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Amend Senate File 389 as follows: 1 2 <u>#1.</u> By striking page 32, line 26, through page 34, 3 line 15, and inserting the following: 1 <Sec. ____. <u>NEW SECTION</u>. 509.3A CREDITABLE 1 5 COVERAGE. 1 6 For the purposes of any policies of group accident 7 or health insurance or combination of such policies 1 1 8 issued in this state, "creditable coverage" means 1 9 health benefits or coverage provided to an individual 1 1 10 under any of the following: 1 11 1. A group health plan. 2. Health insurance coverage. 1 12 1 3. Part A or Part B Medicare pursuant to Title 13 14 XVIII of the federal Social Security Act. 1 1 15 4. Medicaid pursuant to Title XIX of the federal 16 Social Security Act, other than coverage consisting 17 solely of benefits under section 1928 of that Act. 1 1 5. 10 U.S.C. ch. 55.
 6. A health or medical care program provided 1 18 1 19 1 20 through the Indian health service or a tribal 21 organization. 1 1 22 7. A state health benefits risk pool. 1 23 A health plan offered under 5 U.S.C. ch. 89.
 A public health plan as defined under federal 1 2.4 1 25 regulations. 26 10. A health benefit plan under section 5(e) of 27 the federal Peace Corps Act, 22 U.S.C. } 2504(e). 1 1 11. An organized delivery system licensed by the 1 2.8 29 director of public health. 1 A short=term limited duration policy.
 The hawk=i program authorized by chapter 514I.
 Sec. ____. Section 513B.2, subsection 8, Code 2009, 1 30 1 31 1 32 1 33 is amended by adding the following new paragraph: NEW PARAGRAPH. m. The hawk=i program authorized 1 34 1 35 by chapter 514I. 1 36 Sec. ____. Section 514A.3B, subsection 1, Code 37 2009, is amended to read as follows:38 1. An insurer which accepts an individual for 1 1 38 39 coverage under an individual policy or contract of 1 1 40 accident and health insurance shall waive any time 41 period applicable to a preexisting condition exclusion 1 1 42 or limitation period requirement of the policy or 1 43 contract with respect to particular services in an 44 individual health benefit plan for the period of time 1 1 45 the individual was previously covered by qualifying 1 46 previous coverage as defined in section 513C.3, by 47 chapter 249A or 514I, or by Medicare coverage provided 48 pursuant to Title XVIII of the federal Social Security 49 Act that provided benefits with respect to such 50 services, provided that the qualifying previous 1 coverage was continuous to a date not more than 2 sixty=three days prior to the effective date of the 2 3 new policy or contract. Any days of coverage provided 2 <u>4 to an individual pursuant to chapter 249A or 514I, or</u> <u>5 Medicare coverage provided pursuant to Title XVIII of</u> 2 2 6 the federal Social Security Act, do not constitute 2 7 qualifying previous coverage. Such days of chapter 2 8 249A or 514I or Medicare coverage shall be counted as 9 part of the maximum sixty=three=day grace period and 2 10 shall not constitute a basis for the waiver of any 2 2 11 preexisting condition exclusion or limitation period. 2 12 Sec. ____. Section 514A.3B, Code 2009, is amended 2 13 by adding the following new subsection: 2 14 <u>NEW SUBSECTION.</u> 3. For the purposes of any 2 15 policies of accident and sickness insurance issued in 2 16 this state, "creditable coverage" means health 2 17 benefits or coverage provided to an individual under 2 18 any of the following: a. A group health plan. 2 19 2 20 b. Health insurance coverage. 2 21 Part A or Part B Medicare pursuant to Title с. 2 22 XVIII of the federal Social Security Act. 2 23 d. Medicaid pursuant to Title XIX of the federal 2 24 Social Security Act, other than coverage consisting

2 25 solely of benefits under section 1928 of that Act. e. 10 U.S.C. ch. 55. 2 26 f. A health or medical care program provided 2 27 2 28 through the Indian health service or a tribal 2 29 organization. 2 30 g. A state health benefits risk pool. A health plan offered under 5 U.S.C. ch. 89. 2 31 h. i. 2 32 A public health plan as defined under federal 2 33 regulations. 34 j. A health benefit plan under section 5(e) of the 35 federal Peace Corps Act, 22 U.S.C. } 2504(e). 36 k. An organized delivery system licensed by the 2 2 2 2 37 director of public health. 1. A short=term limited duration policy.
