IDPH Legislative Update Iowa Department of Public Health

June 5, 2012

End of Session Update and Thanks!

The Interim has officially started now that all or most of the legislation from the 2012 session has been acted on by Governor Branstad. Please find a complete list of directives that IDPH is responsible for in the appendices of this update. I will follow-up with at least two progress updates before the next legislative session.

For the IDPH staff who receive this, I want to thank you all for helping me in my first session as the policy advisor for the department. It was a great team effort and I would not have survived without your help, knowledge, and expertise. I am incredibly proud to be part of IDPH and I look forward to learning more about your work moving forward. Thanks again!!!

Governor's Actions

The following is an excerpt from the Legislative Services Agency's "How a Bill Becomes a Law," that provides some explanation of the governor's veto powers. The full document is located here:

"Bills passed by the Legislature must be reviewed by the Governor. The Governor takes final action on all bills passed by the Iowa General Assembly. The Governor has three options: sign the bill, veto the bill (or item veto an appropriations bill), or take no action. In the case of a veto, the Legislature may override the veto with two-thirds of the members of each chamber voting to reconsider and pass the bill a second time. If, during session, the Governor does not sign or veto a bill, it becomes law after three calendar days (except Sundays). Bills received by the Governor during the last three calendar days of session (except Sundays) must be signed or vetoed within 30 calendar days.

The Governor has the option to use three types of vetoes: the veto, item veto, and pocket veto. The veto indicates the Governor's disapproval of an entire bill. The item veto may be used only for bills which appropriate funds. It strikes a specific item of an appropriations bill. A pocket veto occurs when the Governor fails to take action within 30 calendar days on a bill received within the last three calendar days of session (except Sundays). The entire bill fails to become law. When the Governor vetoes or item vetoes a bill, a veto message explaining why the veto was made is delivered to the chamber of origin with the bill and is filed with the Secretary of State. The Governor's veto messages can be accessed on the Iowa General Assembly web site in the "Enrolled Bills" section."

To see a complete list of the press releases relating to the governor's action on the bills passed by the 2012 General Assembly, please click here.

Health and Human Services Appropriations Bill

<u>SF 2336</u> was item vetoed and signed by Governor Branstad on May 25. None of the vetoes directly impact IDPH. The department will be required to implement the budget and the policy directives in this bill as passed by the legislature. To view the veto message, click <u>here</u>.

The <u>Legislative Services Agency</u> published an annotated <u>conference committee report</u> that assists in explaining the final compromise but does NOT include the veto messages. A funding summary is also provided in the report.

Other Bills of Interest

- <u>SF 2315</u> relates to redesign of publically funded mental health and disability services by requiring certain core services, addressing other services, and providing for establishment of regions. Section 24 directs IDPH to convene a mental health workforce development workgroup. Two reports are required to be submitted on December 14, 2012 and December 16, 2013. The bill was signed into law on May 25.
- <u>HF 2465</u> is known as the "Standings Bill." Governor Branstad item vetoed and signed the bill on May 25. To see the veto letter please click here. The bill impacts IDPH as follows:

- Removes the cap on the amount of birth registry fees that will go to the Center for Congenital and Inherited Disorders to maintain their registry as proposed by the House. This means that instead of a small of amount of funds going to the general fund once the cap is reached, 50 percent of all of the fees (\$10 of a \$20 fee) will go to the center.
- Directs IDPH to administer a request for proposal (RFP) to procure services for an lowa Youth Suicide Prevention Program. Provisions for the RFP are included in the bill language as well as an appropriation for \$50,000. The department is required to provide a progress report to the legislature by January 15, 2013 that will also include recommendations on how to continue to the program.
- <u>SF 2338</u> relates to government operations and efficiency and other related matters. It was vetoed in its entirety on May 25. To read the Governor's veto message click <u>here</u>.
- <u>SF 2284</u> is the legislature's education reform bill. Section 35 adds IDPH to the membership of a cross-agency assessment instrument planning group. It was signed by the governor on May 25. To read the Governor's signing letter please click here.

Other Information

- Keep up with IDPH activities and program information by perusing our many topic-specific newsletters located here!
- The IDPH 2011 Annual Report and Budget Summary has been published! This report provides audiences with general information about the many program areas that IDPH is involved in, how that work is funded, and the results that are achieved. To view the report, please click here.
- The lowa General Assembly website is a great source of legislative information. The address
 is www.legis.iowa.gov. It's easy to find your legislator, get information on committee
 members, view photos of legislators, and access bills. Please take some time to check it out.

Information on the Legislative Update

The Legislative Update is also posted on the IDPH website at www.idph.state.ia.us/adper/legislative_updates.asp. To subscribe to the IDPH Legislative Update, please send a blank email to join-IDPHLEGUPDATE@lists.ia.gov.

