,
1 15 Amanda Nisleit, Nicky Wieben, Toccara Ross, and
1 16 Jocelyn Anderson earned a fourth seed in the NCAA
1 17 Championship's Berkeley, California Region; and
1 18 WHEREAS, in the tournament the Cyclones beat
1 19 Michigan State University 69=68 to advance to the NCAA
1 20 Championship's Elite Eight for the second time in
1 21 school history, with that remarkable victory including
1 22 one of the greatest rallies in Iowa State history as
1 23 the Cyclones trailed by seven points with less than a
1 24 minute and a half remaining in the game; and
1 25 WHEREAS, the Cyclones NCAA Championship run
1 26 included wins over East Tennessee State University and
1 27 Ball State University; and
1 28 WHEREAS, following the tournament, senior Amanda
1 29 Nisleit was named to the NCAA All=Region team; and
1 30 WHEREAS, for 14 seasons the Cyclones have been led



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House Resolution 49 - Introduced continued

2 1 by Iowa-born coach Bill Fennelly, the dean of Big 12
2 2 Conference coaches who is a three-time finalist for
2 3 the Naismith Women's College Coach of the Year Award
2 4 (2001, 2002, 2005), who has been voted Women's
2 5 Basketball Coaches Association District 5 Coach of the
2 6 Year twice (1999, 2005), and finished second in the
2 7 Associated Press' Women's Coach of the Year balloting
2 8 in 1998; and
2 9 WHEREAS, Coach Fennelly is ably assisted by
2 10 associate head coach Jack Easley, assistant coach Jodi
2 11 Steyer, assistant coach Latoja Schaben, director of
2 12 basketball operations Josh Carper, and graduate
2 13 assistant Molly Parrott; and
2 14 WHEREAS, under Coach Fennelly the women's
2 15 basketball program has blossomed, attendance has grown
2 16 from an average of less than 1,000 per game to almost
2 17 10,000 per game currently, and the Cyclones have
2 18 posted their ninth 20-win season and 10th NCAA
2 19 appearance; NOW THEREFORE,
2 20 BE IT RESOLVED BY THE HOUSE OF REPRESENTATIVES,
2 21 That the House of Representatives congratulates Coach
2 22 Fennelly, his staff, and the members of the Iowa State
2 23 University Cyclones Women's Basketball team for their
2 24 outstanding performance in the 2008=2009 season, and
2 25 thanks them all for the honor they have brought both
2 26 to their university and to the State of Iowa.
2 27 LSB 2717HH 83
2 28 jr/rj/5



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Senate Amendment 3296

PAG LIN

1 1 Amend Senate File 389, as amended, passed, and
1 2 reprinted by the Senate, as follows:
1 3 #1. By striking everything after the enacting
1 4 clause and inserting the following:
1 5 <DIVISION I
1 6 LEGISLATIVE HEALTH CARE COVERAGE COMMISSION
1 7 Section 1. LEGISLATIVE HEALTH CARE COVERAGE
1 8 COMMISSION.
1 9 1. A legislative health care coverage commission
1 10 is created under the authority of the legislative
1 11 council.
1 12 a. The commission shall include the following
1 13 persons who are ex officio, nonvoting members of the
1 14 commission:
1 15 (1) The commissioner of insurance, or a designee.
1 16 (2) The director of human services, or a designee.
1 17 (3) The director of public health, or a designee.
1 18 (4) Four members of the general assembly, one
1 19 appointed by the speaker of the house of
1 20 representatives, one appointed by the minority leader
1 21 of the house of representatives, one appointed by the
1 22 majority leader of the senate, and one appointed by
1 23 the minority leader of the senate.
1 24 b. The commission shall include the following
1 25 persons who are voting members of the commission and
1 26 who are appointed by the legislative council:
1 27 (1) A person who represents the association of
1 28 business and industry.
1 29 (2) A person who represents the federation of Iowa
1 30 insurers.
1 31 (3) A person who represents the Iowa federation of
1 32 labor.
1 33 (4) One health care provider, designated by the
1 34 executive committee of the medical assistance advisory
1 35 council.
1 36 (5) A person who represents the Iowa association
1 37 of health underwriters.
1 38 (6) Three consumers.
1 39 (7) A person who represents an organization of
1 40 small businesses.
1 41 2. The legislative council may employ or contract
1 42 with a coordinator to assist the commission in
1 43 carrying out its duties. The coordinator shall gather
1 44 and coordinate information for the use of the
1 45 commission in its deliberations concerning health
1 46 reform initiatives and activities related to the
1 47 medical home system advisory council, the electronic
1 48 health information advisory council and executive
1 49 committee, the prevention and chronic care management
1 50 advisory council, the direct care worker task force,



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2 1 the health and long-term care access technical
2 2 advisory committee, the clinicians advisory panel, the
2 3 long-term living initiatives of the department of
2 4 elder affairs, medical assistance and hawk=i program
2 5 expansions and initiatives, prevention and wellness
2 6 initiatives including but not limited to those
2 7 administered through the Iowa healthy communities
2 8 initiative pursuant to section 135.27 and through the
2 9 governor's council on physical fitness and nutrition,
2 10 health care transparency activities, and other health
2 11 care reform-related advisory bodies and activities
2 12 that provide direction and promote collaborative
2 13 efforts among health care providers involved in the
2 14 initiatives and activities. The legislative services
2 15 agency shall provide administrative support to the
2 16 commission.

2 17 3. The legislative council shall appoint one
2 18 voting member as chairperson and one as vice
2 19 chairperson. Legislative members of the commission
2 20 are eligible for per diem and reimbursement of actual
2 21 expenses as provided in section 2.10. The consumers
2 22 appointed to the commission are entitled to receive a
2 23 per diem as specified in section 7E.6 for each day
2 24 spent in performance of duties as a member, and shall
2 25 be reimbursed for all actual and necessary expenses
2 26 incurred in the performance of duties as a member of
2 27 the commission.

2 28 4. The commission shall develop an Iowa health
2 29 care reform strategic plan which includes but is not
2 30 limited to a review and analysis of, and
2 31 recommendations and prioritization of recommendations
2 32 for, the following:

2 33 a. Options for the coordination of a children's
2 34 health care network in the state that provides health
2 35 care coverage to all children without such coverage;
2 36 utilizes, modifies, and enhances existing public
2 37 programs; maximizes the ability of the state to obtain
2 38 federal funding and reimbursement for such programs;
2 39 and provides access to private, affordable health care
2 40 coverage for children who are not otherwise eligible
2 41 for health care coverage through public programs.

2 42 b. Options for children, adults, and families to
2 43 transition seamlessly among public and private health
2 44 care coverage options.

2 45 c. Options for subsidized and unsubsidized health
2 46 care coverage programs which offer public and private,
2 47 adequate and affordable health care coverage including
2 48 but not limited to options to purchase coverage with
2 49 varying levels of benefits including basic or
2 50 catastrophic benefits, an intermediate level of



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3 1 benefits, and comprehensive benefits coverage. The
3 2 commission shall also consider options and make
3 3 recommendations for providing an array of benefits
3 4 that may include physical, mental, and dental health
3 5 care coverage. Affordable health care coverage
3 6 options for purchase by adults and families shall be
3 7 developed with the goal of including options for which
3 8 the contribution requirement for all cost-sharing
3 9 expenses is no more than six and one-half percent of
3 10 family income.

3 11 d. Options to offer a program to provide coverage
3 12 under a state health or medical group insurance plan
3 13 to nonstate public employees, including employees of
3 14 counties, cities, schools, area education agencies,
3 15 and community colleges, and employees of nonprofit
3 16 employers and small employers and to pool such
3 17 employees with the state plan.

3 18 e. The ramifications of requiring each employer in
3 19 the state with more than ten employees to adopt and
3 20 maintain a cafeteria plan that satisfies section 125
3 21 of the Internal Revenue Code of 1986.

3 22 f. Options for development of a long-term strategy
3 23 to provide access to affordable health care coverage
3 24 to the uninsured in Iowa, particularly adults, and
3 25 development of a structure to implement that strategy
3 26 including consideration of whether to utilize an
3 27 existing government agency or a newly created entity.

3 28 5. As part of developing the strategic plan, the
3 29 commission shall collaborate with health insurance
3 30 experts to do including but not limited to the
3 31 following:

3 32 a. Design solutions to issues relating to
3 33 guaranteed issuance of insurance, preexisting
3 34 condition exclusions, portability, and allowable
3 35 pooling and rating classifications.

3 36 b. Formulate principles that ensure fair and
3 37 appropriate practices relating to issues involving
3 38 individual health care policies such as rescission and
3 39 preexisting condition clauses, and that provide for a
3 40 binding third-party review process to resolve disputes
3 41 related to such issues.

3 42 c. Design affordable, portable health care
3 43 coverage options for low-income children, adults, and
3 44 families.

3 45 d. Design a proposed premium schedule for health
3 46 care coverage options which includes the development
3 47 of rating factors that are consistent with market
3 48 conditions.

3 49 e. Design protocols to limit the transfer from
3 50 employer-sponsored or other private health care



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4 1 coverage to state-developed health care coverage
4 2 plans.
4 3 6. The commission may request from any state
4 4 agency or official information and assistance as
4 5 needed to perform its duties pursuant to this section.
4 6 A state agency or official shall furnish the
4 7 information or assistance requested within the
4 8 authority and resources of the state agency or
4 9 official. This subsection does not allow the
4 10 examination or copying of any public record required
4 11 by law to be kept confidential.
4 12 7. The commission shall provide progress reports
4 13 to the legislative council every quarter summarizing
4 14 the commission's activities.
4 15 8. The commission shall provide a progress report
4 16 to the general assembly by January 1, 2010,
4 17 summarizing the commission's activities thus far, that
4 18 includes but is not limited to recommendations and
4 19 prioritization of recommendations for subsidized and
4 20 unsubsidized health care coverage programs which offer
4 21 public and private and adequate and affordable health
4 22 care coverage for adults. The commission shall
4 23 collaborate with health insurance experts to ensure
4 24 that health care coverage for adults that is
4 25 consistent with the commission's recommendations and
4 26 priorities is available for purchase by the public by
4 27 July 1, 2010.
4 28 9. The commission shall provide a report to the
4 29 general assembly by January 1, 2011, summarizing the
4 30 commission's activities since the last report.
4 31 10. The commission shall conclude its
4 32 deliberations by July 1, 2011, and shall submit a
4 33 final report to the general assembly by October 1,
4 34 2011, summarizing the commission's activities
4 35 particularly pertaining to the availability of health
4 36 care coverage programs for adults, analyzing issues
4 37 studied, and setting forth options, recommendations,
4 38 and priorities for an Iowa health care reform
4 39 strategic plan that will ensure that all Iowans have
4 40 access to health care coverage which meets minimum
4 41 standards of quality and affordability. The
4 42 commission may include any other information the
4 43 commission deems relevant and necessary.
4 44 11. This section is repealed on December 31, 2011.
4 45 COORDINATING AMENDMENTS
4 46 Sec. 2. Section 514E.1, subsections 15 and 22,
4 47 Code 2009, are amended by striking the subsections.
4 48 Sec. 3. Section 514E.2, subsection 3, unnumbered
4 49 paragraph 1, Code 2009, is amended to read as follows:
4 50 The association shall submit to the commissioner a



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5 1 plan of operation for the association and any
5 2 amendments necessary or suitable to assure the fair,
5 3 reasonable, and equitable administration of the
5 4 association. ~~The plan of operation shall include~~
~~5 5 provisions for the development of a comprehensive~~
~~5 6 health care coverage plan as provided in section~~
~~5 7 514E.5. In developing the comprehensive plan the~~
~~5 8 association shall give deference to the~~
~~5 9 recommendations made by the advisory council as~~
~~5 10 provided in section 514E.6, subsection 1. The~~
~~5 11 association shall approve or disapprove but shall not~~
~~5 12 modify recommendations made by the advisory council.~~
~~5 13 Recommendations that are approved shall be included in~~
~~5 14 the plan of operation submitted to the commissioner.~~
~~5 15 Recommendations that are disapproved shall be~~
~~5 16 submitted to the commissioner with reasons for the~~
~~5 17 disapproval. The plan of operation becomes effective~~
5 18 upon approval in writing by the commissioner prior to
5 19 the date on which the coverage under this chapter must
5 20 be made available. After notice and hearing, the
5 21 commissioner shall approve the plan of operation if
5 22 the plan is determined to be suitable to assure the
5 23 fair, reasonable, and equitable administration of the
5 24 association, and provides for the sharing of
5 25 association losses, if any, on an equitable and
5 26 proportionate basis among the member carriers. If the
5 27 association fails to submit a suitable plan of
5 28 operation within one hundred eighty days after the
5 29 appointment of the board of directors, or if at any
5 30 later time the association fails to submit suitable
5 31 amendments to the plan, the commissioner shall adopt,
5 32 pursuant to chapter 17A, rules necessary to implement
5 33 this section. The rules shall continue in force until
5 34 modified by the commissioner or superseded by a plan
5 35 submitted by the association and approved by the
5 36 commissioner. In addition to other requirements, the
5 37 plan of operation shall provide for all of the
5 38 following:

5 39 Sec. 4. Sections 514E.5 and 514E.6, Code 2009, are
5 40 repealed.

