

- b. Review and outline the corresponding educational and training requirements for each direct care worker classification identified.
 - c. Determine the appropriate educational and training requirements for each direct care worker classification identified.
 - d. Recommend a process for streamlining the educational and training system for direct care workers.
 - e. Recommend a process for establishing a direct care worker registry by expanding the Iowa nurse aide registry to integrate direct care workers, and consider moving administration of the registry to the Iowa department of public health.
7. The task force shall submit a report of its recommendations regarding the issues specified in subsection 6 to the governor and the general assembly no later than December 15, 2006.

Approved April 29, 2005

CHAPTER 89

PUBLIC HEALTH — MISCELLANEOUS CHANGES

H.F. 789

AN ACT relating to programs and functions under the purview of the Iowa department of public health.

Be It Enacted by the General Assembly of the State of Iowa:

Section 1. Section 29C.20, subsection 1, paragraph a, subparagraph (5), Code 2005, is amended to read as follows:

(5) Paying the expenses incurred by and claims of an urban search and rescue team when acting under the authority of the administrator and the provisions of section 29C.6 and ~~disaster medical assistance teams~~ public health response teams when acting under the provisions of section 135.143.

Sec. 2. Section 135.11, subsection 16, Code 2005, is amended to read as follows:

16. Administer the statewide public health nursing, homemaker-home health aide, and senior health programs by approving grants of state funds to the local boards of health and the county boards of supervisors and by providing guidelines for the approval of the grants and allocation of the state funds. Program direction, evaluation requirements, and formula allocation procedures for each of the programs shall be established by the department by rule, ~~consistent with 1997 Iowa Acts, chapter 203, section 5.~~

Sec. 3. Section 135.11, Code 2005, is amended by adding the following new subsection:

NEW SUBSECTION. 30. Establish and administer, if sufficient funds are available to the department, a program to assess and forecast health workforce supply and demand in the state for the purpose of identifying current and projected workforce needs. The program may collect, analyze, and report data that furthers the purpose of the program. The program shall not release information that permits identification of individual respondents of program surveys.

Sec. 4. Section 135.22A, subsection 7, Code 2005, is amended to read as follows:

7. The department is designated as Iowa's lead agency for brain injury. For the purposes of this section, the designation of lead agency authorizes the department to perform or oversee

the performance of those functions specified in subsection 6, paragraphs "a" through "c". The council is assigned to the department for administrative purposes. The director shall be responsible for budgeting, program coordination, and related management functions.

Sec. 5. Section 135.107, subsection 1, Code 2005, is amended by adding the following new unnumbered paragraph:

NEW UNNUMBERED PARAGRAPH. A simple majority of the membership of the advisory committee shall constitute a quorum. Action may be taken by the affirmative vote of a majority of the advisory committee membership.

Sec. 6. Section 135.140, subsection 5, Code 2005, is amended to read as follows:

5. ~~"Disaster medical assistance team" or "DMAT"~~ "Public health response team" means a team of professionals, including licensed health care providers, nonmedical professionals skilled and trained in disaster or emergency response, and public health practitioners, which is sponsored by a hospital or other entity and approved by the department to provide disaster medical assistance in the event of a disaster or threatened disaster.

Sec. 7. Section 135.140, subsection 6, Code 2005, is amended to read as follows:

6. "Division" means the division of ~~epidemiology, emergency medical services, and disaster operations~~ acute disease prevention and emergency response of the department.

Sec. 8. Section 135.141, subsection 1, Code 2005, is amended to read as follows:

1. A division of ~~epidemiology, emergency medical services, and disaster operations~~ acute disease prevention and emergency response is established within the department. The division shall coordinate the administration of this division of this chapter with other administrative divisions of the department and with federal, state, and local agencies and officials.

Sec. 9. Section 135.143, Code 2005, is amended to read as follows:

135.143 ~~DISASTER MEDICAL ASSISTANCE TEAMS~~ PUBLIC HEALTH RESPONSE TEAMS.