m. The hawk=i program authorized by chapter 514I.> 2 38 2 39 2 40 <u>#2.</u> Page 35, by striking lines 22 through 34 and 41 inserting the following: 42 <<u>NEW SUBSECTION</u>. 6. 2 2 Health care coverage provided 43 under this chapter in accordance with Title XXI of the 2 44 federal Social Security Act shall be recognized as 2 45 prior creditable coverage for the purposes of private 2 46 individual and group health insurance coverage.> 2 2 47 <u>#3.</u> Page 47, by striking lines 4 through 27 and 2 48 inserting the following: 2 49 (1) A health care workforce shortage fund is <a. 50 created in the state treasury as a separate fund under 2 1 the control of the department of public health, in 3 3 2 cooperation with the entities identified in this 3 section as having control over the accounts within the 3 The fund and the accounts within the fund shall 3 4 fund. 3 5 be controlled and managed in a manner consistent with 6 the principles specified and the strategic plan 3 3 7 developed pursuant to sections 135.163 and 135.164. 3 8 (2) The fund and the accounts within the fund 9 shall consist of moneys appropriated from the general 3 10 fund of the state for the health care workforce 3 3 11 support initiative; moneys received from the federal 12 government for the purposes of addressing the health 3 3 13 care workforce shortage; contributions, grants, and 3 14 other moneys from communities and health care 3 15 employers; and moneys from any other public or private 3 16 source available. (3) 3 17 The department of public health and any entity 3 18 identified in this section as having control over any 3 19 of the accounts within the fund may receive 20 contributions, grants, and in=kind contributions to 3 21 support the purposes of the fund and the accounts 3 3 22 within the fund.> 23 <u>#4.</u> Page 49, line 14, by inserting after the word 3 3 24 <appropriated> the following: <in a manner consistent 3 25 with the principles specified and the strategic plan 3 26 developed pursuant to sections 135.163 and 135.164>. 27 <u>#5.</u> Page 49, by striking lines 22 through 27 and 3 3 28 inserting the following: 3 29 State programs that may receive funding from <(2) 30 the fund and the accounts in the fund, if specifically 3 3 31 designated for the purpose of drawing down federal 32 funding, are the primary care recruitment and>. 33 <u>#6.</u> Page 50, line 2, by striking the word <and>. 34 <u>#7.</u> Page 50, line 4, by inserting after the word 3 3 3 35 <received> the following: <; and a program developed 3 3 36 in accordance with the strategic plan developed by the 37 department of public health in accordance with 3 38 sections 135.163 and 135.164.> 3 39 <u>#8.</u> Page 50, by striking lines 5 through 12 and 40 inserting the following: 3 3 3 41 <(3) State appropriations to the fund shall be 42 allocated in equal amounts to each of the accounts 3 3 43 within the fund, unless otherwise specified in the 44 appropriation or allocation. Any federal funding 3 45 received for the purposes of addressing state health 3 3 46 care workforce shortages shall be deposited in the 47 health care workforce shortage national initiatives 3 3 48 account, unless otherwise specified by the source of 49 the funds, and shall be used as required by the source 50 of the funds. If use of the federal funding is not 3 4 1 designated, the funds shall be used in accordance with 4 2 the strategic plan developed by the department of 3 public health in accordance with sections 135.163 and 4 4 4 135.164, or to address workforce shortages as 5 otherwise designated by the department of public 4

6 health. Other sources of funding shall be deposited 4 7 in the fund or account and used as specified by the 4 8 source of the funding.> 4 Page 50, line 28, by inserting after the word 4 9 <u>#9.</u> 4 10 <education> the following: <or the American 11 osteopathic association>. 4 4 12 ± 10 . Page 51, line 2, by inserting after the word 13 <education> the following: <or the American 4 14 osteopathic association>. 4 15 <u>#11</u>. Page 51, line 7, by inserting after the word 4 16 <education> the following: <or the American 4 4 17 osteopathic association>. 18 <u>#12</u>. Page 53, line 12, by striking the word 4 19 <providers> and inserting the following: <employers>. 4 20 <u>#13</u>. Page 53, line 21, by striking the word <loan> 4 21 and inserting the following: <agreement for the 4 4 22 incentive payment>. 23 <u>#14</u>. Page 54, line 20, by striking the words 4 24 <entity partner> and inserting the following: 4 4 25 <employer>. Page 54, line 21, by striking the word 4 26 <u>#15</u>. 27 <entity> and inserting the following: <employer>. 4 4 28 <u>#16</u>. Page 54, line 25, by striking the word 29 <entity> and inserting the following: <employer>. 4 4 30 <u>#17</u>. Page 55, line 11, by striking the word 4 31 <partner>. 32 $\frac{\#18}{18}$. Page 55, line 12, by striking the word 33 <partner> and inserting the following: <community or 4 4 34 employer>. 