5 41 Sec. 5. EFFECTIVE DATE. This division of this
5 42 Act, being deemed of immediate importance, takes
5 43 effect upon enactment.

5 44 DIVISION II

5 45 HEALTH CARE COVERAGE OF ADULT CHILDREN

5 46 Sec. 6. Section 422.7, Code 2009, is amended by
5 47 adding the following new subsection:

5 48 NEW SUBSECTION. 29A. If the health benefits
5 49 coverage or insurance of the taxpayer includes
5 50 coverage of a nonqualified tax dependent as determined



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6 1 by the federal internal revenue service, subtract, to
6 2 the extent included, the amount of the value of such
6 3 coverage attributable to the nonqualified tax
6 4 dependent.

6 5 Sec. 7. Section 509.3, subsection 8, Code 2009, is
6 6 amended to read as follows:

6 7 8. A provision that the insurer will permit
6 8 continuation of existing coverage or reenrollment in
6 9 previously existing coverage for an individual who
6 10 meets the requirements of section 513B.2, subsection
6 11 14, paragraph "a", "b", "c", "d", or "e", and who is
6 12 an unmarried child of an insured or enrollee who so
6 13 elects, at least through the policy anniversary date
6 14 on or after the date the child marries, ceases to be a
6 15 resident of this state, or attains the age of
6 16 twenty-five years old, whichever occurs first, or so
6 17 long as the unmarried child maintains full-time status
6 18 as a student in an accredited institution of
6 19 postsecondary education.

6 20 In addition to the provisions required in
6 21 subsections 1 through 7 8, the commissioner shall
6 22 require provisions through the adoption of rules
6 23 implementing the federal Health Insurance Portability
6 24 and Accountability Act, Pub. L. No. 104-191.

6 25 Sec. 8. Section 509A.13B, Code 2009, is amended to
6 26 read as follows:

6 27 509A.13B ~~CONTINUATION OF DEPENDENT COVERAGE OF~~
6 28 ~~CHILDREN == CONTINUATION OR REENROLLMENT.~~

6 29 If a governing body, a county board of supervisors,
6 30 or a city council has procured accident or health care
6 31 coverage for its employees under this chapter such
6 32 coverage shall permit continuation of existing
6 33 coverage or reenrollment in previously existing
6 34 coverage for an individual who meets the requirements
6 35 of section 513B.2, subsection 14, paragraph "a", "b",
6 36 "c", "d", or "e", and who is an unmarried child of an
6 37 insured or enrollee who so elects, at least through
6 38 the policy anniversary date on or after the date the
6 39 child marries, ceases to be a resident of this state,
6 40 or attains the age of twenty-five years old, whichever
6 41 occurs first, or so long as the unmarried child
6 42 maintains full-time status as a student in an
6 43 accredited institution of postsecondary education.

6 44 Sec. 9. Section 514A.3B, subsection 2, Code 2009,
6 45 is amended to read as follows:

6 46 2. An insurer issuing an individual policy or
6 47 contract of accident and health insurance which
6 48 provides coverage for children of the insured shall
6 49 permit continuation of existing coverage or
6 50 reenrollment in previously existing coverage for an



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7 1 individual who meets the requirements of section
7 2 513B.2, subsection 14, paragraph "a", "b", "c", "d",
7 3 or "e", and who is an unmarried child of an insured or
7 4 enrollee who so elects, at least through the policy
7 5 anniversary date on or after the date the child
7 6 marries, ceases to be a resident of this state, or
7 7 attains the age of twenty-five years old, whichever
7 8 occurs first, or so long as the unmarried child
7 9 maintains full-time status as a student in an
7 10 accredited institution of postsecondary education.

7 11 Sec. 10. NEW SECTION. 514B.9A COVERAGE OF
7 12 CHILDREN == CONTINUATION OR REENROLLMENT.

7 13 A health maintenance organization which provides
7 14 health care coverage pursuant to an individual or
7 15 group health maintenance organization contract
7 16 regulated under this chapter for children of an
7 17 enrollee shall permit continuation of existing
7 18 coverage or reenrollment in previously existing
7 19 coverage for an individual who meets the requirements
7 20 of section 513B.2, subsection 14, paragraph "a", "b",
7 21 "c", "d", or "e", and who is an unmarried child of an
7 22 enrollee who so elects, at least through the policy
7 23 anniversary date on or after the date the child
7 24 marries, ceases to be a resident of this state, or
7 25 attains the age of twenty-five years old, whichever
7 26 occurs first, or so long as the unmarried child
7 27 maintains full-time status as a student in an
7 28 accredited institution of postsecondary education.

7 29 Sec. 11. APPLICABILITY. The sections of this Act
7 30 amending section 509.3, subsection 8, 509A.13B, and
7 31 514A.3B, subsection 2, and enacting section 514B.9A,
7 32 apply to policies, contracts, or plans of accident and
7 33 health insurance delivered, issued for delivery,
7 34 continued, or renewed in this state on or after July
7 35 1, 2009.

7 36 Sec. 12. RETROACTIVE APPLICABILITY DATE. The
7 37 section of this Act enacting section 422.7, subsection
7 38 29A, applies retroactively to January 1, 2009, for tax
7 39 years beginning on or after that date.

7 40 DIVISION III

7 41 MEDICAL ASSISTANCE AND HAWK=I PROVISIONS
7 42 COVERAGE FOR ALL INCOME=ELIGIBLE CHILDREN

7 43 Sec. 13. NEW SECTION. 249A.3A MEDICAL ASSISTANCE
7 44 == ALL INCOME=ELIGIBLE CHILDREN.

7 45 The department shall provide medical assistance to
7 46 individuals under nineteen years of age who meet the
7 47 income eligibility requirements for the state medical
7 48 assistance program and for whom federal financial
7 49 participation is or becomes available for the cost of
7 50 such assistance.



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8 1 Sec. 14. NEW SECTION. 514I.8A HAWK=I == ALL
8 2 INCOME=ELIGIBLE CHILDREN.
8 3 The department shall provide coverage to
8 4 individuals under nineteen years of age who meet the
8 5 income eligibility requirements for the hawk=i program
8 6 and for whom federal financial participation is or
8 7 becomes available for the cost of such coverage.
8 8 REQUIRED APPLICATION FOR DEPENDENT CHILD HEALTH CARE
8 9 COVERAGE
8 10 Sec. 15. Section 422.12M, Code 2009, is amended to
8 11 read as follows:
8 12 422.12M INCOME TAX FORM == INDICATION OF DEPENDENT
8 13 CHILD HEALTH CARE COVERAGE.
8 14 1. The director shall draft the income tax form to
8 15 ~~allow~~ require beginning with the tax returns for tax
8 16 year ~~2008~~ 2010, a person who files an individual or
8 17 joint income tax return with the department under
8 18 section 422.13 to indicate the presence or absence of
8 19 health care coverage for each dependent child for whom
8 20 an exemption is claimed.
8 21 2. Beginning with the income tax return for tax
8 22 year ~~2008~~ 2010, a person who files an individual or
8 23 joint income tax return with the department under
8 24 section 422.13, ~~may~~ shall report on the income tax
8 25 return, in the form required, the presence or absence
8 26 of health care coverage for each dependent child for
8 27 whom an exemption is claimed.
8 28 a. If the taxpayer indicates on the income tax
8 29 return that a dependent child does not have health
8 30 care coverage, and the income of the taxpayer's tax
8 31 return does not exceed the highest level of income
8 32 eligibility standard for the medical assistance
8 33 program pursuant to chapter 249A or the hawk=i program
8 34 pursuant to chapter 514I, the department shall send a
8 35 notice to the taxpayer indicating that the dependent
8 36 child may be eligible for the medical assistance
8 37 program or the hawk=i program and providing
8 38 information to the taxpayer about how to enroll the
8 39 dependent child in the ~~programs~~ appropriate program.
8 40 The taxpayer shall submit an application for the
8 41 appropriate program within ninety days of receipt of
8 42 the enrollment information.
8 43 ~~b. Notwithstanding any other provision of law to~~
8 44 ~~the contrary, a taxpayer shall not be subject to a~~
8 45 ~~penalty for not providing the information required~~
8 46 ~~under this section.~~
8 47 e. b. The department shall consult with the
8 48 department of human services in developing the tax
8 49 return form and the information to be provided to tax
8 50 filers under this section.



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9 1 3. The department, in cooperation with the
9 2 department of human services, shall adopt rules
9 3 pursuant to chapter 17A to administer this section,
9 4 including rules defining "health care coverage" for
9 5 the purpose of indicating its presence or absence on
9 6 the tax form.

9 7 4. The department, in cooperation with the
9 8 department of human services, shall report, annually,
9 9 to the governor and the general assembly all of the
9 10 following:

9 11 a. The number of Iowa families, by income level,
9 12 claiming the state income tax exemption for dependent
9 13 children.

9 14 b. The number of Iowa families, by income level,
9 15 claiming the state income tax exemption for dependent
9 16 children ~~who also~~ and whether they indicate the
9 17 presence or absence of health care coverage for the
9 18 dependent children.

9 19 ~~c. The effect of the reporting requirements and~~
~~9 20 provision of information requirements under this~~
~~9 21 section on the number and percentage of children in~~
~~9 22 the state who are uninsured. The number of Iowa~~
9 23 families, by income level, claiming the state income
9 24 tax exemption for dependent children who receive
9 25 information from the department pursuant to subsection
9 26 2 and who subsequently apply for and are enrolled in
9 27 the appropriate program.

9 28 PREGNANT WOMEN INCOME ELIGIBILITY FOR MEDICAID

9 29 Sec. 16. Section 249A.3, subsection 1, paragraph
9 30 1, Code 2009, is amended to read as follows:

9 31 1. (1) Is an infant whose income is not more than
9 32 two hundred percent of the federal poverty level, as
9 33 defined by the most recently revised income guidelines
9 34 published by the United States department of health
9 35 and human services.

9 36 (2) Additionally, effective July 1, 2009, medical
9 37 assistance shall be provided to ~~an~~ a pregnant woman or
9 38 infant whose family income is at or below three
9 39 hundred percent of the federal poverty level, as
9 40 defined by the most recently revised poverty income
9 41 guidelines published by the United States department
9 42 of health and human services, if otherwise eligible.

9 43 Sec. 17. Section 514I.8, subsection 1, Code 2009,
9 44 is amended to read as follows:

9 45 1. Effective July 1, 1998, and notwithstanding any
9 46 medical assistance program eligibility criteria to the
9 47 contrary, medical assistance shall be provided to, or
9 48 on behalf of, an eligible child under the age of
9 49 nineteen whose family income does not exceed one
9 50 hundred thirty-three percent of the federal poverty



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10 1 level, as defined by the most recently revised poverty
10 2 income guidelines published by the United States
10 3 department of health and human services.
10 4 Additionally, effective July 1, 2000, and
10 5 notwithstanding any medical assistance program
10 6 eligibility criteria to the contrary, medical
10 7 assistance shall be provided to, or on behalf of, an
10 8 eligible infant whose family income does not exceed
10 9 two hundred percent of the federal poverty level, as
10 10 defined by the most recently revised poverty income
10 11 guidelines published by the United States department
10 12 of health and human services. Effective July 1, 2009,
10 13 and notwithstanding any medical assistance program
10 14 eligibility criteria to the contrary, medical
10 15 assistance shall be provided to, or on behalf of, a
10 16 pregnant woman or an eligible child who is an infant
10 17 and whose family income is at or below three hundred
10 18 percent of the federal poverty level, as defined by
10 19 the most recently revised poverty income guidelines
10 20 published by the United States department of health
10 21 and human services.

