Regulatory Analysis

Notice of Intended Action to be published: 283—Chapter 17
"Health Care Professional Incentive Program"

Iowa Code section(s) or chapter(s) authorizing rulemaking: 256.178 and 2025 Iowa Acts, House File 972, division IV

State or federal law(s) implemented by the rulemaking: 2025 Iowa Acts, House File 972, division IV

Public Hearing

A public hearing at which persons may present their views orally or in writing will be held as follows:

October 21, 2025 4 p.m.	Room B50 Grimes State Office Building Des Moines, Iowa

Public Comment

Any interested person may submit written comments concerning this Regulatory Analysis, which must be received by the College Student Aid Commission no later than 4:30 p.m. on the date of the public hearing. Comments should be directed to:

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Bureau of Iowa College Aid
400 East 14th Street
Des Moines, Iowa 50319
Email: david.ford@iowa.gov

Purpose and Summary

The Commission proposes new Chapter 17, "Health Care Professional Incentive Program," pursuant to 2025 Iowa Acts, House File 972, division IV. This rulemaking defines key terms used in this chapter and explains the process used to award grants under the program.

Analysis of Impact

1. **Persons affected by the proposed rulemaking:**

- **Classes of persons that will bear the costs of the proposed rulemaking:**

In general, the proposed rulemaking does not impose requirements that would add administrative burden beyond the provisions already established in law. The rulemaking establishes applicant eligibility criteria and a process for awarding funds.

- **Classes of persons that will benefit from the proposed rulemaking:**

Iowa health care professionals, Iowans, and the Commission will benefit from the rulemaking since it clarifies the processes by which Iowans will apply for and qualify for the Health Care Professional Incentive Program.

2. **Impact of the proposed rulemaking, economic or otherwise, including the nature and amount of all the different kinds of costs that would be incurred:**

- **Quantitative description of impact:**

The rulemaking does not impose measurable costs beyond those imposed by law.

- **Qualitative description of impact:**

The rulemaking does not impose measurable costs beyond those imposed by law.

3. **Costs to the State:**

- **Implementation and enforcement costs borne by the agency or any other agency:**

The rulemaking is not anticipated to have any implementation or enforcement costs beyond that of the legislation it is intended to implement.

- **Anticipated effect on State revenues:**

The rulemaking is not anticipated to have any effects on State revenues beyond that of the legislation it is intended to implement.

4. **Comparison of the costs and benefits of the proposed rulemaking to the costs and benefits of inaction:**

The benefit of the proposed rulemaking is to publicly illustrate the process that will be used to consistently administer and disburse the awards and articulate criteria and general provisions of eligibility. The cost of inaction would be confusion about and inconsistency in the process and criteria to be used in the application and awarding of funds under the award.

5. **Determination whether less costly methods or less intrusive methods exist for achieving the purpose of the proposed rulemaking:**

Adopting Chapter 17 is the most efficient approach to outline the clarifications needed to administer the Health Care Professional Incentive Program under 2025 Iowa Acts, House File 972, division IV.

6. **Alternative methods considered by the agency:**

- **Description of any alternative methods that were seriously considered by the agency:**

No other methods were seriously considered because the proposed approach is the most cost-efficient and minimizes potential confusion among Iowans.

- **Reasons why alternative methods were rejected in favor of the proposed rulemaking:**

The alternative methods were rejected because they would lead to informational burdens on health care professionals and the Commission.

Small Business Impact

If the rulemaking will have a substantial impact on small business, include a discussion of whether it would be feasible and practicable to do any of the following to reduce the impact of the rulemaking on small business:

- Establish less stringent compliance or reporting requirements in the rulemaking for small business.
- Establish less stringent schedules or deadlines in the rulemaking for compliance or reporting requirements for small business.
- Consolidate or simplify the rulemaking's compliance or reporting requirements for small business.
- Establish performance standards to replace design or operational standards in the rulemaking for small business.
- Exempt small business from any or all requirements of the rulemaking.

If legal and feasible, how does the rulemaking use a method discussed above to reduce the substantial impact on small business?