1. The department shall approve ~~disaster medical assistance~~ public health response teams to supplement and support disrupted or overburdened local medical and public health personnel, hospitals, and resources ~~at or near the site of a disaster or threatened disaster by providing direct medical care to victims or by providing other support services.~~ Assistance shall be rendered under the following circumstances:

a. At or near the site of a disaster or threatened disaster by providing direct medical care to victims or providing other support services.

b. If local medical or public health personnel or hospitals request the assistance of a public health response team to provide direct medical care to victims or to provide other support services in relation to any of the following incidents:

(1) During an incident resulting from a novel or previously controlled or eradicated infectious agent, disease, or biological toxin.

(2) After a chemical attack or accidental chemical release.

(3) After an intentional or accidental release of radioactive material.

(4) In response to a nuclear or radiological attack or accident.

(5) Where an incident poses a high probability of a large number of deaths or long-term disabilities in the affected population.

2. A member of a ~~disaster medical assistance~~ public health response team acting pursuant to this division of this chapter shall be considered an employee of the state under section 29C.21 and chapter 669, shall be afforded protection as an employee of the state under section 669.21, and shall be considered an employee of the state for purposes of workers' compensation, disability, and death benefits, provided that the member has done all of the following:

a. Registered with and received approval to serve on a ~~disaster medical assistance~~ public health response team from the department.

b. ~~Provided direct medical care to a victim of a disaster or provided other support services during a disaster or other support services during a disaster, threatened disaster, or other incident described in subsection 1; or participated in a training exercise to prepare for a disaster or other incident described in subsection 1.~~

3. The department shall provide the department of administrative services with a list of individuals who have registered with and received approval from the department to serve on a ~~disaster medical assistance~~ public health response team. The department shall update the list on a quarterly basis, or as necessary for the department of administrative services to determine eligibility for coverage.

4. Upon notification of a compensable loss, the department of administrative services shall seek funding from the executive council for those costs associated with covered workers' compensation benefits.

Sec. 10. NEW SECTION. 139A.8A VACCINE SHORTAGE — DEPARTMENT ORDER — IMMUNITY.

1. In the event of a shortage of a vaccine, or in the event a vaccine shortage is imminent, the department may issue an order controlling, restricting, or otherwise regulating the distribution and administration of the vaccine. The order may designate groups of persons which shall receive priority in administration of the vaccine and may prohibit vaccination of persons who are not included in a priority designation. The order shall include an effective date, which may be amended or rescinded only through a written order of the department. The order shall be applicable to health care providers, hospitals, clinics, pharmacies, health care facilities, local boards of health, public health agencies, and other persons or entities that distribute or administer vaccines.

2. A health care provider, hospital, clinic, pharmacy, health care facility, local board of health, public health agency, or other person or entity that distributes or administers vaccines shall not be civilly liable in any action based on a failure or refusal to distribute or administer a vaccine to any person if the failure or refusal to distribute or administer the vaccine was consistent with a department order issued pursuant to this section.

3. The department shall adopt rules to administer this section.

Sec. 11. Section 142C.15, subsection 4, paragraph a, Code 2005, is amended to read as follows:

a. Not more than twenty percent of the moneys in the fund annually may be expended in the form of grants to state agencies or to nonprofit legal entities with an interest in anatomical gift public awareness and transplantation to conduct public awareness projects ~~or to research and develop a statewide organ and tissue donor registry.~~ Moneys remaining that were not requested and awarded for public awareness projects may be used for research, or to develop and support a statewide organ and tissue donor registry. Grants shall be made based upon the submission of a grant application by an agency or entity to conduct a public awareness project or to research, ~~and develop,~~ and support a statewide organ and tissue donor registry.