10 22 IMPROVING ACCESS AND RETENTION

10 23 Sec. 18. Section 249A.4, Code 2009, is amended by
10 24 adding the following new subsection:

10 25 NEW SUBSECTION. 16. Implement the premium
10 26 assistance program options described under the federal
10 27 Children's Health Insurance Program Reauthorization
10 28 Act of 2009, Pub. L. No. 111=3, for the medical
10 29 assistance program. The department may adopt rules as
10 30 necessary to administer these options.

10 31 Sec. 19. NEW SECTION. 509.3A CREDITABLE
10 32 COVERAGE.

10 33 For the purposes of any policies of group accident
10 34 or health insurance or combination of such policies
10 35 issued in this state, "creditable coverage" means
10 36 health benefits or coverage provided to an individual
10 37 under any of the following:

- 10 38 1. A group health plan.
- 10 39 2. Health insurance coverage.
- 10 40 3. Part A or Part B Medicare pursuant to Title
10 41 XVIII of the federal Social Security Act.
- 10 42 4. Medicaid pursuant to Title XIX of the federal
10 43 Social Security Act, other than coverage consisting
10 44 solely of benefits under section 1928 of that Act.
- 10 45 5. 10 U.S.C. ch. 55.
- 10 46 6. A health or medical care program provided
10 47 through the Indian health service or a tribal
10 48 organization.
- 10 49 7. A state health benefits risk pool.
- 10 50 8. A health plan offered under 5 U.S.C. ch. 89.



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11 1 9. A public health plan as defined under federal
11 2 regulations.

11 3 10. A health benefit plan under section 5(e) of
11 4 the federal Peace Corps Act, 22 U.S.C. } 2504(e).

11 5 11. An organized delivery system licensed by the
11 6 director of public health.

11 7 12. A short-term limited duration policy.

11 8 13. The hawk=i program authorized by chapter 514I.
11 9 Sec. 20. Section 513B.2, subsection 8, Code 2009,
11 10 is amended by adding the following new paragraph:
11 11 NEW PARAGRAPH. m. The hawk=i program authorized
11 12 by chapter 514I.

11 13 Sec. 21. Section 514A.3B, subsection 1, Code 2009,
11 14 is amended to read as follows:

11 15 1. An insurer which accepts an individual for
11 16 coverage under an individual policy or contract of
11 17 accident and health insurance shall waive any time
11 18 period applicable to a preexisting condition exclusion
11 19 or limitation period requirement of the policy or
11 20 contract with respect to particular services in an
11 21 individual health benefit plan for the period of time
11 22 the individual was previously covered by qualifying
11 23 previous coverage as defined in section 513C.3, by
11 24 chapter 249A or 514I, or by Medicare coverage provided
11 25 pursuant to Title XVIII of the federal Social Security
11 26 Act that provided benefits with respect to such
11 27 services, provided that the ~~qualifying previous~~
11 28 coverage was continuous to a date not more than
11 29 sixty-three days prior to the effective date of the
11 30 new policy or contract. ~~Any days of coverage provided~~
11 31 ~~to an individual pursuant to chapter 249A or 514I, or~~
11 32 ~~Medicare coverage provided pursuant to Title XVIII of~~
11 33 ~~the federal Social Security Act, do not constitute~~
11 34 ~~qualifying previous coverage. Such days of chapter~~
11 35 ~~249A or 514I or Medicare coverage shall be counted as~~
11 36 ~~part of the maximum sixty-three-day grace period and~~
11 37 ~~shall not constitute a basis for the waiver of any~~
11 38 ~~preexisting condition exclusion or limitation period.~~

11 39 Sec. 22. Section 514A.3B, Code 2009, is amended by
11 40 adding the following new subsection:

11 41 NEW SUBSECTION. 3. For the purposes of any
11 42 policies of accident and sickness insurance issued in
11 43 this state, "creditable coverage" means health
11 44 benefits or coverage provided to an individual under
11 45 any of the following:

11 46 a. A group health plan.

11 47 b. Health insurance coverage.

11 48 c. Part A or Part B Medicare pursuant to Title
11 49 XVIII of the federal Social Security Act.

11 50 d. Medicaid pursuant to Title XIX of the federal



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12 1 Social Security Act, other than coverage consisting
12 2 solely of benefits under section 1928 of that Act.

12 3 e. 10 U.S.C. ch. 55.

12 4 f. A health or medical care program provided
12 5 through the Indian health service or a tribal
12 6 organization.

12 7 g. A state health benefits risk pool.

12 8 h. A health plan offered under 5 U.S.C. ch. 89.

12 9 i. A public health plan as defined under federal
12 10 regulations.

12 11 j. A health benefit plan under section 5(e) of the
12 12 federal Peace Corps Act, 22 U.S.C. } 2504(e).

12 13 k. An organized delivery system licensed by the
12 14 director of public health.

12 15 l. A short-term limited duration policy.

12 16 m. The hawk=i program authorized by chapter 514I.

12 17 Sec. 23. Section 514I.1, subsection 4, Code 2009,
12 18 is amended to read as follows:

12 19 4. It is the intent of the general assembly that
12 20 the hawk=i program be an integral part of the

12 21 continuum of health insurance coverage and that the
12 22 program be developed and implemented in such a manner

12 23 as to facilitate movement of families between health
12 24 insurance providers and to facilitate the transition

12 25 of families to private sector health insurance

12 26 coverage. ~~It is the intent of the general assembly in~~

~~12 27 developing such continuum of health insurance coverage~~

~~12 28 and in facilitating such transition, that beginning~~

~~12 29 July 1, 2009, the department implement the hawk=i~~

~~12 30 expansion program.~~

12 31 Sec. 24. Section 514I.2, subsection 8, Code 2009,
12 32 is amended by striking the subsection.

12 33 Sec. 25. Section 514I.3, Code 2009, is amended by
12 34 adding the following new subsection:

12 35 NEW SUBSECTION. 6. Health care coverage provided
12 36 under this chapter in accordance with Title XXI of the
12 37 federal Social Security Act shall be recognized as
12 38 prior creditable coverage for the purposes of private
12 39 individual and group health insurance coverage.

12 40 Sec. 26. Section 514I.4, subsection 2, Code 2009,
12 41 is amended to read as follows:

12 42 2. a. The director, with the approval of the
12 43 board, may contract with participating insurers to
12 44 provide dental-only services.

12 45 b. The director, with the approval of the board,
12 46 may contract with participating insurers to provide

12 47 the supplemental dental-only coverage to otherwise

12 48 eligible children who have private health care

12 49 coverage as specified in the federal Children's Health

12 50 Insurance Program Reauthorization Act of 2009, Pub. L.



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13 1 No. 111=3.

13 2 Sec. 27. Section 514I.4, subsection 5, paragraphs
13 3 a and b, Code 2009, are amended to read as follows:

13 4 a. Develop a joint program application form ~~not to~~

~~13 5 exceed two pages in length, which is consistent with~~

~~13 6 the rules of the board, which is easy to understand,~~

~~13 7 complete, and concise, and which, to the greatest~~

~~13 8 extent possible, coordinates with the supplemental~~

~~13 9 forms, and the same application and renewal~~

~~13 10 verification process for both the hawk=i and medical~~

~~13 11 assistance program programs.~~

13 12 b. (1) Establish the family cost sharing amounts

13 13 for children of families with incomes of one hundred

13 14 fifty percent or more but not exceeding two hundred

13 15 percent of the federal poverty level, of not less than

13 16 ten dollars per individual and twenty dollars per

13 17 family, if not otherwise prohibited by federal law,

13 18 with the approval of the board.

13 19 (2) Establish for children of families with

13 20 incomes exceeding two hundred percent but not

13 21 exceeding three hundred percent of the federal poverty

13 22 level, family cost-sharing amounts, and graduated

13 23 premiums based on a rationally developed sliding fee

13 24 schedule, in accordance with federal law, with the

13 25 approval of the board.

13 26 Sec. 28. Section 514I.5, subsection 7, paragraph

13 27 1, Code 2009, is amended to read as follows:

13 28 1. Develop options and recommendations to allow

13 29 children eligible for the hawk=i ~~or hawk=i expansion~~

13 30 program to participate in qualified employer-sponsored

13 31 health plans through a premium assistance program.

13 32 The options and recommendations shall ensure

13 33 reasonable alignment between the benefits and costs of

13 34 the hawk=i ~~and hawk=i expansion programs~~ program and

13 35 the employer-sponsored health plans consistent with

13 36 federal law. ~~The options and recommendations shall be~~

~~13 37 completed by January 1, 2009, and submitted to the~~

~~13 38 governor and the general assembly for consideration as~~

~~13 39 part of the hawk=i and hawk=i expansion programs. In~~

13 40 addition, the board shall implement the premium

13 41 assistance program options described under the federal

13 42 Children's Health Insurance Program Reauthorization

13 43 Act of 2009, Pub. L. No. 111=3, for the hawk=i

13 44 program.

13 45 Sec. 29. Section 514I.5, subsection 8, paragraph

13 46 e, Code 2009, is amended by adding the following new

13 47 subparagraph:

13 48 NEW SUBPARAGRAPH. (15) Translation and

13 49 interpreter services as specified pursuant to the

13 50 federal Children's Health Insurance Program



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14 1 Reauthorization Act of 2009, Pub. L. No. 111=3.

14 2 Sec. 30. Section 514I.5, subsection 8, paragraph
14 3 g, Code 2009, is amended to read as follows:

14 4 g. Presumptive eligibility criteria for the
14 5 program. Beginning January 1, 2010, presumptive
14 6 eligibility shall be provided for eligible children.

14 7 Sec. 31. Section 514I.5, subsection 9, Code 2009,
14 8 is amended to read as follows:

14 9 9. a. The hawk=i board may provide approval to
14 10 the director to contract with participating insurers
14 11 to provide dental-only services. In determining
14 12 whether to provide such approval to the director, the
14 13 board shall take into consideration the impact on the
14 14 overall program of single source contracting for
14 15 dental services.

14 16 b. The hawk=i board may provide approval to the
14 17 director to contract with participating insurers to
14 18 provide the supplemental dental-only coverage to
14 19 otherwise eligible children who have private health
14 20 care coverage as specified in the federal Children's
14 21 Health Insurance Program Reauthorization Act of 2009,
14 22 Pub. L. No. 111=3.

14 23 Sec. 32. Section 514I.6, subsections 2 and 3, Code
14 24 2009, are amended to read as follows:

14 25 2. Provide or reimburse accessible, quality
14 26 medical or dental services.

14 27 3. Require that any plan provided by the
14 28 participating insurer establishes and maintains a
14 29 conflict management system that includes methods for
14 30 both preventing and resolving disputes involving the
14 31 health or dental care needs of eligible children, and
14 32 a process for resolution of such disputes.

14 33 Sec. 33. Section 514I.6, subsection 4, paragraph
14 34 a, Code 2009, is amended to read as follows:

14 35 a. A list of providers of medical or dental
14 36 services under the plan.

14 37 Sec. 34. Section 514I.7, subsection 2, paragraph
14 38 d, Code 2009, is amended to read as follows:

14 39 d. Monitor and assess the medical and dental care
14 40 provided through or by participating insurers as well
14 41 as complaints and grievances.

14 42 Sec. 35. Section 514I.8, subsection 2, paragraph
14 43 c, Code 2009, is amended to read as follows:

14 44 c. Is a member of a family whose income does not
14 45 exceed ~~two~~ three hundred percent of the federal
14 46 poverty level, as defined in 42 U.S.C. } 9902(2),
14 47 including any revision required by such section, and
14 48 in accordance with the federal Children's Health

14 49 Insurance Program Reauthorization Act of 2009, Pub. L.
14 50 No. 111=3.



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15 1 Sec. 36. Section 514I.10, Code 2009, is amended by
15 2 adding the following new subsection:

15 3 NEW SUBSECTION. 2A. Cost sharing for an eligible
15 4 child whose family income exceeds two hundred percent
15 5 but does not exceed three hundred percent of the
15 6 federal poverty level may include copayments and
15 7 graduated premium amounts which do not exceed the
15 8 limitations of federal law.

