

**Iowa Nurses Association
Legislative Report
2014 End of Year Summary
By Sue Whitty, Chair, INA Public Policy Committee**

2014 Iowa Session--At a Glance

Although legislators tried to minimize lengthy debate with the goal of ending the session on time to hit the campaign trail as soon as possible, the House adjourned May 1st and the Senate May 2nd requiring additional work days beyond the session's official schedule. Several pieces of legislation, including the Health and Human Services Appropriations bill were debated to the final hours and, unfortunately, did not include funding for nursing workforce initiatives that INA had requested and nursing needs to expand the workforce to meet expanding demands.

The Iowa Nurses Association Public Policy Committee examines and responds to bills that will affect the health of Iowans. This session, the Public Policy Committee was very busy from the onset advocating for SSB 3009 created by the Iowa Board of Nursing to codify the Iowa Supreme Court ruling which confirmed that it was nurses who should define nursing practice. Unfortunately, opposition from medical groups was strong and the Iowa Board of Nursing chose to withdraw the bill and wait for a better time to introduce language that would clarify ARNP practice and clean up antiquated language that has not been modified since 1976, when the "new" Iowa Nurse Practice Act was enacted.

Bob Mulqueen and Jim Obradavich, our INA lobbyists, facilitated INA's efforts at the Capitol. We have appreciated their expert guidance this legislative session, and look forward to post-session work over the summer months as we monitor how bills are written into code, and begin planning for next year.

Our health care delivery system has been changing at an unprecedented rate. The impact of these changes will be measured in years to come. The Iowa Legislature has considerable responsibility making decisions that impact how health care evolves for Iowans. This year, their charge was to wrap up the details needed to implement the Iowa Health and Wellness Plan and Mental Health Redesign and address workforce shortage issues that complicate the implementation of these important initiatives. There is still work to be done and loose ends to "tie up" next session.

Iowa Nurses Running for State Office

Four Registered Nurses are running for office. The Iowa General Election Date is November 4, 2014. It is important that legislators understand the complexity of the health care decisions they are making. Potentially, nurses are equipped to more fully appreciate this complexity.

- State Representative (House) District 8: Nancy Paule Huisinga, Clarion: **INA MEMBER**
- State Senator (Senate) District 13: Pam Deichmann, Winterset, **INA MEMBER**
- State Representative (House) District 54: Linda Upmeyer, Clear Lake
- State House of Representative (House) District 63: Theresa Meyer, Waverly
- State Representative (House) District 94: Linda Miller, Bettendorf

Continued Direction Provided by the May 2013 Supreme Court Decision

On May 31, 2013 Iowa Supreme Court issued a landmark decision for Nursing practice in Iowa. The Iowa Supreme Court found that the Iowa Board of Nursing, not medical organizations, had the authority to define the scope of nursing practice in the state of Iowa. The Court noted, "[I]f the District Court's ruling were to be upheld, it would fundamentally alter the nursing profession, as well as healthcare within Iowa, by allowing physician associations to have absolute veto power over any proposed new nursing rule, regardless of the actual opinions of Iowa physicians and of the actions of, Iowa physicians in their privileging of nurses to perform various practices."

Although, this decision clearly provides direction on scope of practice issues, there continued to be discussion within the Iowa State Board of Health regarding fluoroscopy. On May 14, 2014, Judy Collins (INA President) Sue Whitty (Public Policy Chair) and Lynn Boes (Legal Counsel) attended the Iowa State Board of Health Board (ISBOH) meeting along with representatives from advanced practice groups including the Iowa Association of Nurse Anesthetists. On the agenda was: "Fluoroscopy Overview and BOH Regulatory Role". Previously, the Iowa Board of Nursing (IBON) submitted documents answering the ISBOH's request to provide information regarding how they plan to audit ARNP's and CRNA's who use fluoroscopy in their practice. Kathy Weinberg and Laura Hudson from the IBON presented information explaining how advanced practice nurses will verify the completion of initial fluoroscopy curriculum and required yearly continuing education requirements. Minutes and documents are available on the ISBOH website for review at: <http://www.idph.state.ia.us/do/BOHMeetings.aspx>. The Supreme Court Decision was quoted and the ISBOH was advised to address safety vs. scope of practice issues.

BACKGROUND Regarding Supreme Court Decision

The case was brought by the Iowa Medical Society and the Iowa Society of Anesthesiologists against the Iowa Board of Nursing and the Iowa Department of Public Health (IDPH), who were attempting to invalidate a rule adopted by each agency. The Iowa Nurses Association (along with the American Nurses Association) and the Iowa Association of Nurse Anesthetists and one medical association were granted permission to intervene.

