



January 30th, 2026
State Government Subcommittee

Dear Chair Siegrist, Representative Johnson and Representative Srinivas:

I appreciate the opportunity to comment on HF 930, regarding the interstate podiatric medical licensure compact. My name is Alicia Plemmons, PhD, and I am an assistant professor and director of the Knee Regulatory Research Center at West Virginia University. This comment is not submitted on behalf of any party or interest group.

My research studies patient outcomes in terms of safety, quality, cost, and access under different practice agreements. Compacts are a unique solution to workforce mobility problems, and in fact my team has found evidence of beneficial outcomes from compacts, such as the interstate medical licensure compact for the physicians¹, and the enhanced nurse licensure compact for nurses². While beneficial, piecemeal solutions through compacts have led to several logistical problems attempting to modernize healthcare legislation, develop continuing education programs, and in developing differential licensure systems for each profession.

I would like to draw your attention to Iowa's Universal Licensing Recognition policy, which already has potential pathways in place to allow providers to come into the state and work without additional hurdles. There has been great success in attracting skilled workers through **universal licensing recognition**³, where all licenses in good standing from other states are recognized. In fact, studies have found Iowa has a particularly effective universal licensing recognition policy which has led to some of the most beneficial workforce gains across all 50-states.⁴ States with universal licensing recognition addressing all professions at once, instead of through piecemeal legislation, have been more flexible and responsive, bolstering their state workforce and access to safe, high quality, cost effective medical care.

While universal licensing recognition does already allow for workers from other jurisdictions to enter the state, it is not robust enough to allow physicians within Iowa to perform work outside of the state. This highlights the importance of compacts which would be a benefit to encouraging accessible care throughout the compact states. But it is important to identify and be sure that these policies, the compact and recognition, will work together in tandem rather than the compact overriding and causing inefficiencies in the universal licensing recognition pathway. In summary, while this compact does have potential benefits, implementation needs to consider the recognition policy already in place to prevent unintentional additional barriers.

Best regards,

¹ https://papers.ssrn.com/sol3/papers.cfm?abstract_id=4755497

² <https://link.springer.com/article/10.1007/s12122-022-09333-2>

³ <https://www.sciencedirect.com/science/article/abs/pii/S0165176522002920>

⁴ <https://www.archbridgeinstitute.org/universal-recognition-best-practices/>

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