

This update was provided by Amy Campbell, INA Lobbyist, The Advocacy Cooperative.

It is hard to believe that the Iowa Legislature has only been in session for 45 days, given the number of hefty policy issues already checked off legislative “to-do” lists. The Governor’s top priority, school choice (aka vouchers), passed in the first weeks of session followed closely by school funding and the Governor’s second priority, tort reform (capping “pain and suffering” in medical malpractice lawsuits). All three issues are now signed into law, and lawmakers moved swiftly to “trucker tort” reform, which stops Iowans from suing trucking companies for “direct negligence” in hiring and training a truck driver who causes a crash. That bill is on its way to the Governor, with two more of her priorities (rural and maternal health, government reorganization) gearing up to be next in line.

Today, Friday, March 3, is the first legislative deadline, called a funnel. As of February 23, legislators have introduced 1,273 bills, ranging from short one-liners to the 1,569 page government reorganization bill. To keep moving through the process, bills need to have been voted out of their originating committee before that date. Unless a bill deals with taxes or spending, bills that fail to make it out of committee before this deadline are no longer eligible for debate in the 2023 session (but will become live rounds again when the 2024 session convenes).

There are hundreds of bills that touch on issues important to the nursing profession and impacting Iowans’ ability to access health care. After two years of anti-vaccine bills, the pipeline for those issues is drying up, although we still have bills giving people the right to try unapproved treatments, putting immunization status on a child’s death certificate, and mandatory use of an immunization registry. While INA supports the mandatory use of the Immunization Registry Information System (IRIS), that bill includes a requirement that the professional administering the vaccine get a separate signed written consent form to upload their information into IRIS, and instead of just maintaining that in the charts, to submit it at the time they are uploading the vaccine information. Of course, that negates the required use of IRIS, if consent to upload isn’t given.

Fortunately, there does not seem to be the same drive to adopt controversial vaccine policies as in the past, so most if not all of these will likely fizzle out early in session. Raw milk is back, along with new bills that would prohibit schools from serving margarine, insects, and fake meat in school lunches. There are a record number of anti-LGBTQ+ bills (19 and counting) and a very clear focus on “parents rights” in the curricula and materials available to kids in schools. With that comes some very serious challenges to human growth and development education.

As mentioned earlier, the Governor’s health policy bill ([HSB 91](#)) has a number of INA-supported proposals in it, including expansion of the “centers of excellence” program that expands the capacity of rural hospitals to provide OB/GYN and other specialty care, the creation of a new “rural emergency hospital” designation to preserve urgent care access in areas where the hospital is in danger of closing, providing state employees with four weeks of paid parental leave after the birth or adoption of a child, and adding an OB/GYN fellowship to the University of Iowa residency program. Another important component of the

bill, over the counter contraceptive access, was taken out of the bill before it passed out of the House Health & Human Services Committee, but several legislators indicate it may be an issue considered separately from the bill. The Senate's version of the bill ([SF 324](#)), which also has survived the funnel, did not include this component of the Governor's proposal. The bill also expands the MOMS (More Options for Maternal Support) program enacted last year to include father engagement, which many feel is premature given the program has not yet been launched. The MOMS program is very controversial and was modeled after a program in Texas that funnels millions of taxpayer dollars into "crisis pregnancy centers" while overlooking other family planning clinics. Since the program has not yet rolled out in Iowa, it's difficult to say how it will play out and the types of services that will be offered to support pregnant women. Both House and Senate versions of this bill are out of committee, safe from the funnel.