KEY ISSUES OF THE CASE

The rules at issue recognized the abilities of Advanced Registered Nurse Practitioners (ARNP) to supervise operators of fluoroscopy equipment, while the ARNP performed various nursing techniques such as peripheral insertion of an extended length intravenous catheter, foreign body location, precise needle location for procedures such as breast biopsy and interventional pain management. The Iowa Board of Nursing believed it had the authority to define nursing practice in this way. At issue was the interpretation of Iowa Nursing Law, which allows nurses to perform additional acts "which are recognized by the medical and nursing professions and approved by the Board [of Nursing] as proper to be performed by a registered nurse." Iowa Code § 152.1(6)(d).

2014 Legislation Addressing INA Public Policy Priorities

NOTE: There were a number of bills addressing health care reform that did not make it through the 2014 Session. See list at end of report.

INA PUBLIC POLICY PRIORITY #1

Participate in efforts to redesign aspects of the Iowa healthcare system that will:

- Make health care affordable and accessible**
- Provide a full range of services across health care settings**
- Address mental health services**
- Assure health care access in rural settings**
- Address long term care needs**

SF 2080. PRESCRIPTION MONITORING INFORMATION EXCHANGE PROGRAMS. Board of Pharmacy bill. Passed the Senate (49-0). Passed the House (100-0) and was **signed by the Governor.**

HF 2417. CODE CLEAN-UP BILL RELATED TO THE NEW MENTAL HEALTH AND DISABILITY SERVICE SYSTEM REDESIGN.

Passed the House (98-1). Senate amended and passed (48-0). The House received the Senate Amendment H-8208 which was filed on April 2nd. The Bill died on the House Debate Calendar as Unfinished Business.

Legislators came up with a compromise late in session that would continue the redesign through June 30, 2016 (various parts of the system were to expire next year [2015]). While legislators did not eliminate the requirement that regions repay the state 80% of any savings they see from the Iowa Health and Wellness

Plan (called the "clawback"), they did come up with a realistic way to calculate those savings, and restated that these "savings" that the regions keep are to be reinvested in the regional services system.

Many proposed code changes of HF 2417 were not included in HF 2463 Health and Human Services Appropriations bill, however Division X of the appropriations bill extends the Mental Health and Adult Disability Services Property Tax Levy and Equalization appropriation (see Page 65, Line 37) for an additional year through FY 2016.

INA PUBLIC POLICY PRIORITY #2

Promote a culture of patient safety in all practice settings.

SF 2193. ADULT DAY CARE SERVICES. Establishes admissions and retention criteria for adult day services. Passed the Senate 50-0. Passed the House 99-0 and was **Signed by the Governor.**

SF 2239 ELDER ABUSE

Establishes provisions on civil protection orders for elders. Makes definitions and establishes procedures and considerations for issuing and modifying orders. Allows the court to order a person who committed elder abuse out of a shared residence. Establishes the general rights of elder abuse victims. **Report:** Requires IDA, DHS, DIA and the AG to collaborate and make recommendations on elder abuse prevention. The Senate PASSED the bill 49-0; the House PASSED the bill 97-0. **Signed by the Governor.**

SF 2121 (formerly SSB 3008). CONTROLLED SUBSTANCES. An act making changes to the Controlled Substances schedule. Passed Senate (49-0). Passed House (99-0) and was **Signed by the Governor.**

INA PUBLIC POLICY PRIORITY #3

Support Public Health programs, functions and infrastructure to:

A. Prevent infectious diseases

SF 2297. CONTAGIOUS DISEASE CRIMES. Strikes the current criminal provisions on infecting another person with HIV. Makes it a Class B felony if a person with knowledge of having an infectious or contagious disease, and with intent, infects another person. Makes it a Class D felony, if, under the same circumstances, the other person is only exposed. Makes it a serious misdemeanor, if a person with knowledge of having the disease acts recklessly and infects another person. Establishes exceptions for pregnancy and for persons with infectious diseases who take practical measures to avoid spreading the infection. Includes provisions on what constitutes intent. Directs the DCI to expunge the registration of a person who registered as a sex offender for an aggravated offense related to HIV. The Senate PASSED the bill 48-0; the House PASSED the bill 98-0. The Governor said that the bill is better public policy than the current law, while remaining tough on crime. **Signed by the Governor.**

B. Promote evidenced-based preventive health care

HF2463. HEALTH AND HUMAN SERVICES APPROPRIATIONS. Contains numerous appropriations and provisions related to health and human services. A bill for an act relating to appropriations for health and human services and veterans and including other related provisions and appropriations, extending the duration of county mental health and disabilities services fund per capita levy provisions, and including effective date and retroactive applicability provisions. Item vetoed. Various effective dates. (For details of the provisions, go to the INA website www.iowanurses.org) **Item vetoed and Signed by the Governor.**

HF 2463. (Formerly 2376). STANDARD PROCESS FORM FOR PRESCRIPTION DRUG BENEFITS. Although this bill died, language was contained on page 33 of the Senate amendment to the Health and Human Services appropriations bill but the standard process form was line item vetoed by the Governor on May 30th.