Sec. 12. Section 144.23, subsection 1, Code 2005, is amended to read as follows:

1. An adoption ~~certificate~~ report as provided in section 144.19, or a certified copy of the decree of adoption together with the information necessary to identify the original certificate of birth and to establish a new certificate of birth; ~~except that a new certificate of birth shall not be established if so requested by the court decreeing the adoption, the adoptive parents, or the adopted person.~~

Sec. 13. Section 144.40, Code 2005, is amended to read as follows:

144.40 PATERNITY OF CHILDREN — BIRTH CERTIFICATES.

Upon request and receipt of an affidavit of paternity completed and filed pursuant to section 252A.3A, or a certified copy or notification by the clerk of court of a court or administrative order establishing paternity, the state registrar shall ~~amend~~ establish a new certificate of birth

to show paternity if paternity is not shown on the birth certificate. Upon written request of the parents on the affidavit of paternity, the surname of the child may be changed on the certificate to that of the father. The certificate shall not be marked "amended". The original certificate and supporting documentation shall be maintained in a sealed file; however, a photocopy of the paternity affidavit filed pursuant to section 252A.3A and clearly labeled as a copy may be provided to a parent named on the affidavit of paternity.

Sec. 14. Section 148.12, Code 2005, is amended to read as follows:
148.12 VOLUNTARY AGREEMENTS.

The medical examiners, after due notice and hearing, may issue an order to revoke, suspend, or restrict a license to practice medicine and surgery, osteopathic medicine and surgery, or osteopathy, or to issue a restricted license on application if the medical examiners determine that a physician licensed to practice medicine and surgery, osteopathic medicine and surgery, or osteopathy, or an applicant for licensure has entered into a voluntary agreement to restrict the practice of medicine and surgery, osteopathic medicine and surgery, or osteopathy in another state, district, territory, or country, or an agency of the federal government. A certified copy of the voluntary agreement shall be considered prima facie evidence.

Sec. 15. Section 152B.5, Code 2005, is amended to read as follows:
152B.5 RESPIRATORY CARE STUDENTS.

Respiratory care services may be rendered by a student enrolled in a respiratory therapy training program when these services are incidental to the student's course of study.

A student enrolled in a respiratory therapy training program who is employed in an organized health care system may render services defined in sections 152B.2 and 152B.3 under the direct and immediate supervision of a respiratory care practitioner for a limited period of time as determined by rule. The student shall be identified as a "student respiratory care practitioner".

~~A graduate of an approved respiratory care training program employed in an organized health care system may render services as defined in sections 152B.2 and 152B.3 under the direct and immediate supervision of a respiratory care practitioner for one year. The graduate shall be identified as a "respiratory care practitioner-licensure applicant".~~

Sec. 16. Section 152B.14, Code 2005, is amended to read as follows:
152B.14 LICENSURE THROUGH PRIOR EXAMINATION OR PRACTICE.

~~1. The board shall issue a license to practice respiratory care to an applicant who, on July 1, 1996, has passed an examination administered by the state or a national agency approved by the board.~~

~~2. Other applicants who have not passed these examinations or their equivalent on July 1, 1996, and who, through written evidence, verified by oath, demonstrate that they are presently functioning in the capacity of a respiratory care practitioner as defined by this chapter, shall be given a temporary license to practice respiratory care for a period of thirty-six months from July 1, 1996. Such applicants must pass a licensure examination administered or approved by the board within thirty-six months after July 1, 1996, in order to continue to practice respiratory care.~~

Sec. 17. Section 154D.2, subsection 1, paragraph b, Code 2005, is amended to read as follows:

b. Has at least two years of supervised clinical experience or its equivalent as approved by the board ~~in consultation with the mental health, mental retardation, developmental disabilities, and brain injury commission created in section 225C.5. Standards for supervision, including the required qualifications for supervisors, shall be determined by the board by rule.~~

Sec. 18. Section 154D.2, subsection 2, paragraph b, Code 2005, is amended to read as follows:

b. Has at least two years of supervised clinical experience, ~~supervised by a licensee, in~~

assessing mental health needs and problems and in providing appropriate mental health services as approved by the board of behavioral science examiners in consultation with the mental health, mental retardation, developmental disabilities, and brain injury commission created in section 225C.5. Standards for supervision, including the required qualifications for supervisors, shall be determined by the board by rule.