The last major reorganization of state government happened in 1986, and the Governor thinks its time to shuffle the deck and realign the number of cabinet-level positions that answer to her. Her bills ([HSB 125](#) & [SSB 1123](#)) shrink the number of top agency officials from 37 to 16. More than 900 pages of this behemoth bill brings together the Aging, Human Rights, Human Services, and Public Health into a combined Department of Health and Human Services (HHS). Since that process has been underway for nearly two years, there is very little controversy (only the changes to the role of the independent Child Advocacy Board, currently housed in the Department of Inspections and Appeals, have stirred up concerns). The rest of the bill ranges from the innocuous (getting rid of "substance abuse problem" and replacing it with "substance use disorder") to the highly controversial (eliminating local control of community-based corrections, striking the process and legislative approval for any changes to the Braille and Sight Saving School and School for the Deaf, allowing the Governor to appoint the Department for the Blind director instead of a stakeholder-led commission). The Senate has passed their bill out of committee, and the House plans to wrap up its committee work on their bill before the funnel deadline. While no amendments are going to be offered at the committee level, you can be sure there will be one during floor debate. The rumor is there are 50 pages of just "clean up" - grammatical errors, overlooked name changes, etc.

INA has been working with Rep. Jacob Bossman (R-Sioux City) on his bill to provide nurse preceptors with a \$1,000 tax deduction ([HF 157](#)). His bill, developed in conjunction with Morningside College's nursing faculty, needs a bit more work before it is ready for a vote, but the subcommittee on the bill has given it their initial support. The bill currently does not clearly identify what a "preceptorship" is, so stakeholders (including INA) are working with Morningside College to get an amendment ready. Fortunately, this bill deals with a tax issue and is in the House Ways & Means Committee, which is exempt from the funnel deadlines. That gives INA and others more time to perfect this bill. Legislators do not know how much of an impact this will have on the state's revenues, but initial estimates were in the \$3 million range.

As March 3 is now here, it's good to take stock at where things lie on other areas of importance to INA:

INA Supports:

- Imposing a tax on nicotine solution (vaping) products, with tax revenues deposited in a health promotion trust fund ([HF 21](#))
- Adding vapor products to the Smoke Free Air Act ([HF 364](#))
- Updating child safety seat laws to match new guidelines ([SF 28](#))
- Expanding postpartum Medicaid coverage for 12 months ([SF 57](#))
- Protecting rural hospitals and protecting access to appropriate and affordable medication ([HF 144](#), [SF 75](#), [SSB 1098](#), [HF 423](#))
- Licensing of midwives ([HF 265](#))

INA Opposes:

- Creating barriers to accessing public assistance benefits, including Medicaid and SNAP food assistance ([HF 3](#) & [SSB 1105](#))
- Prohibiting the manufacture, distribution, and use of abortifacient drugs in Iowa ([HF 146](#))
- Eliminating the requirement that schools include information about HIV, HPV, and the availability of an HPV vaccine in school human growth and development curriculum ([HF 187](#))
- Removing gender identity from civil rights protections ([HF 190](#))
- Prohibiting insurance plans from covering services contrary to state public policy ([HSB 167](#))
- Outlawing “social emotional learning” materials and surveys in public schools ([SF 85](#))
- Banning all gender affirming care for Iowa youth ([SF 110](#))
- Allowing health care providers to refuse to provide care if it is against their morals, ethics, or religious beliefs, and prohibiting an employer from taking action against a health care provider that refuses to provide care ([SF 297](#))
- Barring professional licensing boards from taking action against a health care professional who refuses to follow USDA, CDC or NHI guidance ([SF 300](#))
- Allowing raw milk to be consumed and sold ([SF 315](#))
- Stopping employers from asking about an employee’s COVID-19 vaccine status ([SF 323](#))

There are many other bills INA is supporting, opposing and watching, ranging from eliminating physician supervision of PAs to prohibiting mental health professional non-compete clauses to major changes to the certificate of need process. For current status of all the bills being tracked by the Iowa Nurses Association, you can check the [INA Bill Tracker](#). Bills are automatically updated as they move through the process, and can be sorted by topic and downloaded. As a reminder, INA has only three options to register on a bill (support, oppose, undecided). If you see INA registered as “undecided,” it may mean the association is undecided, has mixed feelings about the bill, or is just wanting to keep an eye on it as it moves through the process.

March will be a big month in the Legislature, with the second funnel deadline coming on March 31, as well as mid-March revenue estimates that will set the stage for the budget process. At this pace, there is no reason legislators should not be able to finish their work on or before the 110th day (last day) of session on April 28.