SF 2196. DPH OMNIBUS BILL. Senate PASSED the bill 49-0; the House PASSED the bill 88-0 with revisions to the original bill. **Signed by the Governor.**

- Strikes the repeal of the Healthcare Workforce Support initiative and makes several technical changes to allow certain programs (medical residency matching grants, health care workforce initiative) to continue while delaying the sunsets for other programs until 2016 (Nurse Residency state matching grants, Health Care Professional and Iowa Needs Nurses Now initiatives, the safety net provider recruitment and retention initiatives and the PA MH fellowship program).
- Aligns training requirements regarding blood-borne pathogens for EMS and health care workers with OSHA requirements.
- Establishes the fulfilling Iowa's need for dentists matching grants and allows DPH to contract with a non-profit to run the program.
- Eliminates mandatory inspections in salons, barber shops and funeral homes and institutes a complaint-based system.
- Requires that at least half the members of a BOM hearing panel with alternates be current members of the board and at least half be licensed to practice **Signed by the Governor.**

C. Provide chronic care management

SF 2360. MEDICAL CANNABIDIOL ACT. Creates the Medical Cannabidiol Act to allow the use of cannabis oil for intractable epilepsy. Requires findings from a neurologist that patient suffers from such a condition and that alternative treatments have been tried for at least six months. Allows the neurologist to be an out-of-state neurologist. **Cards:** Allows the DPH to have the DOT issue cannabidiol ID cards for patients, or their primary caregivers, and recognizes the ID cards of other for patients with intractable epilepsy. **Sunset:** Repealed as of July 2017. Requires that the patient or caregiver be 18. Makes the names of the ID holders confidential.

Penalties/Protections: Establishes reciprocity provisions with states with similar laws and an affirmative defense against criminal prosecution for cardholders who are in possession of cannabidiol. Retains current penalties for illegal possession. Limits the amount that can be possessed to 32 ounces. Does not allow agencies to initiate child removal proceedings solely due to the use of medical cannabidiol by the child or a parent. **Study:** Requires the UI College of Medicine and the College of Pharmacy to issue annual reports to the DPH and the Legislature on the medical literature regarding the use of cannabidiol **Signed by the Governor.**

SF 2352, DISABLED VETERAN CREDIT. Adds additional veterans eligible for the disabled veteran property credit (veterans and National Guard veterans certified by the US DVA as having 100% disability). Includes surviving spouses who receive dependency or indemnity payments. Strikes the income caps. Effective immediately. The Senate PASSED the bill 50-0; the House PASSED the bill 96-0 states with similar rules. **Signed by the Governor..**

D. Promote healthy communities

HF 2459. FIREFIGHTER/EMS CREDIT. Increases amount of the Volunteer firefighter/EMS worker income tax credit to \$100. Allows professional firefighters and professional EMS workers who also work as volunteer firefighters/EMS workers to claim the credit. Creates an income tax credit of \$100 for reserve peace officers. Prorates the credit for a partial year of service by the reserve officer. **Signed by the Governor.**

HF 2109. (Formerly HSB 5666). VAPOR PRODUCTS. A bill responding to vapor products and alternative nicotine products and providing penalties. Prohibits persons under the age of 18 years from possessing an e-cigarette and requires retailers to obtain permits. On March 13th, the Senate Human Resources Committee debated and recommended amendments that were more stringent than the original House version which passed 76-22. A series of amendments evolved centering around the categorization of simulated smoking devices and tobacco products the same as cigarettes and have the same regulations. On April 28, the Senate amended the definition of vapor products as "any noncombustible product, which may or may not contain nicotine, that employs a heating element, power source, electronic circuit or other means" (see Senate amendment 5088/House- 8327) and passed the bill 37-12. The House turned down some

House proposed amendments and concurred in the Senate amendment (tighter definition of vapor products) and passed the House (74 - 0). **Signed by the Governor.**

SF 366. (Formerly SF 2262). RADON TESTING AND MITIGATION in public schools. The House decided to move SF 366 that had already advanced to the House Local Government Committee last session. SF 366 was amended on the House floor with a strike-after amendment (S-5084) that became the new bill language. The final version was amended in the House to be only an advisory measure. The Iowa Department of Education is to "notify each school district and accredited nonpublic school...of the risks associated with radon gas and radon. It passed the House by a vote of 99-1. It passed the Senate on April 8th again. INA was registered in favor of the original stronger version as proposed in SF 366 in 2013.