15 9 Sec. 37. Section 514I.11, subsections 1 and 3,
15 10 Code 2009, are amended to read as follows:

15 11 1. A hawk=i trust fund is created in the state
15 12 treasury under the authority of the department of
15 13 human services, in which all appropriations and other
15 14 revenues of the program ~~and the hawk=i expansion~~
~~15 15 program~~ such as grants, contributions, and participant
15 16 payments shall be deposited and used for the purposes
15 17 of the program ~~and the hawk=i expansion program~~. The
15 18 moneys in the fund shall not be considered revenue of
15 19 the state, but rather shall be funds of the program.

15 20 3. Moneys in the fund are appropriated to the
15 21 department and shall be used to offset any program ~~and~~
~~15 22 hawk=i expansion program~~ costs.

15 23 Sec. 38. MEDICAL ASSISTANCE PROGRAM ==
15 24 PROGRAMMATIC AND PROCEDURAL PROVISIONS. The
15 25 department of human services shall adopt rules
15 26 pursuant to chapter 17A to provide for all of the
15 27 following:

15 28 1. To allow for the submission of one pay stub per
15 29 employer by an individual as verification of earned
15 30 income for the medical assistance program when it is
15 31 indicative of future income.

15 32 2. To allow for an averaging of three years of
15 33 income for self-employed families to establish
15 34 eligibility for the medical assistance program.

15 35 3. To extend the period for annual renewal by
15 36 medical assistance members by mailing the renewal form
15 37 to the member on the first day of the month prior to
15 38 the month of renewal.

15 39 4. To provide for all of the following in
15 40 accordance with the requirements for qualification for
15 41 the performance bonus payments described under the
15 42 federal Children's Health Insurance Program
15 43 Reauthorization Act of 2009, Pub. L. No. 111=3:

15 44 a. Utilization of joint applications and
15 45 supplemental forms, and the same application and
15 46 renewal verification processes for the medical
15 47 assistance and hawk=i programs.

15 48 b. Implementation of administrative or paperless
15 49 verification at renewal for the medical assistance
15 50 program.



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16 1 c. Utilization of presumptive eligibility when
16 2 determining a child's eligibility for the medical
16 3 assistance program.
16 4 d. Utilization of the express lane option,
16 5 including utilization of other public program
16 6 databases to reach and enroll children in the medical
16 7 assistance program.
16 8 5. To provide translation and interpretation
16 9 services under the medical assistance program as
16 10 specified pursuant to the federal Children's Health
16 11 Insurance Program Reauthorization Act of 2009, Pub. L.
16 12 No. 111=3.
16 13 Sec. 39. HAWK=I PROGRAM == PROGRAMMATIC AND
16 14 PROCEDURAL PROVISIONS. The hawk=i board, in
16 15 consultation with the department of human services,
16 16 shall adopt rules pursuant to chapter 17A to provide
16 17 for all of the following:
16 18 1. To allow for the submission of one pay stub per
16 19 employer by an individual as verification of earned
16 20 income for the hawk=i program when it is indicative of
16 21 future income.
16 22 2. To allow for an averaging of three years of
16 23 income for self=employed families to establish
16 24 eligibility for the hawk=i program.
16 25 3. To provide for all of the following in
16 26 accordance with the requirements for qualification for
16 27 the performance bonus payments described under the
16 28 federal Children's Health Insurance Program
16 29 Reauthorization Act of 2009, Pub. L. No. 111=3:
16 30 a. Utilization of joint applications and
16 31 supplemental forms, and the same application and
16 32 renewal verification processes for the hawk=i and
16 33 medical assistance programs.
16 34 b. Implementation of administrative or paperless
16 35 verification at renewal for the hawk=i program.
16 36 c. Utilization of presumptive eligibility when
16 37 determining a child's eligibility for the hawk=i
16 38 program.
16 39 d. Utilization of the express lane option,
16 40 including utilization of other public program
16 41 databases to reach and enroll children in the hawk=i
16 42 program.
16 43 Sec. 40. DEMONSTRATION GRANTS == CHIPRA. The
16 44 department of human services in cooperation with the
16 45 department of public health and other appropriate
16 46 agencies, shall apply for grants available under the
16 47 Children's Health Insurance Program Reauthorization
16 48 Act of 2009, Pub. L. No. 111=3, to promote outreach
16 49 activities and quality child health outcomes under the
16 50 medical assistance and hawk=i programs.



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17 1 Sec. 41. Section 514I.12, Code 2009, is repealed.

17 2 Sec. 42. EFFECTIVE DATE. The section of this
17 3 division of this Act amending section 422.12M, takes
17 4 effect July 1, 2010.

17 5 DIVISION IV

17 6 VOLUNTEER HEALTH CARE PROVIDERS

17 7 Sec. 43. Section 135.24, Code 2009, is amended to
17 8 read as follows:

17 9 135.24 VOLUNTEER HEALTH CARE PROVIDER PROGRAM
17 10 ESTABLISHED == IMMUNITY FROM CIVIL LIABILITY.

17 11 1. The director shall establish within the
17 12 department a program to provide to eligible hospitals,
17 13 clinics, free clinics, field dental clinics, specialty
17 14 health care provider offices, or other health care

17 15 facilities, health care referral programs, or
17 16 charitable organizations, free medical, dental,
17 17 chiropractic, pharmaceutical, nursing, optometric,
17 18 psychological, social work, behavioral science,
17 19 podiatric, physical therapy, occupational therapy,
17 20 respiratory therapy, and emergency medical care
17 21 services given on a voluntary basis by health care
17 22 providers. A participating health care provider shall
17 23 register with the department and obtain from the
17 24 department a list of eligible, participating
17 25 hospitals, clinics, free clinics, field dental
17 26 clinics, specialty health care provider offices, or
17 27 other health care facilities, health care referral
17 28 programs, or charitable organizations.

17 29 2. The department, in consultation with the
17 30 department of human services, shall adopt rules to
17 31 implement the volunteer health care provider program
17 32 which shall include the following:

17 33 a. Procedures for registration of health care
17 34 providers deemed qualified by the board of medicine,
17 35 the board of physician assistants, the dental board,
17 36 the board of nursing, the board of chiropractic, the
17 37 board of psychology, the board of social work, the
17 38 board of behavioral science, the board of pharmacy,
17 39 the board of optometry, the board of podiatry, the
17 40 board of physical and occupational therapy, the board
17 41 of respiratory care, and the Iowa department of public
17 42 health, as applicable.

17 43 b. Procedures for registration of free clinics,
17 44 ~~and~~ field dental clinics, and specialty health care
17 45 provider offices.

17 46 c. Criteria for and identification of hospitals,
17 47 clinics, free clinics, field dental clinics, specialty
17 48 health care provider offices, or other health care
17 49 facilities, health care referral programs, or
17 50 charitable organizations, eligible to participate in



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18 1 the provision of free medical, dental, chiropractic,
18 2 pharmaceutical, nursing, optometric, psychological,
18 3 social work, behavioral science, podiatric, physical
18 4 therapy, occupational therapy, respiratory therapy, or
18 5 emergency medical care services through the volunteer
18 6 health care provider program. A free clinic, a field
18 7 dental clinic, a specialty health care provider
18 8 office, a health care facility, a health care referral
18 9 program, a charitable organization, or a health care
18 10 provider participating in the program shall not bill
18 11 or charge a patient for any health care provider
18 12 service provided under the volunteer health care
18 13 provider program.

18 14 d. Identification of the services to be provided
18 15 under the program. The services provided may include,
18 16 but shall not be limited to, obstetrical and
18 17 gynecological medical services, psychiatric services
18 18 provided by a physician licensed under chapter 148,
18 19 dental services provided under chapter 153, or other
18 20 services provided under chapter 147A, 148A, 148B,
18 21 148C, 149, 151, 152, 152B, 152E, 154, 154B, 154C,
18 22 154D, 154F, or 155A.

18 23 3. A health care provider providing free care
18 24 under this section shall be considered an employee of
18 25 the state under chapter 669, shall be afforded
18 26 protection as an employee of the state under section
18 27 669.21, and shall not be subject to payment of claims
18 28 arising out of the free care provided under this
18 29 section through the health care provider's own
18 30 professional liability insurance coverage, provided
18 31 that the health care provider has done all of the
18 32 following:

18 33 a. Registered with the department pursuant to
18 34 subsection 1.

18 35 b. Provided medical, dental, chiropractic,
18 36 pharmaceutical, nursing, optometric, psychological,
18 37 social work, behavioral science, podiatric, physical
18 38 therapy, occupational therapy, respiratory therapy, or
18 39 emergency medical care services through a hospital,
18 40 clinic, free clinic, field dental clinic, specialty
18 41 health care provider office, or other health care

18 42 facility, health care referral program, or charitable
18 43 organization listed as eligible and participating by
18 44 the department pursuant to subsection 1.

18 45 4. A free clinic providing free care under this
18 46 section shall be considered a state agency solely for
18 47 the purposes of this section and chapter 669 and shall
18 48 be afforded protection under chapter 669 as a state
18 49 agency for all claims arising from the provision of
18 50 free care by a health care provider registered under



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19 1 subsection 3 who is providing services at the free
19 2 clinic in accordance with this section or from the
19 3 provision of free care by a health care provider who
19 4 is covered by adequate medical malpractice insurance
19 5 as determined by the department, if the free clinic
19 6 has registered with the department pursuant to
19 7 subsection 1.

19 8 5. A field dental clinic providing free care under
19 9 this section shall be considered a state agency solely
19 10 for the purposes of this section and chapter 669 and
19 11 shall be afforded protection under chapter 669 as a
19 12 state agency for all claims arising from the provision
19 13 of free care by a health care provider registered
19 14 under subsection 3 who is providing services at the
19 15 field dental clinic in accordance with this section or
19 16 from the provision of free care by a health care
19 17 provider who is covered by adequate medical
19 18 malpractice insurance, as determined by the
19 19 department, if the field dental clinic has registered
19 20 with the department pursuant to subsection 1.

19 21 5A. A specialty health care provider office
19 22 providing free care under this section shall be
19 23 considered a state agency solely for the purposes of
19 24 this section and chapter 669 and shall be afforded
19 25 protection under chapter 669 as a state agency for all
19 26 claims arising from the provision of free care by a
19 27 health care provider registered under subsection 3 who
19 28 is providing services at the specialty health care
19 29 provider office in accordance with this section or
19 30 from the provision of free care by a health care
19 31 provider who is covered by adequate medical
19 32 malpractice insurance, as determined by the
19 33 department, if the specialty health care provider
19 34 office has registered with the department pursuant to
19 35 subsection 1.

19 36 6. For the purposes of this section:

19 37 a. "Charitable organization" means a charitable
19 38 organization within the meaning of section 501(c)(3)
19 39 of the Internal Revenue Code.

19 40 b. "Field dental clinic" means a dental clinic
19 41 temporarily or periodically erected at a location
19 42 utilizing mobile dental equipment, instruments, or
19 43 supplies, as necessary, to provide dental services.

19 44 c. "Free clinic" means a facility, other than a
19 45 hospital or health care provider's office which is
19 46 exempt from taxation under section 501(c)(3) of the
19 47 Internal Revenue Code and which has as its sole
19 48 purpose the provision of health care services without
19 49 charge to individuals who are otherwise unable to pay
19 50 for the services.



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20 1 d. "Health care provider" means a physician
 20 2 licensed under chapter 148, a chiropractor licensed
 20 3 under chapter 151, a physical therapist licensed
 20 4 pursuant to chapter 148A, an occupational therapist
 20 5 licensed pursuant to chapter 148B, a podiatrist
 20 6 licensed pursuant to chapter 149, a physician
 20 7 assistant licensed and practicing under a supervising
 20 8 physician pursuant to chapter 148C, a licensed
 20 9 practical nurse, a registered nurse, or an advanced
 20 10 registered nurse practitioner licensed pursuant to
 20 11 chapter 152 or 152E, a respiratory therapist licensed
 20 12 pursuant to chapter 152B, a dentist, dental hygienist,
 20 13 or dental assistant registered or licensed to practice
 20 14 under chapter 153, an optometrist licensed pursuant to
 20 15 chapter 154, a psychologist licensed pursuant to
 20 16 chapter 154B, a social worker licensed pursuant to
 20 17 chapter 154C, a mental health counselor or a marital
 20 18 and family therapist licensed pursuant to chapter
 20 19 154D, a pharmacist licensed pursuant to chapter 155A,
 20 20 or an emergency medical care provider certified
 20 21 pursuant to chapter 147A.