Sec. 19. Section 156.4, subsection 4, Code 2005, is amended to read as follows:

~~4. Written examinations for a funeral director's license shall be held at least once a year at a time and place to be designated by the board. The examination~~ Applicants shall pass an examination prescribed by the board, which shall include the subjects of funeral directing, burial or other disposition of dead human bodies, sanitary science, embalming, restorative art, anatomy, public health, transportation, business ethics, and such other subjects as the board may designate.

Sec. 20. Section 157.1, subsection 12, paragraph c, Code 2005, is amended to read as follows:

c. Removing superfluous hair from the body of a person by the use of depilatories, waxing, sugaring, tweezers, or use of any certified laser products or intense pulsed light devices. This excludes the practice of electrolysis, whereby hair is removed with an electric needle.

Sec. 21. Section 157.1, subsection 14, Code 2005, is amended to read as follows:

14. "General supervision" means the supervising physician is not onsite for laser procedures or use of an intense pulsed light device for hair removal conducted on minors, but is available for direct communication, either in person or by telephone, radio, radiotelephone, television, or similar means.

Sec. 22. Section 157.1, Code 2005, is amended by adding the following new subsection: NEW SUBSECTION. 15A. "Intense pulsed light device" means a device that uses incoherent light to destroy the vein of the hair bulb.

Sec. 23. Section 157.2, Code 2005, is amended by adding the following new subsection: NEW SUBSECTION. 5. Persons licensed under this chapter shall only use intense pulsed light devices for purposes of hair removal.

Sec. 24. Section 157.3, subsection 1, Code 2005, is amended to read as follows:

1. An applicant who has graduated from high school or its equivalent shall be issued a license to practice any of the cosmetology arts and sciences by the department when the applicant satisfies all of the following:

~~a. Presents to the department a high school diploma or its equivalent.~~

b. ~~a.~~ Presents to the department a diploma, or similar evidence, issued by a licensed school of cosmetology arts and sciences indicating that the applicant has completed the course of study for the appropriate practice of the cosmetology arts and sciences prescribed by the board. An applicant may satisfy this requirement upon presenting a diploma or similar evidence issued by a school in another state, recognized by the board, which provides instruction regarding the practice for which licensure is sought, provided that the course of study is equivalent to or greater in length and scope than that required for a school in this state, and is approved by the board.

~~c.~~ b. Completes the application form prescribed by the board.

~~d.~~ c. Passes an examination prescribed by the board. The examination may include both practical demonstrations and written or oral tests and shall not be confined to any specific system or method. However, a member of the board who is a licensed instructor of cosmetology arts and sciences shall not be involved in the selection or administration of the exam.

Sec. 25. Section 157.3A, subsection 1, paragraph a, Code 2005, is amended to read as follows:

a. A licensed esthetician, who intends to provide services pursuant to section 157.1, subsec-

tion 12, paragraphs "a" and "c", having received additional training on the use of microdermabrasion, ~~or a certified laser product, or an intense pulsed light device~~, shall submit a written application and proof of additional training and certification for approval by the board. Training shall be specific to the service provided or certified laser product used.

Sec. 26. Section 157.3A, subsection 2, paragraph a, Code 2005, is amended to read as follows:

a. A licensed cosmetologist having received additional training in the use of chemical peels, microdermabrasion, ~~or a certified laser product, or an intense pulsed light device for hair removal~~ shall submit a written application and proof of additional training and certification for approval by the board. A cosmetologist who is licensed after July 1, 2005, shall not be eligible to provide chemical peels, practice microdermabrasion procedures, ~~or use certified laser products, or use an intense pulsed light device for hair removal~~.

