

SESSION ENDS, 2024 ADVOCACY BEGINS

By: Amy Campbell, INA Lobbyist and Partner, Campbell/Patterson Consulting LLP

The Iowa Legislature adjourned for the year just after noon on Thursday, May 4th. In the days leading up to the session's end, legislators passed 64 bills, including the 11 bills that make up the state's budget for fiscal year 2024. They also passed what the Senate called "Phase 1" of its plan to increase transparency in local government spending and make property taxes more predictable.

While education reform and "parent rights" were at the center of the Governor's legislative priorities, workforce and getting Iowans "back to work" continued to be a top legislative talking point. Lawmakers loosened child labor restrictions, added tougher checks on food assistance and other public benefit programs, expanded childcare eligibility to 160% of the federal poverty level (but also added another four hours to the weekly work requirement), capped damages for "pain and suffering," and reorganized state government agencies and responsibilities.

For nursing, it was another rough year with no real reforms to improve the well-being, safety, and security of Iowa's nurses. INA engaged in many bills this year on behalf of Iowa nurses, and you can see the status of all of them in the [INA Bill Tracker](#). Here's a quick rundown of some of the issues - the good, the promising, and the disappointing.

The Good:

- The University of Iowa's nursing program will receive \$2.8 million more to hire additional faculty to increase the number of nursing students it can admit each year. They estimate the program will graduate 30% more nurses each year because of this funding.
- Medicaid reimbursements for mental health and substance use disorder treatment were increased by \$13 million (which equates to about \$35 million total when the federal match is included).

- The Poison Control Center will get a \$250,000 bump in funding after seeing call volumes spike, including a 41% increase in calls from healthcare professionals.
- Middle school and high school student ID cards will now have a suicide/crisis hotline phone number printed on them, along with the Your Life Iowa website.
- The Legislature directed the Department of Health and Human Services (HHS) to work with the Iowa Health Information Network to develop plans to empower Iowans to access and direct their health information using the network, better facilitate the exchange of data and improve provider participation.
- Barriers to licensure as a prescribing psychologist were removed, new psychiatric and OB fellowships were authorized, and physician assistants will no longer be supervised by a physician.
- After more than a decade of trying, certified professional (non-nurse) midwives will now be licensed in Iowa through an advisory council under the Board of Nursing. That advisory council will include a certified nurse-midwife, an OB/GYN, four CPMs, and one public member. CPMs can become licensed either by completing an accredited education program or through an on-the-job training (PEP) process. This all came together in the final days of the session, but the bill has not yet been signed into law.
- Income eligibility for childcare assistance was increased to 160% of the federal poverty level, but the work requirement was also increased by four hours/week (to 32 hours).

- Hospital access in rural areas can now be preserved with a new [“rural emergency hospital”](#) designation, allowing the hospital to provide urgent and outpatient care without maintaining inpatient beds.

The Promising:

- Legislators failed to pass a tax credit for nurse preceptors, but the issue captured the attention of some key majority party members. INA will be working over the interim to refine the bill and address some of the issues that came up during subcommittee meetings.
- Medicaid managed care organizations (MCOs) will be taxed starting this year, but that tax will be used to draw down additional federal Medicaid matches before being returned to the MCO. The result is an additional \$100-120 million that can be used to improve access to Medicaid services starting in 2025.
- Similarly, legislators decided to wait a year to spend Opioid Settlement Funds until the Attorney General can develop a plan on how those dollars could be used most effectively. Many legislators wanted to see some of those funds go toward the prevention and treatment of addictions.
- While legislators put \$500,000 more into supporting pregnant women and new mothers, they did not get enough support to expand Medicaid for 12 months postpartum and increase access to contraception by allowing its purchase without a prescription. These two issues remain in the “promising” category because they do have bipartisan support, but not enough to get it to a floor debate.
- The Newborn Safe Haven law was expanded this year to allow fire stations to install [“baby boxes”](#) where newborns can be surrendered safely (as an alternative to a hospital in rural areas). They also expanded this to allow

surrender to an adoption agency. Legislators hope this helps prevent newborn abandonment in areas without a hospital or safe haven partner.

The Disappointing:

- Legislators enacted new income verification processes on all public benefit programs (including Medicaid), and costly new household asset tests on food assistance (SNAP). Despite overwhelming opposition, legislators decided to move forward in spending \$30 million in state taxpayer dollars to implement this new system, which is expected to begin saving the state money in four years. On the bright side, the Legislature also spent \$8 million from the \$44 million Iowa Total Care/Centene settlement to pay for upgrades to its public benefits eligibility system, which once completed may also become a streamlined, single-entry portal to make applying for and determining eligibility for public assistance simpler.
- The public will now be able to buy raw milk from a dairy in what legislators are calling a “food freedom” bill. Another bill paved the way to allow people to sell meals from their home kitchens without a restaurant license.
- As you know, legislators made it illegal for any healthcare professional to provide gender-affirming care or transition procedures for minors, including helping those minors to find such care. Other bills allowing health professionals to refuse care to someone based on their moral or religious beliefs failed to pass.
- LGBTQ+ students were targeted with requirements that they use the bathroom of their biological sex (at birth), school libraries will now have to take out any books containing a description of a sex act (including many classics and popular teen titles), and school human growth and development courses must scrub any references to anything not cis-normative and hetero-normative. Schools will no longer be required to inform students about HPV, the HPV vaccine, or HIV.

- After fast-tracking a bill that one Senator called the first step toward allowing Iowans to carry guns anywhere without restriction, legislators killed a bill that would have allowed guns in cars on K-12 school and state university property, public parking lots, casinos, on snowmobiles, and more. It would also have allowed people driving kids to school events to carry guns with the permission of the school. The bill died, but it will likely be resurrected in the 2024 session. The biggest cause of its 2023 demise: school insurance rates would skyrocket (if they could get insurance at all).
- Bills that would have eliminated all school curricula on social emotional learning failed, but lawmakers did restrict schools' ability to survey kids about these topics without parent permission, which could impact public health surveillance work.
- While legislators failed to pass a bill banning universities from spending any funds (regardless of source) on diversity, equity, and inclusion (DEI) initiatives, they did require the Regents universities to report back on all activity and put a hiring freeze on any new DEI staff or contracts.

Legislators also failed to update the state's Certificate of Need process, which they had proposed updating the thresholds that trigger the process and carving out birthing centers. This remains an issue that deeply divides legislators, but it is not a partisan divide. It could come back next year.

As Iowa comes alive with the Spring, so does the INA's advocacy efforts. In the coming months, INA will be putting together a comprehensive package of legislative initiatives to support Iowa's nurse workforce. It will focus on the health and well-being of nurses and reflect national best practices in nurse retention. To make this successful, INA will need to rely upon its own "issue experts" to help with this expansive advocacy effort. Look for opportunities to come your way later this year!