The Iowa legislature appropriated \$1million for radon testing in schools. Beginning July 1, 2014, schools will be able to seek funding to test their schools for radon. This funding will go a long way to insure our students and teachers have a safe environment to learn and work.

The appropriation will coincide nicely with the radon bill passed earlier in session. The radon in schools bill requires the Department of Education to educate Iowa's schools on the dangers of radon and then gather what their plan is for testing and mitigating. The Department will then report back to the legislature on their findings. The **Governor signed** the bill into law on April 17, 2014. Below is bill language:

Senate File 366 AN ACT RELATING TO RADON CONTROL IN SCHOOLS. BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

Section 1. DEPARTMENT OF EDUCATION — RADON NOTIFICATION AND TESTING — REPORT.

1. The department of education shall notify each school district and accredited nonpublic school in this state of the risks associated with radon gas and radon progeny at attendance centers. Such notification shall include information on radon testing and mitigation, including relevant statistical data and information on sources of funding available for radon testing and mitigation, and shall encourage school districts and accredited nonpublic schools to implement a radon testing and mitigation plan.

2. Each school district and accredited nonpublic school in this state shall notify the department of education by December 1, 2014, indicating whether it has a radon testing and mitigation plan in place. Any school district or accredited nonpublic school that does not have a radon testing and mitigation plan in place as of December 1, 2014, shall also notify the department of any plans the district or school has to implement a radon testing and mitigation plan in the future.

3. The department of education shall submit a report to the general assembly by January 1, 2015, on the data collected pursuant to subsection.

INA PUBLIC POLICY PRIORITY #4

Support efforts that allow nurses to practice to the highest extent of their education and as full participants of a team based care delivery model.

SF 2120 (Formerly SSB 3006). ADVANCED REGISTERED NURSE PRACTITIONER TITLE AND ABBREVIATIONS. Clarifies professional titles and abbreviations of advanced registered nurse practitioners. This ARNP title bill was filed by the IBON. Passed the Senate 49-0 and Passed the House 99-0 and was **signed by the Governor.** INA registered was in favor of this bill.

SSB 3009. A STUDY BILL FOR AN ACT RELATING TO THE PRACTICE OF NURSING, study bill for an act relating to the practice of nursing, including defining the functions of an advanced registered nurse practitioner and requiring background checks on nursing students. An ARNP policy bill filed by the IBON but WITHDRAWN due to resistance. *Subcommittee - Bolkcom, Dotzler & Boettger. Full Human Resources Committee.*

INA PUBLIC POLICY #5

Support efforts to expand nursing workforce development, increase the proportion of nurses with higher education and address nursing faculty shortages.

SF 2196. DPH OMNIBUS BILL. The Senate and the House voted to maintain BOTH the Iowa Needs Nurses Now and Nurse Residency Programs to prevent them from sun-setting. The nursing workforce development and retention programs were NOT funded but we appreciate the effort made to save these important programs from being removed from Code. We will continue to advocate for funding in the future. The Senate PASSED the bill 49-0; the House PASSED the bill 88-0. **Signed by the Governor.**

GOALS OF REQUESTED NURSING FUNDING WERE INTENDED TO:

Provide access to nurse residency programs for new nurse graduates in critical access and rural hospitals. The Institute of Medicine recommends that new registered nurses have a residency program to help them transition to practice. About 7 larger hospitals in Iowa have implemented nurse residency programs, but it isn't economically feasible for smaller providers to develop and deliver their own residency program. The Iowa Action Coalition has developed an online residency program to support cohorts of new nurses with small providers.

Increase the proportion of registered nurses with a bachelor of science in nursing (BSN). The Institute of Medicine report recommends that 80% of registered nurses have at least a BSN by 2020. Of the registered nurses in Iowa, only 27% have a BSN. Nurses that are practicing with an associate degree in nursing could continue to work while completing an RN-BSN completion program.