Sec. 27. Section 157.3A, subsection 3, Code 2005, is amended to read as follows:

3. A licensed electrologist having received additional training on the use of a certified laser product ~~or an intense pulsed light device~~ for the purpose of hair removal shall submit a written application and proof of additional training and certification for approval by the board.

Sec. 28. Section 157.3A, subsection 4, Code 2005, is amended to read as follows:

4. Any additional training received by a licensed esthetician, cosmetologist, or electrologist and submitted to the board relating to utilization of a certified laser product ~~or an intense pulsed light device~~ shall include a safety training component which provides a thorough understanding of the procedures being performed. The training program shall address fundamentals of nonbeam hazards, management and employee responsibilities relating to control measures, and regulatory requirements.

Sec. 29. Section 157.4, Code 2005, is amended to read as follows:

157.4 TEMPORARY PERMITS.

~~1. A person who completes the requirements for licensure listed in section 157.3, except for the examination, shall be known as a trainee and shall be issued a temporary permit by the department which allows the applicant to practice in the cosmetology arts and sciences from the date of application until passage of the examination subject to this subsection. An applicant shall take the first available examination administered by the board, and may retain the temporary permit if the applicant does not pass the examination. An applicant who does not pass the first examination shall take the next available examination administered by the board. The temporary permit of an applicant who does not pass the second examination shall be revoked. An applicant who passes either examination shall be issued a license pursuant to section 157.3. The board shall adopt rules providing for a waiver of the requirement to take the first available examination for good cause.~~

~~2. The department may issue a temporary permit for the purpose of demonstrating cosmetology arts and sciences upon recommendation of the board.~~

~~1. The department may issue a temporary permit which allows the applicant to practice in the cosmetology arts and sciences for purposes determined by rule. The board shall determine and state its recommendations and the length of time the temporary permit issued under this subsection is valid.~~

~~3. 2. The fee for a temporary permit shall be established by the board as provided in section 147.80.~~

Sec. 30. Section 157.5, subsection 1, unnumbered paragraph 1, Code 2005, is amended to read as follows:

A licensed cosmetologist, esthetician, or electrologist who provides services relating to the use of a certified laser product, ~~intense pulsed light device for hair removal~~, chemical peel, or microdermabrasion, shall obtain a consent in writing prior to the administration of the ser-

vices. A consent in writing shall create a presumption that informed consent was given if the consent:

Sec. 31. Section 157.5, subsection 2, Code 2005, is amended to read as follows:

2. A licensed cosmetologist, esthetician, or electrologist who provides services related to the use of a certified laser product, intense pulsed light device for hair removal, chemical peel, or microdermabrasion, shall submit a report to the board within thirty days of any incident involving the provision of such services which results in physical injury requiring medical attention. Failure to comply with this section shall result in disciplinary action being taken by the board.

Sec. 32. Section 157.12A, Code 2005, is amended to read as follows:

157.12A USE OF LASER OR LIGHT PRODUCTS ON MINORS.

A laser hair removal product or device, or intense pulsed light device, shall not be used on a minor unless the minor is accompanied by a parent or guardian and only under the general supervision of a physician.

Sec. 33. Section 157.13, subsection 1, Code 2005, is amended to read as follows:

1. It is unlawful for a person to employ an individual to practice cosmetology arts and sciences unless that individual is licensed ~~or has obtained a temporary permit~~ under this chapter. It is unlawful for a licensee to practice with or without compensation in any place other than a licensed salon, a licensed school of cosmetology arts and sciences, or a licensed barber-shop as defined in section 158.1, except that a licensee may practice at a location which is not a licensed salon or school of cosmetology arts and sciences under extenuating circumstances arising from physical or mental disability or death of a customer, or when a temporary permit has been approved by the board. It is unlawful for a licensee to claim to be a licensed barber, but it is lawful for a licensed cosmetologist to work in a licensed barbershop. It is unlawful for a person to employ a licensed cosmetologist, esthetician, or electrologist to perform the services described in section 157.3A if the licensee has not received the additional training and met the other requirements specified in section 157.3A.