20 22 e. "Specialty health care provider office" means
 20 23 the private office or clinic of an individual
 20 24 specialty health care provider or group of specialty
 20 25 health care providers as referred by the Iowa
 20 26 collaborative safety net provider network established
 20 27 in section 135.153, but does not include a field
 20 28 dental clinic, a free clinic, or a hospital.

DIVISION V

HEALTH CARE WORKFORCE SUPPORT INITIATIVE

20 30 Sec. 44. NEW SECTION. 135.153A SAFETY NET
 20 31 PROVIDER RECRUITMENT AND RETENTION INITIATIVES PROGRAM
 20 32 REPEAL.

20 34 The department, in accordance with efforts pursuant
 20 35 to sections 135.163 and 135.164 and in cooperation
 20 36 with the Iowa collaborative safety net provider
 20 37 network governing group as described in section
 20 38 135.153, shall establish and administer a safety net
 20 39 provider recruitment and retention initiatives program
 20 40 to address the health care workforce shortage relative
 20 41 to safety net providers. Funding for the program may
 20 42 be provided through the health care workforce shortage
 20 43 fund or the safety net provider network workforce
 20 44 shortage account created in section 135.175. The
 20 45 department, in cooperation with the governing group,
 20 46 shall adopt rules pursuant to chapter 17A to implement
 20 47 and administer such program. This section is repealed
 20 48 June 30, 2014.

20 49 Sec. 45. NEW SECTION. 135.175 HEALTH CARE
 20 50 WORKFORCE SUPPORT INITIATIVE == WORKFORCE SHORTAGE



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21 1 FUND == ACCOUNTS == REPEAL.
21 2 1. a. A health care workforce support initiative
21 3 is established to provide for the coordination and
21 4 support of various efforts to address the health care
21 5 workforce shortage in this state. This initiative
21 6 shall include the medical residency training state
21 7 matching grants program created in section 135.176,
21 8 the health care professional and nursing workforce
21 9 shortage initiative created in sections 261.128 and
21 10 261.129, the safety net provider recruitment and
21 11 retention initiatives program credited in section
21 12 135.153A, health care workforce shortage national
21 13 initiatives, and the physician assistant mental health
21 14 fellowship program created in section 135.177.
21 15 b. A health care workforce shortage fund is
21 16 created in the state treasury as a separate fund under
21 17 the control of the department, in cooperation with the
21 18 entities identified in this section as having control
21 19 over the accounts within the fund. The fund and the
21 20 accounts within the fund shall be controlled and
21 21 managed in a manner consistent with the principles
21 22 specified and the strategic plan developed pursuant to
21 23 sections 135.163 and 135.164.
21 24 2. The fund and the accounts within the fund shall
21 25 consist of moneys appropriated from the general fund
21 26 of the state for the purposes of the fund or the
21 27 accounts within the fund; moneys received from the
21 28 federal government for the purposes of addressing the
21 29 health care workforce shortage; contributions, grants,
21 30 and other moneys from communities and health care
21 31 employers; and moneys from any other public or private
21 32 source available.
21 33 3. The department and any entity identified in
21 34 this section as having control over any of the
21 35 accounts within the fund, may receive contributions,
21 36 grants, and in-kind contributions to support the
21 37 purposes of the fund and the accounts within the fund.
21 38 4. The fund and the accounts within the fund shall
21 39 be separate from the general fund of the state and
21 40 shall not be considered part of the general fund of
21 41 the state. The moneys in the fund and the accounts
21 42 within the fund shall not be considered revenue of the
21 43 state, but rather shall be moneys of the fund or the
21 44 accounts. The moneys in the fund and the accounts
21 45 within the fund are not subject to section 8.33 and
21 46 shall not be transferred, used, obligated,
21 47 appropriated, or otherwise encumbered, except to
21 48 provide for the purposes of this section.
21 49 Notwithstanding section 12C.7, subsection 2, interest
21 50 or earnings on moneys deposited in the fund shall be



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22 1 credited to the fund and the accounts within the fund.
22 2 5. The fund shall consist of the following
22 3 accounts:
22 4 a. The medical residency training account. The
22 5 medical residency training account shall be under the
22 6 control of the department and the moneys in the
22 7 account shall be used for the purposes of the medical
22 8 residency training state matching grants program as
22 9 specified in section 135.176. Moneys in the account
22 10 shall consist of moneys appropriated or allocated for
22 11 deposit in or received by the fund or the account and
22 12 specifically dedicated to the medical residency
22 13 training state matching grants program or account for
22 14 the purposes of such account.
22 15 b. The health care professional and nurse
22 16 workforce shortage initiative account. The health
22 17 care professional and nurse workforce shortage
22 18 initiative account shall be under the control of the
22 19 college student aid commission created in section
22 20 261.1 and the moneys in the account shall be used for
22 21 the purposes of the health care professional incentive
22 22 payment program and the nurse workforce shortage
22 23 initiative as specified in sections 261.128 and
22 24 261.129. Moneys in the account shall consist of
22 25 moneys appropriated or allocated for deposit in or
22 26 received by the fund or the account and specifically
22 27 dedicated to the health care professional and nurse
22 28 workforce shortage initiative or the account for the
22 29 purposes of the account.
22 30 c. The safety net provider network workforce
22 31 shortage account. The safety net provider network
22 32 workforce shortage account shall be under the control
22 33 of the governing group of the Iowa collaborative
22 34 safety net provider network created in section 135.153
22 35 and the moneys in the account shall be used for the
22 36 purposes of the safety net provider recruitment and
22 37 retention initiatives program as specified in section
22 38 135.153A. Moneys in the account shall consist of
22 39 moneys appropriated or allocated for deposit in or
22 40 received by the fund or the account and specifically
22 41 dedicated to the safety net provider recruitment and
22 42 retention initiatives program or the account for the
22 43 purposes of the account.
22 44 d. The health care workforce shortage national
22 45 initiatives account. The health care workforce
22 46 shortage national initiatives account shall be under
22 47 the control of the state entity identified for receipt
22 48 of the federal funds by the federal government entity
22 49 through which the federal funding is available for a
22 50 specified health care workforce shortage initiative.



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23 1 Moneys in the account shall consist of moneys
23 2 appropriated or allocated for deposit in or received
23 3 by the fund or the account and specifically dedicated
23 4 to health care workforce shortage national initiatives
23 5 or the account and for a specified health care
23 6 workforce shortage initiative.
23 7 e. The physician assistant mental health
23 8 fellowship program account. The physician assistant
23 9 mental health fellowship program account shall be
23 10 under the control of the department and the moneys in
23 11 the account shall be used for the purposes of the
23 12 physician assistant mental health fellowship program
23 13 as specified in section 135.177. Moneys in the
23 14 account shall consist of moneys appropriated or
23 15 allocated for deposit in or received by the fund or
23 16 the account and specifically dedicated to the
23 17 physician assistant mental health fellowship program
23 18 or the account for the purposes of the account.
23 19 6. a. Moneys in the fund and the accounts in the
23 20 fund shall only be appropriated in a manner consistent
23 21 with the principles specified and the strategic plan
23 22 developed pursuant to sections 135.163 and 135.164 to
23 23 support the medical residency training state matching
23 24 grants program, the health care professional incentive
23 25 payment program, the nurse educator incentive payment
23 26 and nursing faculty fellowship programs, the safety
23 27 net recruitment and retention initiatives program, for
23 28 national health care workforce shortage initiatives,
23 29 for the physician assistant mental health fellowship
23 30 program, and to provide funding for state health care
23 31 workforce shortage programs as provided in this
23 32 section.
23 33 b. State programs that may receive funding from
23 34 the fund and the accounts in the fund, if specifically
23 35 designated for the purpose of drawing down federal
23 36 funding, are the primary care recruitment and
23 37 retention endeavor (PRIMECARRE), the Iowa affiliate of
23 38 the national rural recruitment and retention network,
23 39 the primary care office shortage designation program,
23 40 the state office of rural health, and the Iowa health
23 41 workforce center, administered through the bureau of
23 42 health care access of the department of public health;
23 43 the area health education centers programs at Des
23 44 Moines university == osteopathic medical center and
23 45 the university of Iowa; the Iowa collaborative safety
23 46 net provider network established pursuant to section
23 47 135.153; any entity identified by the federal
23 48 government entity through which federal funding for a
23 49 specified health care workforce shortage initiative is
23 50 received; and a program developed in accordance with



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24 1 the strategic plan developed by the department of
24 2 public health in accordance with sections 135.163 and
24 3 135.164.
24 4 c. State appropriations to the fund shall be
24 5 allocated in equal amounts to each of the accounts
24 6 within the fund, unless otherwise specified in the
24 7 appropriation or allocation. Any federal funding
24 8 received for the purposes of addressing state health
24 9 care workforce shortages shall be deposited in the
24 10 health care workforce shortage national initiatives
24 11 account, unless otherwise specified by the source of
24 12 the funds, and shall be used as required by the source
24 13 of the funds. If use of the federal funding is not
24 14 designated, twenty-five percent of such funding shall
24 15 be deposited in the safety net provider network
24 16 workforce shortage account to be used for the purposes
24 17 of the account and the remainder of the funds shall be
24 18 used in accordance with the strategic plan developed
24 19 by the department of public health in accordance with
24 20 sections 135.163 and 135.164, or to address workforce
24 21 shortages as otherwise designated by the department of
24 22 public health. Other sources of funding shall be
24 23 deposited in the fund or account and used as specified
24 24 by the source of the funding.
24 25 7. No more than five percent of the moneys in any
24 26 of the accounts within the fund, not to exceed one
24 27 hundred thousand dollars in each account, shall be
24 28 used for administrative purposes, unless otherwise
24 29 provided by the appropriation, allocation, or source
24 30 of the funds.
24 31 8. The department, in cooperation with the
24 32 entities identified in this section as having control
24 33 over any of the accounts within the fund, shall submit
24 34 an annual report to the governor and the general
24 35 assembly regarding the status of the health care
24 36 workforce support initiative, including the balance
24 37 remaining in and appropriations from the health care
24 38 workforce shortage fund and the accounts within the
24 39 fund.
24 40 9. This section is repealed June 30, 2014.
24 41 Sec. 46. NEW SECTION. 135.176 MEDICAL RESIDENCY
24 42 TRAINING STATE MATCHING GRANTS PROGRAM == REPEAL.
24 43 1. The department shall establish a medical
24 44 residency training state matching grants program to
24 45 provide matching state funding to sponsors of
24 46 accredited graduate medical education residency
24 47 programs in this state to establish, expand, or
24 48 support medical residency training programs. Funding
24 49 for the program may be provided through the health
24 50 care workforce shortage fund or the medical residency



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25 1 training account created in section 135.175. For the
25 2 purposes of this section, unless the context otherwise
25 3 requires, "accredited" means a graduate medical
25 4 education program approved by the accreditation
25 5 council for graduate medical education or the American
25 6 osteopathic association. The grant funds may be used
25 7 to support medical residency programs through any of
25 8 the following:

25 9 a. The establishment of new or alternative campus
25 10 accredited medical residency training programs. For
25 11 the purposes of this paragraph, "new or alternative
25 12 campus accredited medical residency training program"
25 13 means a program that is accredited by a recognized
25 14 entity approved for such purpose by the accreditation
25 15 council for graduate medical education or the American
25 16 osteopathic association with the exception that a new
25 17 medical residency training program that, by reason of
25 18 an insufficient period of operation is not eligible
25 19 for accreditation on or before the date of submission
25 20 of an application for a grant, may be deemed
25 21 accredited if the accreditation council for graduate
25 22 medical education or the American osteopathic
25 23 association finds, after consultation with the
25 24 appropriate accreditation entity, that there is
25 25 reasonable assurance that the program will meet the
25 26 accreditation standards of the entity prior to the
25 27 date of graduation of the initial class in the
25 28 program.

25 29 b. The provision of new residency positions within
25 30 existing accredited medical residency or fellowship
25 31 training programs.

25 32 c. The funding of residency positions which are in
25 33 excess of the federal residency cap. For the purposes
25 34 of this paragraph, "in excess of the federal residency
25 35 cap" means a residency position for which no federal
25 36 Medicare funding is available because the residency
25 37 position is a position beyond the cap for residency
25 38 positions established by the federal Balanced Budget
25 39 Act of 1997, Pub. L. No. 105=33.