The proposed rulemaking is not expected to have an impact on small business.

Text of Proposed Rulemaking

ITEM 1. Adopt the following **new** 283—Chapter 17:

CHAPTER 17
HEALTH CARE PROFESSIONAL INCENTIVE PROGRAM

283—17.1(256) Definitions.

"Award" means the same as defined in Iowa Code section 256.222 as enacted by 2025 Iowa Acts, House File 972. The applicant will select the award type on the initial application and may change that choice if a request is provided to the commission in writing.

"Eligible applicant" means an individual who is an eligible health care professional or agrees to become an eligible health care professional, agrees to sign a program agreement, has not received an award under Iowa Code section 256.222(4) as enacted by 2025 Iowa Acts, House File 972, and agrees to complete the obligation. The eligible applicant completes applications on or before the date established by the commission.

1. The program agreement specifies the obligation and other details pertaining to the program.
2. The obligation is fulfilled by serving clients in eligible practice areas on a full-time basis for five consecutive years or on a part-time basis for seven consecutive years. Progression toward completion of the obligation is verified annually.

"Eligible health care professional" means the same as defined in Iowa Code section 256.222 as enacted by 2025 Iowa Acts, House File 972. The eligible health care professional must be licensed or board-certified to practice as an eligible health care professional before the obligation begins.

"Eligible practice area" means the same as defined in Iowa Code section 256.222 as enacted by 2025 Iowa Acts, House File 972. After an eligible applicant signs an agreement to practice in an eligible practice area, subsequent changes to eligible practice areas will not impact that applicant's continued eligibility for the program.

"Part-time" means an average of at least 30 hours, but fewer than 40 hours, per week.

283—17.2(256) Awarding of funds.

17.2(1) *Award designations.* The commission will establish the number of awards and maximum award amounts for each eligible health care profession prior to the fiscal year in which applications will be accepted and awards obligated.

17.2(2) *Selection criteria.* All eligible applicants will be considered for an award. Awards will be prioritized within each eligible health care profession according to subrule 17.2(3).

17.2(3) *Priority for awards.* If funding is insufficient to award all eligible applicants, new awards will be made to eligible applicants in order of the following priority categories:

a. Eligible applicants who are in their final year of a program of study or of a clinical or residency program that leads to their full license to practice on a full-time basis as an eligible health care professional in an eligible practice area. If funds are insufficient to award all eligible applicants meeting these criteria, eligible applicants will be further prioritized by the date of application.

b. Eligible applicants who are fully licensed eligible health care professionals but who agree to continue or begin full-time practice as eligible health care professionals on a full-time basis in eligible practice areas within six months of signing a program agreement. If funds are insufficient to award all eligible applicants meeting these criteria, eligible applicants will be further prioritized by the date of application.

c. Eligible applicants who are in their final year of a program of study or clinical or residency program that leads to their full license to practice on a part-time basis as an eligible health care professional in an eligible practice area. If funds are insufficient to award all eligible applicants meeting these criteria, eligible applicants will be further prioritized by the date of application.

d. Eligible applicants who are fully licensed eligible health care professionals but who agree to continue or begin full-time practice as eligible health care professionals on a part-time basis in eligible practice areas within six months of signing a program agreement. If funds are insufficient to award all

eligible applicants meeting these criteria, eligible applicants will be further prioritized by the date of application.

17.2(4) *Awarding process.*

a. The commission will provide notice of the eligibility criteria, the anticipated number of awards to be made in each eligible health care profession, the maximum award amount in each eligible health care profession and the application process annually.

b. The commission will collect applications, designate eligible applicants for awards and notify applicants of their eligibility.

c. The commission will track eligible applicants selected to receive awards through completion of their obligation. An obligation is satisfied if completed according to the criteria in Iowa Code section 256.222 as enacted by 2025 Iowa Acts, House File 972 and this rule.

d. Upon verifying completion of the obligation with the eligible health care professional's employer on an annual basis, the commission will pay the annual award.

These rules are intended to implement Iowa Code section 256.222 as enacted by 2025 Iowa Acts, House File 972.