Sec. 34. Section 233.2, subsection 2, paragraph c, Code 2005, is amended to read as follows:

c. ~~The~~ If the name of the parent is unknown to the institutional health facility, the individual on duty or other person designated by the institutional health facility at which physical custody of the newborn infant was relinquished shall submit the certificate of birth report as required pursuant to section 144.14. If the name of the parent is disclosed to the institutional health facility, the facility shall submit the certificate of birth report as required pursuant to section 144.13. The department of public health shall not file the certificate of birth with the county of birth and shall otherwise maintain the confidentiality of the birth certificate in accordance with section 144.43.

Sec. 35. Section 272C.4, unnumbered paragraph 2, Code 2005, is amended to read as follows:

Insurance carriers which insure professional and occupational licensees for acts or omissions that constitute negligence, careless acts, or omissions in the practice of a profession or occupation shall file reports with the appropriate licensing board. The reports shall include information pertaining to ~~claims any lawsuit filed~~ against a licensee which may affect the licensee as defined by rule, involving an insured of the insurer.

Sec. 36. Section 272C.9, subsection 1, Code 2005, is amended to read as follows:

1. Each licensee of a licensing board, as a condition of licensure, is under a duty to submit to a physical, ~~or mental, or clinical competency~~ examination when directed in writing by the board for cause. All objections shall be waived as to the admissibility of the examining physi-

cian's testimony or reports on the grounds of privileged communications. The medical testimony or report shall not be used against the licensee in any proceeding other than one relating to licensee discipline by the board, or one commenced in district court for revocation of the licensee's privileges. The licensing board, upon probable cause, shall have the authority to order a physical, or mental, or clinical competency examination, and upon refusal of the licensee to submit to the examination the licensing board may order that the allegations pursuant to which the order of physical, or mental, or clinical competency examination was made shall be taken to be established.

Sec. 37. Section 331.805, subsection 1, Code 2005, is amended to read as follows:

1. When a death occurs in the manner specified in section 331.802, subsection 3, the body, clothing, and any articles upon or near the body shall not be disturbed or removed from the position in which it is found, and physical or biological evidence shall not be obtained or collected from the body, without authorization from the county medical examiner or the state medical examiner except for the purpose of preserving the body from loss or destruction or permitting the passage of traffic on a highway, railroad or airport, or unless the failure to immediately remove the body might endanger life, safety, or health. A person who moves, disturbs, or conceals a body, clothing, or any articles upon or near the body or who obtains or collects physical or biological evidence in violation of this subsection or chapter 691 is guilty of a simple misdemeanor.

Sec. 38. Section 691.6, Code 2005, is amended by adding the following new subsection:

NEW SUBSECTION. 7. To perform an autopsy or order that an autopsy be performed if required or authorized by section 331.802 or by rule. If the state medical examiner assumes jurisdiction over a body for purposes of performing an autopsy required or authorized by section 331.802 or by rule under this section, the body or its effects shall not be disturbed, withheld from the custody of the state medical examiner, or removed from the custody of the state medical examiner without authorization from the state medical examiner.

Sec. 39. Sections 135.45 through 135.48 and section 142A.11, Code 2005, are repealed.

Sec. 40. **RESPONSE TEAM TASK FORCE.** The department shall establish a task force to study the current and future capacity of the public health workforce to respond to bioterrorism, emerging infectious diseases, and other public health threats and emergencies. The task force shall examine the concept of developing and implementing regional response teams which will include members from local, regional, and state agencies and organizations. The task force shall submit a report to the department, the governor, and the general assembly by July 1, 2006, which shall include the findings and recommendations of the task force, including a proposed budget necessary for sustaining public health workforce teams. Task force members shall be appointed by the director and shall include representatives from local public health agencies, hospitals, emergency medical care providers and programs, the department, and other stakeholders. Appointments to the task force shall not be subject to the requirements of sections 69.16 and 69.16A.

Approved April 29, 2005