25 40 2. The department shall adopt rules pursuant to
25 41 chapter 17A to provide for all of the following:

25 42 a. Eligibility requirements for and qualifications
25 43 of a sponsor of an accredited graduate medical
25 44 education residency program to receive a grant. The
25 45 requirements and qualifications shall include but are
25 46 not limited to all of the following:

25 47 (1) Only a sponsor that establishes a dedicated
25 48 fund to support a residency program that meets the
25 49 specifications of this section shall be eligible to
25 50 receive a matching grant. A sponsor funding residency



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26 1 positions in excess of the federal residency cap, as
26 2 defined in subsection 1, paragraph "c", exclusive of
26 3 funds provided under the medical residency training
26 4 state matching grants program established in this
26 5 section, is deemed to have satisfied this requirement
26 6 and shall be eligible for a matching grant equal to
26 7 the amount of funds expended for such residency
26 8 positions, subject to the limitation on the maximum
26 9 award of grant funds specified in paragraph "e".
26 10 (2) A sponsor shall demonstrate through documented
26 11 financial information as prescribed by rule of the
26 12 department, that funds have been reserved and will be
26 13 expended by the sponsor in the amount required to
26 14 provide matching funds for each residency proposed in
26 15 the request for state matching funds.
26 16 (3) A sponsor shall demonstrate through objective
26 17 evidence as prescribed by rule of the department, a
26 18 need for such residency program in the state.
26 19 b. The application process for the grant.
26 20 c. Criteria for preference in awarding of the
26 21 grants, including preference in the residency
26 22 specialty.
26 23 d. Determination of the amount of a grant. The
26 24 total amount of a grant awarded to a sponsor shall be
26 25 limited to no more than twenty=five percent of the
26 26 amount that the sponsor has demonstrated through
26 27 documented financial information has been reserved and
26 28 will be expended by the sponsor for each residency
26 29 sponsored for the purpose of the residency program.
26 30 e. The maximum award of grant funds to a
26 31 particular individual sponsor per year. An individual
26 32 sponsor shall not receive more than twenty=five
26 33 percent of the state matching funds available each
26 34 year to support the program. However, if less than
26 35 ninety=five percent of the available funds has been
26 36 awarded in a given year, a sponsor may receive more
26 37 than twenty=five percent of the state matching funds
26 38 available if total funds awarded do not exceed
26 39 ninety=five percent of the available funds. If more
26 40 than one sponsor meets the requirements of this
26 41 section and has established, expanded, or supported a
26 42 graduate medical residency training program, as
26 43 specified in subsection 1, in excess of the sponsor's
26 44 twenty=five percent maximum share of state matching
26 45 funds, the state matching funds shall be divided
26 46 proportionately among such sponsors.
26 47 f. Use of the funds awarded. Funds may be used to
26 48 pay the costs of establishing, expanding, or
26 49 supporting an accredited graduate medical education
26 50 program as specified in this section, including but



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27 1 not limited to the costs associated with residency
27 2 stipends and physician faculty stipends.
27 3 3. This section is repealed June 30, 2014.
27 4 Sec. 47. NEW SECTION. 135.177 PHYSICIAN
27 5 ASSISTANT MENTAL HEALTH FELLOWSHIP PROGRAM == REPEAL.
27 6 1. The department, in cooperation with the college
27 7 student aid commission, shall establish a physician
27 8 assistant mental health fellowship program in
27 9 accordance with this section. Funding for the program
27 10 may be provided through the health care workforce
27 11 shortage fund or the physician assistant mental health
27 12 fellowship program account created in section 135.175.
27 13 The purpose of the program is to determine the effect
27 14 of specialized training and support for physician
27 15 assistants in providing mental health services on
27 16 addressing Iowa's shortage of mental health
27 17 professionals.
27 18 2. The program shall provide for all of the
27 19 following:
27 20 a. Collaboration with a hospital serving a
27 21 thirteen=county area in central Iowa that provides a
27 22 clinic at the Iowa veterans home, a private nonprofit
27 23 agency headquartered in a city with a population of
27 24 more than one hundred ninety thousand that operates a
27 25 freestanding psychiatric medical institution for
27 26 children, a private university with a medical school
27 27 educating osteopathic physicians located in a city
27 28 with a population of more than one hundred ninety
27 29 thousand, the Iowa veterans home, and any other
27 30 clinical partner designated for the program.
27 31 Population figures used in this paragraph refer to the
27 32 most recent certified federal census. The clinical
27 33 partners shall provide supervision, clinical
27 34 experience, training, and other support for the
27 35 program and physician assistant students participating
27 36 in the program.
27 37 b. Elderly, youth, and general population clinical
27 38 experiences.
27 39 c. A fellowship of twelve months for three
27 40 physician assistant students, annually.
27 41 d. Supervision of students participating in the
27 42 program provided by the university and the other
27 43 clinical partners participating in the program.
27 44 e. A student participating in the program shall be
27 45 eligible for a stipend of not more than fifty thousand
27 46 dollars for the twelve months of the fellowship plus
27 47 related fringe benefits. In addition, a student who
27 48 completes the program and practices in Iowa in a
27 49 mental health professional shortage area, as defined
27 50 in section 135.80, shall be eligible for up to twenty



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28 1 thousand dollars in loan forgiveness. The stipend and
28 2 loan forgiveness provisions shall be determined by the
28 3 department and the college student aid commission, in
28 4 consultation with the clinical partners.

28 5 f. The state and private entity clinical partners
28 6 shall regularly evaluate and document their
28 7 experiences with the approaches utilized and outcomes
28 8 achieved by the program to identify an optimal model
28 9 for operating the program. The evaluation process
28 10 shall include but is not limited to identifying ways
28 11 the program's clinical and training components could
28 12 be modified to facilitate other student and practicing
28 13 physician assistants specializing as mental health
28 14 professionals.

28 15 3. This section is repealed June 30, 2014.

28 16 Sec. 48. Section 261.2, Code 2009, is amended by
28 17 adding the following new subsection:

28 18 NEW SUBSECTION. 10. Administer the health care
28 19 professional incentive payment program established in
28 20 section 261.128 and the nursing workforce shortage
28 21 initiative created in section 261.129. This
28 22 subsection is repealed June 30, 2014.

28 23 Sec. 49. Section 261.23, subsection 1, Code 2009,
28 24 is amended to read as follows:

28 25 1. A registered nurse and nurse educator loan
28 26 forgiveness program is established to be administered
28 27 by the commission. The program shall consist of loan
28 28 forgiveness for eligible federally guaranteed loans
28 29 for registered nurses and nurse educators who practice
28 30 or teach in this state. For purposes of this section,
28 31 unless the context otherwise requires, "nurse
28 32 educator" means a registered nurse who holds a
28 33 master's degree or doctorate degree and is employed as
28 34 a faculty member who teaches nursing as provided in
28 35 655 IAC 2.6(152) at a community college, an accredited
28 36 private institution, or an institution of higher
28 37 education governed by the state board of regents.

28 38 Sec. 50. Section 261.23, subsection 2, paragraph
28 39 c, Code 2009, is amended to read as follows:

28 40 c. Complete and return, on a form approved by the
28 41 commission, an affidavit of practice verifying that
28 42 the applicant is a registered nurse practicing in this
28 43 state or a nurse educator teaching at a community
28 44 college, an accredited private institution, or an
28 45 institution of higher learning governed by the state
28 46 board of regents.

28 47 Sec. 51. NEW SECTION. 261.128 HEALTH CARE
28 48 PROFESSIONAL INCENTIVE PAYMENT PROGRAM == REPEAL.

28 49 1. The commission shall establish a health care
28 50 professional incentive payment program to recruit and



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29 1 retain health care professionals in this state.
29 2 Funding for the program may be provided through the
29 3 health care workforce shortage fund or the health care
29 4 professional and nurse workforce shortage account
29 5 created in section 135.175.
29 6 2. The commission shall administer the incentive
29 7 payment program with the assistance of Des Moines
29 8 university == osteopathic medical center.
29 9 3. The commission, with the assistance of Des
29 10 Moines university == osteopathic medical center, shall
29 11 adopt rules pursuant to chapter 17A, relating to the
29 12 establishment and administration of the health care
29 13 professional incentive payment program. The rules
29 14 adopted shall address all of the following:
29 15 a. Eligibility and qualification requirements for
29 16 a health care professional, a community, and a health
29 17 care employer to participate in the incentive payment
29 18 program. Any community in the state and all health
29 19 care specialties shall be considered for
29 20 participation. However, health care employers located
29 21 in and communities that are designated as medically
29 22 underserved areas or populations or that are
29 23 designated as health professional shortage areas by
29 24 the health resources and services administration of
29 25 the United States department of health and human
29 26 services shall have first priority in the awarding of
29 27 incentive payments.
29 28 (1) To be eligible, a health care professional at
29 29 a minimum must not have any unserved obligations to a
29 30 federal, state, or local government or other entity
29 31 that would prevent compliance with obligations under
29 32 the agreement for the incentive payment; must have a
29 33 current and unrestricted license to practice the
29 34 professional's respective profession; and must be able
29 35 to begin full-time clinical practice upon signing an
29 36 agreement for an incentive payment.
29 37 (2) To be eligible, a community must provide a
29 38 clinical setting for full-time practice of a health
29 39 care professional and must provide a fifty thousand
29 40 dollar matching contribution for a physician and a
29 41 fifteen thousand dollar matching contribution for any
29 42 other health care professional to receive an equal
29 43 amount of state matching funds.
29 44 (3) To be eligible, a health care employer must
29 45 provide a clinical setting for a full-time practice of
29 46 a health care professional and must provide a fifty
29 47 thousand dollar matching contribution for a physician
29 48 and a fifteen thousand dollar matching contribution
29 49 for any other health care professional to receive an
29 50 equal amount of state matching funds.



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30 1 b. The process for awarding incentive payments.
30 2 The commission shall receive recommendations from the
30 3 department of public health regarding selection of
30 4 incentive payment recipients. The process shall
30 5 require each recipient to enter into an agreement with
30 6 the commission that specifies the obligations of the
30 7 recipient and the commission prior to receiving the
30 8 incentive payment.

30 9 c. Public awareness regarding the program
30 10 including notification of potential health care
30 11 professionals, communities, and health care employers
30 12 about the program and dissemination of applications to
30 13 appropriate entities.

30 14 d. Measures regarding all of the following:
30 15 (1) The amount of the incentive payment and the
30 16 specifics of obligated service for an incentive
30 17 payment recipient. An incentive payment recipient
30 18 shall agree to provide service in full-time clinical
30 19 practice for a minimum of four consecutive years. If
30 20 an incentive payment recipient is sponsored by a
30 21 community or health care employer, the obligated
30 22 service shall be provided in the sponsoring community
30 23 or health care employer location. An incentive
30 24 payment recipient sponsored by a health care employer
30 25 shall agree to provide health care services as
30 26 specified in an employment agreement with the
30 27 sponsoring health care employer.

30 28 (2) Determination of the conditions of the
30 29 incentive payment applicable to an incentive payment
30 30 recipient. At the time of approval for participation
30 31 in the program, an incentive payment recipient shall
30 32 be required to submit proof of indebtedness incurred
30 33 as the result of obtaining loans to pay for
30 34 educational costs resulting in a degree in health
30 35 sciences. For the purposes of this subparagraph,
30 36 "indebtedness" means debt incurred from obtaining a
30 37 government or commercial loan for actual costs paid
30 38 for tuition, reasonable education expenses, and
30 39 reasonable living expenses related to the graduate,
30 40 undergraduate, or associate education of a health care
30 41 professional.