Bill	Section	Bill	Directive(s) for IDPH	Division	Timeframes/
Number	Number(s)	Title		Responsible	Deadlines
SF 2318 – IDPH IHIN (e-Health) bill	Entire bill. Study in Section 16	An Act relating to the lowa Health Information Network, providing for fees, and including effective date provisions.	Section 16 - review of the potential of the use, release, or disclosure of protected health information for the purpose of research.	Acute Disease Prevention and Emergency Response (Office of e-Health)	Within 12 months of effective date (effective upon enactment). Signed April 12, 2012.
Derived from SSB 1054.		Children's Vision Screening Program	 Low cost methods to screen child for vision problems. Strategies for follow-up after screenings find a discrepancy. Who is the designated screener? Results from the Ankeny Pilot. Are more pilots needed? 	Dr. Miller- Meeks/Health Promotion and Chronic Disease Prevention	Tentatively December 15.
<u>HF 2165</u> - IPOST	Section 3, paragraph 2	An Act relating to physician orders for scope of treatment.	Add the POST form to the IDPH website.	Health Promotion & Chronic Disease Prevention	
SF 2284 – Education Reform	Section 35	A bill for an Act relating to programs and activities under the purview of the Department of Education, the State Board of education, the Board of Educational Examiners, the State Board of Regents,	Membership on an ECI Board/Department of Education staffed cross-agency assessment instrument planning group.	Health Promotion & Chronic Disease Prevention	Report due November 15, 2012.

SF 2225 – Mandatory reporter training	Section 7	school districts, and accredited nonpublic schools and including effective date provisions. An Act relating to child abuse by prohibiting retaliation for reporting, providing for implementation of reporting policies at postsecondary institutions, requiring review of training requirements, and providing a remedy.	 Convene and staff a workgroup to review the training resources for mandatory reporters of child abuse. Consider: Increase in frequency of training? Availability of profession-specific training? Enhancing effectiveness and quality of training. 	Behavioral Health	Report to Governor and General Assembly by December 15, 2012.
SF 2038 – Veterans with substance abuse	Section 3	An Act relating to the duties and requirements of the Department of Veterans Affairs and the Commission of Veterans Affairs.	DVA will collaborate with IDPH (and others) to "provide assistance to veterans and their families to reduce the incidence of alcohol and chemical dependency and suicide among veterans and to make mental health counseling available"	Behavioral Health	
HF 2464 – IDPH Technical Bill, Federal reporting requirement HF 2368 –	Section 22 Entire bill.	An Act relating to the Department of Public Health programs, and Activities, providing for a penalty, and including effective and applicability date provisions. An Act providing for	Report to chairpersons, ranking members of HHS, LSA, caucus staff, DOM application for or renewal of a federal grants with a state match or MOE requirement and has a value of \$100K or more. Must include federal funding source, address state commitment. Upon request, provide a	Administration & Professional Licensing (Bureau of Finance) Administration &	Within 60 days of application or renewal.

Certificate of birth resulting in stillbirth		the issuance of a certificate of birth resulting in stillbirth, providing for a fee, and including effective date provisions.	"Certificate of Birth Resulting in Stillbirth."	Professional Licensure (Bureau of Health Statistics)	
HF 2369 – Strikes county registrars; adds state registrar to list of entities permitted to issue burial transit permits; duplicate death certificates to county of resident if person died outside of resident county.	Entire bill.	An Act relating to vital statistics, including the issuance of a burial transit permit and the transmission and recording of certain death certificates, and including effective date provisions.	 State registrar to begin issuing burial transit permits. State registrar to begin issuing copies of death certificates to the county of residence if a person died outside of his/her county of residence. 	Administration & Professional Licensure (Bureau of Health Statistics)	
SF 364 – Licensing of orthotists, prosthetists, and pedorthists under the Board of Podiatry; some provisions relating to occupational therapy.	Entire bill.	An Act relating to the licensure and regulation of persons offering occupational therapy services, and orthotists, prosthetists, and pedorthists, providing exceptions for persons practicing within the scope of their professions, and providing for fees and penalties.	 Adds three new licensed professions to the purview of the Board of Podiatry. Adds two new board members. If necessary, amend administrative rules relating to occupational therapy. 	Administration & Professional Licensure (Bureau of Professional Licensure)	