Increase the availability of nursing faculty by promoting their advanced education to replace aging faculty and meet the demand for more nurses in the workplace

Bills that Failed to Make it Through the 2014 Session

SF 2090 (Formerly SF 2009). Lyme disease task force. Passed Senate (49-0). It did not pass the House Human Resources Subcommittee (L. Miller, Forristall, Abdul-Samad). THIS BILL DIED. **INA was registered in favor of this bill.**

SF 2227. (Formerly SF 2081). Medicaid home and community based services waivers. Approved by Senate Human Resources Committee (13-0) on February 18. Re-referred to committee on March 13. THIS BILL DIED. Administrative Rules related to waivers are being addressed during the summer of 2014.

SF 2234 and HF 2358. Licensing of polysomnographic technologists. SF 2234 was approved by Senate State Government Committee (9-6) on February 19th and re-referred on March 13. Referred to House State Govt. Committee on March 14. ARNP's were added as qualified health care professional prescribers. DIED IN SECOND FUNNEL.

SF 2253. Health Insurance Marketplace. Approved by Senate Commerce Committee (9-6) on February 20 and was re-referred on March 13. This bill did not pass its chamber of origin (Senate). THIS BILL DIED.

HF 2392 (Formerly HSB 611). EPINEPHRINE ADMINISTRATION IN SCHOOLS. Referred to House Education Committee. Did not pass the House. This was the only bill left addressing epinephrine administration in the schools which has been redesigned. **INA and ISNO have had input into this bill and have endorsed it.** Nurses were recommended members of the Dept. of Public Health and Education study group.

SF 2275 (Formerly SF 2174). Bans minors from using a tanning bed. Approved by Senate Human Resources Committee (8-5). Re-referred on March 13. Did not pass Senate. THIS BILL DIED. **INA was registered in favor of this bill.**

SF 2285 (Formerly SF 2144). Establishment of the Iowa Healthiest Children Initiative. Passed Senate 48-0. Referred to House Human Resources subcommittee on March 4: Forristall, Fry, and Heddens It did not pass the House subcommittee: THIS BILL DIED. **INA endorsed this bill.**

SF 2293. Relates to Physician Assistants and the Seriously Mentally Impaired. This bill passed the Senate Chamber (48-0). Did not pass through the House Human Resources Committee (Forristall, Fry, Stutsman). THIS BILL DIED.

HF 2187(Formerly HSB 526) Iowa health information network study bill. Referred to House Human Resources Committee on March 14.DIED IN SECOND FUNNEL.

HF 2376. Requires the development and use of a standard process and form for prior authorization of prescription drug benefits. Did not come out of Senate Committee. DIED IN SECOND FUNNEL, but was included in the Health and Human Services appropriation bill but was later line item vetoed by the Governor.

SF 2238. Health Enterprise Zones bill. Introduced to Senate Ways and Means. Subcommittee: Dotzler, Bertrand, McCoy. A subcommittee meeting was not held.

SF 2261. Establishes an Iowa center for suicide prevention in the department of education and requiring school employee training and protocols relating to suicide prevention and trauma informed care and making an appropriation. Referred to Senate Appropriations. Subcommittee: Mathis, Chapman, Dvorsky. Died in the Senate Appropriations Committee.

HF 2015. A bill for an act relating to the establishment of an Interim committee to study professional licenses administered or supervised by the department of public health. Approved by House State Government Subcommittee, Watts, Grassley, and T. Taylor. Although nurses are not licensed under the IDPH, INA monitored this bill. (Note: The licensing board for nursing has its own Code section.) THIS BILL DIED.

SF 2294. (Formerly HSB 672). Sale of Fireworks. Referred to the House Ways and Means Committee. **INA is registered against this bill due to safety concerns.** Approved by Senate State Government Committee (10-5 vote) on February 24. Re-referred to committee on March 13.Died in the Senate State Government Committee.

HF 2409. Governor's Anti-Bullying Bill. Between Introduction on February 25 and March 5, seventeen amendments were filed in the House of Representatives. Re-referred to House Education Committee on March 14. Died in the House Education Committee.

SF 2318. School anti-harassment and anti-bullying policies providing for training and making appropriations. This bill went back and forth between the House and the Senate but, in the end, a final House version was messaged to the Senate on April 25th. The Senate failed to act on the House version and the bill failed. **Bill History Includes:** Approved by Senate Education Committee (9-5 vote) on February 24. Approved by Senate Appropriations Committee (12-7 vote) on March 12. Passed Senate (26-19 vote) on March 18. Approved by House Appropriations Committee as amended on April 24. Passed House of Representatives (68-27 vote) and messaged to the Senate on April 25. The Senate did not act on the House Version and the bill died.