30 42 (3) Enforcement of the state's rights under an
30 43 incentive payment agreement, including the
30 44 commencement of any court action. A recipient who
30 45 fails to fulfill the requirements of the incentive
30 46 payment agreement is subject to repayment of the
30 47 incentive payment in an amount equal to the amount of
30 48 the incentive payment. A recipient who fails to meet
30 49 the requirements of the incentive payment agreement
30 50 may also be subject to repayment of moneys advanced by



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31 1 a community or health care employer as provided in any
31 2 agreement with the community or employer.
31 3 (4) A process for monitoring compliance with
31 4 eligibility requirements, obligated service
31 5 provisions, and use of funds by recipients to verify
31 6 eligibility of recipients and to ensure that state,
31 7 federal, and other matching funds are used in
31 8 accordance with program requirements.
31 9 (5) The use of the funds received. Any portion of
31 10 the incentive payment that is attributable to federal
31 11 funds shall be used as required by the federal entity
31 12 providing the funds. Any portion of the incentive
31 13 payment that is attributable to state funds shall
31 14 first be used toward payment of any outstanding loan
31 15 indebtedness of the recipient. The remaining portion
31 16 of the incentive payment shall be used as specified in
31 17 the incentive payment agreement.
31 18 4. A recipient is responsible for reporting on
31 19 federal income tax forms any amount received through
31 20 the program, to the extent required by federal law.
31 21 Incentive payments received through the program by a
31 22 recipient in compliance with the requirements of the
31 23 incentive payment program are exempt from state income
31 24 taxation.
31 25 5. This section is repealed June 30, 2014.
31 26 Sec. 52. NEW SECTION. 261.129 NURSING WORKFORCE
31 27 SHORTAGE INITIATIVE == REPEAL.
31 28 1. NURSE EDUCATOR INCENTIVE PAYMENT PROGRAM.
31 29 a. The commission shall establish a nurse educator
31 30 incentive payment program. Funding for the program
31 31 may be provided through the health care workforce
31 32 shortage fund or the health care professional and
31 33 nurse workforce shortage initiative account created in
31 34 section 135.175. For the purposes of this subsection,
31 35 "nurse educator" means a registered nurse who holds a
31 36 master's degree or doctorate degree and is employed as
31 37 a faculty member who teaches nursing in a nursing
31 38 education program as provided in 655 IAC 2.6 at a
31 39 community college, an accredited private institution,
31 40 or an institution of higher education governed by the
31 41 state board of regents.
31 42 b. The program shall consist of incentive payments
31 43 to recruit and retain nurse educators. The program
31 44 shall provide for incentive payments of up to twenty
31 45 thousand dollars for a nurse educator who remains
31 46 teaching in a qualifying teaching position for a
31 47 period of not less than four consecutive academic
31 48 years.
31 49 c. The nurse educator and the commission shall
31 50 enter into an agreement specifying the obligations of



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32 1 the nurse educator and the commission. If the nurse
32 2 educator leaves the qualifying teaching position prior
32 3 to teaching for four consecutive academic years, the
32 4 nurse educator shall be liable to repay the incentive
32 5 payment amount to the state, plus interest as
32 6 specified by rule. However, if the nurse educator
32 7 leaves the qualifying teaching position involuntarily,
32 8 the nurse educator shall be liable to repay only a pro
32 9 rata amount of the incentive payment based on
32 10 incompleting years of service.

32 11 d. The commission, in consultation with the
32 12 department of public health, shall adopt rules
32 13 pursuant to chapter 17A relating to the establishment
32 14 and administration of the nurse educator incentive
32 15 payment program. The rules shall include provisions
32 16 specifying what constitutes a qualifying teaching
32 17 position.

32 18 2. NURSING FACULTY FELLOWSHIP PROGRAM.

32 19 a. The commission shall establish a nursing
32 20 faculty fellowship program to provide funds to nursing
32 21 schools in the state, including but not limited to
32 22 nursing schools located at community colleges, for
32 23 fellowships for individuals employed in qualifying
32 24 positions on the nursing faculty. Funding for the
32 25 program may be provided through the health care
32 26 workforce shortage fund or the health care
32 27 professional and nurse workforce shortage initiative
32 28 account created in section 135.175. The program shall
32 29 be designed to assist nursing schools in filling
32 30 vacancies in qualifying positions throughout the
32 31 state.

32 32 b. The commission, in consultation with the
32 33 department of public health and in cooperation with
32 34 nursing schools throughout the state, shall develop a
32 35 distribution formula which shall provide that no more
32 36 than thirty percent of the available moneys are
32 37 awarded to a single nursing school. Additionally, the
32 38 program shall limit funding for a qualifying position
32 39 in a nursing school to no more than ten thousand
32 40 dollars per year for up to three years.

32 41 c. The commission, in consultation with the
32 42 department of public health, shall adopt rules
32 43 pursuant to chapter 17A to administer the program.
32 44 The rules shall include provisions specifying what
32 45 constitutes a qualifying position at a nursing school.

32 46 d. In determining eligibility for a fellowship,
32 47 the commission shall consider all of the following:

32 48 (1) The length of time a qualifying position has
32 49 gone unfilled at a nursing school.

32 50 (2) Documented recruiting efforts by a nursing



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33 1 school.
33 2 (3) The geographic location of a nursing school.
33 3 (4) The type of nursing program offered at the
33 4 nursing school, including associate, bachelor's,
33 5 master's, or doctoral degrees in nursing, and the need
33 6 for the specific nursing program in the state.
33 7 3. REPEAL. This section is repealed June 30,
33 8 2014.
33 9 Sec. 53. HEALTH CARE WORKFORCE INITIATIVES ==
33 10 FEDERAL FUNDING. The department of public health
33 11 shall work with the department of workforce
33 12 development and health care stakeholders to apply for
33 13 federal moneys allocated in the federal American
33 14 Recovery and Reinvestment Act of 2009 for health care
33 15 workforce initiatives that are available through a
33 16 competitive grant process administered by the health
33 17 resources and services administration of the United
33 18 States department of health and human services or the
33 19 United States department of health and human services.
33 20 Any federal moneys received shall be deposited in the
33 21 health care workforce shortage fund created in section
33 22 135.175 as enacted by this division of this Act and
33 23 shall be used for the purposes specified for the fund
33 24 and for the purposes specified in the federal American
33 25 Recovery and Reinvestment Act of 2009.
33 26 Sec. 54. IMPLEMENTATION. This division of this
33 27 Act shall be implemented only to the extent funding is
33 28 available.
33 29 Sec. 55. CODE EDITOR DIRECTIVES. The Code editor
33 30 shall do all of the following:
33 31 1. Create a new division in chapter 135 codifying
33 32 section 135.175, as enacted in this division of this
33 33 Act, as the health care workforce support initiative
33 34 and fund.
33 35 2. Create a new division in chapter 135 codifying
33 36 sections 135.176 and 135.177, as enacted in this
33 37 division of this Act, as health care workforce
33 38 support.
33 39 3. Create a new division in chapter 261 codifying
33 40 section 261.128, as enacted in this division of this
33 41 Act, as the health care professional incentive payment
33 42 program.
33 43 4. Create a new division in chapter 261 codifying
33 44 section 261.129, as enacted in this division of this
33 45 Act, as the nursing workforce shortage initiative.
33 46 DIVISION VI
33 47 GIFTS == REPORTING OF SANCTIONS
33 48 Sec. 56. REPORTING OF SANCTIONS FOR GIFTS. The
33 49 health profession boards established in chapter 147
33 50 shall report to the general assembly by January 15,



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34 1 2010, any public information regarding sanctions
34 2 levied against a health care professional for receipt
34 3 of gifts in a manner not in compliance with the
34 4 requirements and limitations of the respective health
34 5 profession as established by the respective board.
34 6
34 7 DIVISION VII
34 8 HEALTH CARE TRANSPARENCY
34 9 Sec. 57. NEW SECTION. 135.166 HEALTH CARE DATA
34 10 == COLLECTION FROM HOSPITALS.
34 11 1. The department of public health shall enter
34 12 into a memorandum of understanding to utilize the Iowa
34 13 hospital association to act as the department's
34 14 intermediary in collecting, maintaining, and
34 15 disseminating hospital inpatient, outpatient, and
34 16 ambulatory information, as initially authorized in
34 17 1996 Iowa Acts, chapter 1212, section 5, subsection 1,
34 18 paragraph "a", subparagraph (4) and 641 IAC 177.3.
34 19 2. The memorandum of understanding shall include
34 20 but is not limited to provisions that address the
34 21 duties of the department and the Iowa hospital
34 22 association regarding the collection, reporting,
34 23 disclosure, storage, and confidentiality of the data.>
34 24 #2. Title page, by striking lines 2 and inserting
34 25 the following: <care coverage, providing
34 26 retroactive>.
34 27 #3. Title page, line 3, by inserting after the
34 28 word <dates> the following: <and providing repeals>.
34 29 #4. By renumbering as necessary.
34 30 SF 389.H
34 31 av:pf/cm/25



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1 1 Amend the House amendment, S=3280, to Senate File
1 2 475, as passed by the Senate, as follows:
1 3 #1. Page 2, line 1, by inserting after the word
1 4 <regents> the following: <and the state department of
1 5 transportation>.
1 6 #2. Page 2, line 5, by striking the words <an
1 7 agreement> and inserting the following: <agreements>.
1 8 #3. Page 2, line 6, by inserting after the word
1 9 <regents> the following: <and the state department of
1 10 transportation>.
1 11 #4. Page 2, line 10, by inserting after the word
1 12 <regents> the following: <and the state department of
1 13 transportation>.
1 14 #5. Page 2, line 10, by inserting after the word
1 15 <institution> the following: <or state department of
1 16 transportation, as applicable,>.
1 17 #6. Page 2, line 25, by inserting after the word
1 18 <regents> the following: <or the state department of
1 19 transportation>.
1 20 #7. Page 2, line 27, by striking the words
1 21 <department or> and inserting the following:
1 22 <department,>.
1 23 #8. Page 2, line 28, by inserting after the word
1 24 <regents> the following: <, or the state department
1 25 of transportation,>.
1 26
1 27
1 28
1 29 JEFF DANIELSON
1 30 SF 475.507 83
1 31 ec/jp/24390
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1 1 Amend Senate File 178 as follows:
1 2 #1. By striking everything after the enacting
1 3 clause and inserting the following:
1 4 <Section 1. NEW SECTION. 714H.1 TITLE.
1 5 This chapter shall be known and may be cited as the
1 6 "Private Right of Action for Consumer Frauds Act".
1 7 Sec. 2. NEW SECTION. 714H.2 DEFINITIONS.
1 8 1. "Actual damages" means all compensatory damages
1 9 proximately caused by the prohibited practice or act
1 10 that are reasonably ascertainable in amount. "Actual
1 11 damages" does not include damages for bodily injury,
1 12 pain and suffering, mental distress, or loss of
1 13 consortium, loss of life, or loss of enjoyment of
1 14 life.
1 15 2. "Advertisement" means the same as defined in
1 16 section 714.16.
1 17 3. "Consumer" means a natural person or the
1 18 person's legal representative.
1 19 4. "Consumer merchandise" means merchandise
1 20 offered for sale or lease, or sold or leased,
1 21 primarily for personal, family, or household purposes.
1 22 5. "Deception" means an act or practice that is
1 23 likely to mislead a substantial number of consumers as
1 24 to a material fact or facts.
1 25 6. "Merchandise" means the same as defined in
1 26 section 714.16.
1 27 7. "Person" means the same as defined in section
1 28 714.16.
1 29 8. "Sale" means any sale or offer for sale of
1 30 consumer merchandise for cash or credit.
1 31 9. "Unfair practice" means the same as defined in
1 32 section 714.16.
1 33 Sec. 3. NEW SECTION. 714H.3 PROHIBITED PRACTICES
1 34 AND ACTS.
1 35 1. A person shall not engage in a practice or act
1 36 the person knows or reasonably should know is an
1 37 unfair practice, deception, fraud, false pretense, or
1 38 false promise, or the misrepresentation, concealment,
1 39 suppression, or omission of a material fact, with the
1 40 intent that others rely upon the unfair practice,
1 41 deception, fraud, false pretense, false promise,
1 42 misrepresentation, concealment, suppression, or
1 43 omission in connection with the advertisement, sale,
1 44 or lease of consumer merchandise, or the solicitation
1 45 of contributions for charitable purposes. For the
1 46 purposes of this chapter, a claimant alleging an
1 47 unfair practice, deception, fraud, false pretense,
1 48 false promise, or misrepresentation must prove that
1 49 the prohibited practice related to a material fact or
1 50 facts. "Solicitations of contributions for charitable



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2 1 purposes" does not include solicitations made on
2 2 behalf of a political organization as defined in
2 3 section 13C.1, solicitations made on behalf of a
2 4 religious organization as defined in section 13C.1,
2 5 solicitations made on behalf of a state, regionally,
2 6 or nationally accredited college or university, or
2 7 solicitations made on behalf of a nonprofit foundation
2 8 benefiting a state, regionally, or nationally
2 9 accredited college or university subject to section
2 10 509(a)(1) or 509(a)(3) of the Internal Revenue Code of
2 11 1986.