SF 2185 – Supervision of physician assistants	Entire bill.	An Act relating to the supervision of physician assistants.	If necessary, amend current administrative rules to permit a physician to supervise no more than five physician assistants. This is an increase from the current maximum of two physicians.	Administration & Professional Licensure (Bureau of Professional Licensure – Board of Physician's Assistants)	
SF 2248 — Prescribing respiratory care services	Entire bill.	An Act relating to the licensed professionals authorized to prescribe respiratory care services.	If necessary, amend current administrative rules to permit physician.	Administration & Professional Licensure (Bureau of Professional Licensure – Board of Respiratory Care)	
SF 2120 – Changes to the practice of optometry	Entire bill.	An Act relating to the practice of optometry.	If necessary, amend current administrative rules relating to several changes to the practice.	Administration & Professional Licensure (Bureau of Professional Licensure – Board of Optometry)	
Health & Huma	an Services	Appropriations Act			
SF 2336 – HHS Approps Bill	Section 2, (Pages 9- 11)	Pew Language for HOPES	 By January 1, 2013, HOPES will adopt criminal and child abuse records check requirements for employees and supervisors of funded programs. By July 1, 2013, 25% of state funds are for evidence-based or promising program models. July 1, 2013 – required participation in a data collection system. Several other out year 	Health Promotion & Chronic Disease Prevention	 One requirement due by Jan. 1, 2013 (mid FY 13) Two by Jul. 1, 2013 (end of FY 13) Two by Jul. 1, 2014 (end of FY 14) Two by Jul. 1, 2015 (end of FY 15)

			reporting requirements in collaboration with the Early Childhood Iowa State Board.		 One by Jul. 1, 2015 (end of FY 16)
SF 2336 – HHS Approps Bill	Section 2, Paragraph b, (Page 12)	First Five (ABCD II) collaboration with lowa Medicaid Enterprise (IME).	Collaborate with IME to develop a plan to draw down more funding for First Five.	Health Promotion & Chronic Disease Prevention	
SF 2336 – HHS Approps Bill	Section 2, Paragraph f, (Page 12)	New allocation of \$25,000 for the U of I College of Dentistry.	Collaboration between University of Iowa and IDPH's Bureau of Oral Health & Delivery Systems.	Health Promotion & Chronic Disease Prevention	
SF 2336 – HHS Approps Bill	Section 3, Paragraph g, (Page 14)	Increase of \$500K for the Care for Yourself Program.	Enhance to capacity of the program to include provision of recommended prevention and early detection measures to a broader range of low-income women.	Health Promotion & Chronic Disease Prevention	
SF 2336 – HHS Approps Bill	Section 3, Paragraph j, (Page 14)	DE/IDPH Collaboration	Collaborate with DE and others to develop guidelines for management of chronic conditions that affect children to be made available to schools.	Health Promotion & Chronic Disease Prevention	Report due by December 15, 2012.
SF 2336 – HHS Approps Bill	Section 4, Paragraph a, (Page 15)	KidSight Program	Additional reporting requirements for the program to be provided to legislators, staff, and the governor. Submitted directly by Program.		
SF 2336 – HHS Approps Bill	Section 4, Paragraph m, (Page 19)	New allocation for the Iowa Donor Registry	\$50,000	Behavioral Health	
SF 2336 – HHS Approps Bill	Section 4, Paragraph n, (Page 19)	Allocation for Prevent Blindness Iowa	\$50,000; Additional reporting requirements for the program to be provided to legislators, staff, and the governor.		

			Submitted directly by Program.		
SF 2336 – HHS Approps Bill	Section 9, Paragraph a, (Page 22)	Boards and Commissions	Review of professional licensing boards, commissions, committees, etc. to recommend efficiencies and reduce duplication.	All Divisions	Report due by December 15, 2012.
Standing Appro	opriations A	ct			
HF 2465 – Standings Bill	Section 8	Youth Suicide Prevention	 \$50,000 to conduct an RFP for a Youth Suicide Prevention Program. Report: detailed analysis of program, budget requirements, recommendations for continuation of the program. 	Behavioral Health	Report due by January 15, 2013.
HF 2465 – Standings Bill	Section 9	Plumbers re- examination exemption for expired licenses	The Board must waive the re- examination requirement for expired licenses past 60 days.	Environmental Hazards – Plumbing and Mechanical Systems Board	Exemption sunsets on January 1, 2013.
HF 2465 – Standings Bill	Section 18	Administrative Rules	 Provide a uniform, searchable, user-friendly rules database on an internet website. IGOV to provide the guidelines. Over each 5-year period each agency is required to conduct a review of all its rules. After each five-year cycle, report due to Rules Committee. 	Acute Disease Prevention & Emergency Response — Communications & Planning Bureau in collaboration with all Divisions.	
Mental Health	Redesign				
SF 2315 – Mental Health (core	Section 24	Mental health workforce	Convene and staff a mental health and disabilities	Health Promotion & Chronic Disease	Preliminary report due

services/regions)		workgroup. Several collaboration directives with other state agencies on different issues throughout the bill.	services workforce development workgroup. Address issues that are a barrier to an adequate workforce to provide mental health and disability services. Group shall consider Direct Care Worker Task Force/Council recommendations.	Prevention/Behavioral Health	December 14, 2012. • Final report due December 16, 2013.
SF 2312 –Mental Health (workgroups)	Section 17	Judicial Branch/DHS Workgroup	Membership on the existing workgroup studying involuntary commitment and a patient advocacy program.	Behavioral Health	Report due December 1, 2012.