2 12 2. A person shall not engage in any practice or
2 13 act that is in violation of any of the following:

2 14 a. Section 321.69.
2 15 b. Chapter 516D.
2 16 c. Section 516E.5, 516E.9, or 516E.10.
2 17 d. Chapter 555A.
2 18 e. Section 714.16, subsection 2, paragraphs "b"
2 19 through "n".
2 20 f. Chapter 714A.

2 21 Sec. 4. NEW SECTION. 714H.4 EXCLUSIONS.

2 22 1. This chapter shall not apply to any of the
2 23 following:

2 24 a. Merchandise offered or provided by any of the
2 25 following persons, including business entities
2 26 organized under Title XII by those persons and the
2 27 officers, directors, employees, and agents of those
2 28 persons or business entities, pursuant to a profession
2 29 or business for which they are licensed or registered:

2 30 (1) Insurance companies subject to Title XIII.
2 31 (2) Attorneys licensed to practice law in this
2 32 state.
2 33 (3) Financial institutions which includes any bank
2 34 incorporated under the provisions of any state or
2 35 federal law, any savings and loan association or
2 36 savings bank incorporated under the provisions of any
2 37 state or federal law, and any credit union organized
2 38 under the provisions of any state or federal law, and
2 39 any affiliate or subsidiary of a bank, savings and
2 40 loan association, savings bank, or credit union.
2 41 (4) Persons or facilities licensed, certified, or
2 42 registered under chapters 135B, 135C, 135J, 148, 148A,
2 43 148B, 148C, 149, 151, 152, 152A, 152B, 153, 154, 154B,
2 44 154C, 154D, 155A, 156, 169, 522B, 542, 542B, 543B,
2 45 544A, or 544B.

2 46 b. Advertising by a retailer for a product, other
2 47 than a drug or other product claiming to have a
2 48 health-related benefit or use, if the advertising is
2 49 prepared by a supplier, unless the retailer
2 50 participated in the preparation of the advertisement



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3 1 or knew or should have known that the advertisement
3 2 was deceptive, false, or misleading.
3 3 c. In connection with an advertisement that
3 4 violates this chapter, the newspaper, magazine,
3 5 publication, or other print media in which the
3 6 advertisement appears, including the publisher of the
3 7 newspaper, magazine, publication, or other print media
3 8 in which the advertisement appears, or the radio
3 9 station, television station, or other electronic media
3 10 which disseminates the advertisement, including an
3 11 employee, agent, or representative of the publisher,
3 12 newspaper, magazine, publication or other print media,
3 13 or the radio station, television station, or other
3 14 electronic media.
3 15 d. The provision of local exchange carrier
3 16 telephone service pursuant to a certificate issued
3 17 under section 476.29.
3 18 e. Public utilities as defined in section 476.1
3 19 that furnish gas by a piped distribution system or
3 20 electricity to the public for compensation.
3 21 f. Any advertisement that complies with the
3 22 statutes, rules, and regulations of the federal trade
3 23 commission.
3 24 g. Conduct that is required or permitted by the
3 25 orders or rules of, or a statute administered by, a
3 26 federal, state, or local governmental agency.
3 27 h. An affirmative act that violates this chapter
3 28 but is specifically required by other applicable law,
3 29 to the extent that the actor could not reasonably
3 30 avoid a violation of this chapter.
3 31 i. In any action relating to a charitable
3 32 solicitation, an individual who has engaged in the
3 33 charitable solicitation as an unpaid, uncompensated
3 34 volunteer and who does not receive monetary gain of
3 35 any sort from engaging in the solicitation.
3 36 j. The provision of cable television service or
3 37 video service pursuant to a franchise under section
3 38 364.2 or 477A.2.
3 39 k. A corporation holding one or more industrial
3 40 loan licenses pursuant to chapter 536A and employing
3 41 fewer than sixty full-time employees or a corporation
3 42 holding one or more regulated loan licenses pursuant
3 43 to chapter 536 and employing fewer than sixty
3 44 full-time employees. For purposes of this paragraph,
3 45 "corporation" means the same as defined in section
3 46 536A.2.
3 47 2. "Material fact" as used in this chapter does
3 48 not include repairs of damage to, adjustments on, or
3 49 replacements of parts with new parts of otherwise new
3 50 merchandise if the repairs, adjustments, or



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4 1 replacements are made to achieve compliance with
4 2 factory specifications and are made before sale of the
4 3 merchandise at retail and the actual cost of any labor
4 4 and parts charged to or performed by a retailer for
4 5 any such repairs, adjustments, and parts does not
4 6 exceed three hundred dollars or ten percent of the
4 7 actual cost to a retailer including freight of the
4 8 merchandise, whichever is less, provided that the
4 9 seller posts in a conspicuous place notice that
4 10 repairs, adjustments, or replacements will be
4 11 disclosed upon request. The exclusion provided in
4 12 this subsection does not apply to the concealment,
4 13 suppression, or omission of a material fact if the
4 14 purchaser requests disclosure of any repair,
4 15 adjustment, or replacement.

4 16 Sec. 5. NEW SECTION. 714H.5 PRIVATE RIGHT OF
4 17 ACTION.

4 18 1. A consumer who suffers an ascertainable loss of
4 19 money or property as the result of a prohibited
4 20 practice or act in violation of this chapter may bring
4 21 an action at law to recover actual damages. The court
4 22 may order such equitable relief as it deems necessary
4 23 to protect the public from further violations,
4 24 including temporary and permanent injunctive relief.

4 25 2. If the court finds that a person has violated
4 26 this chapter and the consumer is awarded actual
4 27 damages, the court shall award to the consumer the
4 28 costs of the action and to the consumer's attorney
4 29 reasonable fees. Reasonable attorney fees shall be
4 30 determined by the value of the time reasonably
4 31 expended by the attorney including but not limited to
4 32 consideration of the following factors:

- 4 33 a. The time and labor required.
- 4 34 b. The novelty and difficulty of the issues in the
4 35 case.
- 4 36 c. The skills required to perform the legal
4 37 services properly.
- 4 38 d. The preclusion of other employment by the
4 39 attorney due to the attorney's acceptance of the case.
- 4 40 e. The customary fee.
- 4 41 f. Whether the fee is fixed or contingent.
- 4 42 g. The time limitations imposed by the client or
4 43 the circumstances of the case.
- 4 44 h. The amount of money involved in the case and
4 45 the results obtained.
- 4 46 i. The experience, reputation, and ability of the
4 47 attorney.
- 4 48 j. The undesirability of the case.
- 4 49 k. The nature and length of the professional
4 50 relationship between the attorney and the client.



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- 5 1 1. Attorney fee awards in similar cases.
5 2 3. In order to recover damages, a claim under this
5 3 section shall be proved by a preponderance of the
5 4 evidence.
5 5 4. If the finder of fact finds by a preponderance
5 6 of clear, convincing, and satisfactory evidence that a
5 7 prohibited practice or act in violation of this
5 8 chapter constitutes willful and wanton disregard for
5 9 the rights or safety of another, in addition to an
5 10 award of actual damages, statutory damages up to three
5 11 times the amount of actual damages may be awarded to a
5 12 prevailing consumer.
5 13 5. An action pursuant to this chapter must be
5 14 brought within two years of the occurrence of the last
5 15 event giving rise to the cause of action under this
5 16 chapter or within two years of the discovery of the
5 17 violation of this chapter by the person bringing the
5 18 action, whichever is later.
5 19 6. This section shall not affect a consumer's
5 20 right to seek relief under any other theory of law.
5 21 7. A person shall not be held liable in any action
5 22 brought under this section for a violation of this
5 23 chapter if the person shows by a preponderance of the
5 24 evidence that the violation was not intentional and
5 25 resulted from a bona fide error notwithstanding the
5 26 maintenance of procedures reasonably adopted to avoid
5 27 the error.
5 28 Sec. 6. NEW SECTION. 714H.6 ATTORNEY GENERAL
5 29 NOTIFICATION.
5 30 1. A party filing a petition, counterclaim,
5 31 cross=petition, or pleading, or any count thereof, in
5 32 intervention alleging a violation under this chapter,
5 33 within seven days following the date of filing such
5 34 pleading, shall provide a copy to the attorney general
5 35 and, within seven days following entry of any final
5 36 judgment in the action, shall provide a copy of the
5 37 judgment to the attorney general.
5 38 2. A party appealing to district court a small
5 39 claims order or judgment involving an issue raised
5 40 under this chapter, within seven days of providing
5 41 notice of the appeal, shall notify the attorney
5 42 general in writing and provide a copy of the pleading
5 43 raising the issue and a copy of the small claims court
5 44 order or judgment.
5 45 3. A party appealing an order or judgment
5 46 involving an issue raised under this chapter, within
5 47 seven days following the date such notice of appeal is
5 48 filed with the court, shall notify the attorney
5 49 general in writing and provide a copy of the pleading
5 50 raising the issue and a copy of the court order or



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6 1 judgment being appealed.
6 2 4. Upon timely application to the court in which
6 3 an action involving an issue raised under this chapter
6 4 is pending, the attorney general may intervene as a
6 5 party at any time or may be heard at any time. The
6 6 attorney general's failure to intervene shall not
6 7 preclude the attorney general from bringing a separate
6 8 enforcement action.
6 9 5. All copies of pleadings, orders, judgments, and
6 10 notices required by this section to be sent to the
6 11 attorney general shall be sent by certified mail
6 12 unless the attorney general has previously been
6 13 provided such copies of pleadings, orders, judgments,
6 14 or notices in the same action by certified mail, in
6 15 which case subsequent mailings may be made by regular
6 16 mail. Failure to provide the required mailings to the
6 17 attorney general shall not be grounds for dismissal of
6 18 an action under this chapter, but shall be grounds for
6 19 a subsequent action by the attorney general to vacate
6 20 or modify the judgment.
6 21 Sec. 7. NEW SECTION. 714H.7 CLASS ACTIONS.
6 22 A class action lawsuit alleging a violation of this
6 23 chapter shall not be filed with a court unless it has
6 24 been approved by the attorney general. The attorney
6 25 general shall approve the filing of a class action
6 26 lawsuit alleging a violation of this chapter unless
6 27 the attorney general determines that the lawsuit is
6 28 frivolous. This section shall not affect the
6 29 requirements of any other law or of the Iowa rules of
6 30 civil procedure relating to class action lawsuits.
6 31 Sec. 8. NEW SECTION. 714H.8 SEVERABILITY CLAUSE.
6 32 If any provision of this chapter or its application
6 33 to any person or circumstances is held invalid, the
6 34 invalidity does not affect other provisions or
6 35 applications of this chapter that can be given effect
6 36 without the invalid provision or application, and to
6 37 this end the provisions of this chapter are severable.
6 38 Sec. 9. APPLICABILITY. This Act applies to causes
6 39 of actions accruing on or after the effective date of
6 40 this Act.>
6 41 #2. Title page, by striking lines 1 and 2 and
6 42 inserting the following: <An Act relating to a
6 43 private right of action for certain consumer fraud
6 44 violations and including an applicability provision.>
6 45
6 46
6 47
6 48 KEITH A. KREIMAN
6 49 SF 178.701 83
6 50 rh/rj/24408



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Senate Amendment 3299

PAG LIN

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1 1 Amend the amendment, S=3287, to House File 809, as
1 2 amended, passed, and reprinted by the House, as
1 3 follows:
1 4 #1. Page 4, by inserting after line 28 the
1 5 following:
1 6 <#____. By striking page 19, line 29, through page
1 7 20, line 1.>
1 8 #2. Page 27, by striking lines 2 through 11 and
1 9 inserting the following: <2, if enacted, is amended
1 10 by striking the section and inserting in lieu thereof
1 11 the following:
1 12 SEC. 2. OFFICE OF CONSUMER ADVOCATE. There is
1 13 appropriated from the department of commerce revolving
1 14 fund created in section 546.12, if enacted by 2009
1 15 Iowa Acts, House File 809, to the office of consumer
1 16 advocate of the department of justice for the fiscal
1 17 year beginning July 1, 2009, and ending June 30, 2010,
1 18 the following amount, or so much thereof as is
1 19 necessary, to be used for the purposes designated:
1 20 For salaries, support, maintenance, miscellaneous
1 21 purposes, and for not more than the following
1 22 full-time equivalent positions:
1 23 ..... $ 3,138,888
1 24 ..... FTEs 27.00>
1 25 #3. By renumbering as necessary.
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1 28
1 29 JEFF DANIELSON
1 30 HF 809.716 83
1 31 ec/tm/24533
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