4 35 ± 19 . Page 56, line 10, by striking the word 4 4 36 <qualified> and inserting the following: 37 <qualifying>. 4 38 ± 20 . Page 56, lines 24 and 25, by striking the 4 4 39 words <advisory council> and inserting the following: 4 40 <department of public health>. 4 41 <u>#21</u>. By striking page 57, line 25, through page 4 42 58, line 1, and inserting the following: <6. SAFETY NET PROVIDER RECRUITMENT AND RETENTION 4 43 4 44 INITIATIVES PROGRAM. The department of public health 45 in accordance with efforts pursuant to sections 4 46 135.163 and 135.164 and in cooperation with the Iowa 4 4 47 collaborative safety net provider network governing 48 group as described in section 135.153, shall establish 4 4 49 and administer a safety net provider recruitment and 50 retention initiatives program to address the health 4 1 care workforce shortage relative to safety net 5 5 2 providers. Any program developed shall require a 5 3 match by the recipient or sponsor of a recipient of at 4 least twenty=five percent of any funds provided 5 5 5 through the health care workforce shortage fund or the 6 safety net provider network workforce shortage 7 account. The department of public health in 5 5 8 cooperation with the governing group shall adopt rules 5 5 9 pursuant to chapter 17A to implement and administer 5 10 such program.> 5 11 ± 22 . Page 58, by striking line 2 and inserting the 5 12 following: 13 <7. ANNUAL REPORT. The department of public 14 health, in cooperation with the entities identified in 5 5 5 15 this section as having control over any of the 16 accounts within the fund shall submit an annual>. 5 17 ± 23 . Page 58, line 6, by inserting after the word 18 <fund> the following: <and the accounts within the 5 5 5 19 fund>. 20 ± 24 . Page 59, line 12, by inserting after the word 21 cpolicies> the following: <, contracts, and plans>. 5 5 22 <u>#25</u>. Page 59, line 14, by striking the words 5 5 23 <insurance plans> and inserting the following: 5 24 <insurers>. 25 <u>#26</u>. Page 59, line 18, by inserting after the word 5 26 <policies> the following: <, contracts, and plans>. 27 $\frac{#27}{2}$. Page 59, line 19, by striking the words 5 5 28 <insurance plan> and inserting the following: 5 5 29 <insurer>. 5 30 <u>#28</u>. Page 59, line 22, by striking the word <plan> 31 and inserting the following: <insurer>. 5 5 32 <u>#29</u>. Page 59, line 23, by striking the words 5 33 <insurance plan> and inserting the following: 5 34 <insurer>. 5 35 <u>#30</u>. Page 59, by striking lines 25 and 26 and 5 36 inserting the following: <feasible and efficacious,

37 and does not provide coverage under the health 5 5 38 insurer's policies, contracts, or plans by January 1, 5 39 2010, the health insurer>. 40 ± 31 . Page 59, line 30, by striking the words 41 <insurance plan's> and inserting the following: 5 5 5 42 <insurer's>. 43 $\frac{#32}{100}$. By striking page 60, line 32, through page 44 61, line 1, and inserting the following: 5 5 <3. The department shall seek funding from 5 45 5 46 nongovernmental health foundations or other nonprofit 5 47 charitable foundations to establish and administer the 48 program. Implementation of the program is subject to 5 49 receipt of such funding. The department shall 5 50 establish and collect fees from private payors for 1 participation in the program. Fees received from 5 6 2 private payors shall be deposited in the general fund 6 6 3 of the state and the amounts received shall be 6 4 appropriated to the department for the purposes of 6 5 administering the program.> 6 ± 33 . Page 61, line 33, by inserting after the word 6 б <drugs,> the following: <biologics, or medical</pre> 6 8 devices,>. 9 <u>#34</u>. 6 By striking page 65, line 13, through page б 10 66, line 28. 11 <u>#35</u>. Page 69, line 25, by striking the word 6 12 <transferred> and inserting the following: 6 13 <transferred;>.
14 #36. Page 71, line 13, by inserting after the word
15 <recipient> the following: <of regulated records>. 6 6 6 16 $\frac{\#37}{\text{monitor}}$ Page 73, line 3, by inserting after the word 17 <monitor> the following: <other>. 6 6 18 <u>#38</u>. Page 73, by striking lines 11 through 17 and 6 19 inserting the following: <opportunities in developing 6 20 a network backbone <u>infrastructure</u>. <u>The public and</u> 21 private entities involved shall structure the public 6 6 6 22 and private networks comprising the backbone 6 23 infrastructure in a manner that allows for seamless 24 interoperability between the networks.> 6 6 25 <u>#39</u>. By striking page 73, line 35, through page 6 26 74, line 6, and inserting the following: <2. Each nursing facility in this state that is not recognized by the Internal Revenue Code as a 6 27 2.8 6 6 29 nonprofit organization or entity shall submit to the 30 department of public health and the legislative 6 31 services agency, annually, the information required to 6 32 be submitted by nonprofit nursing facilities pursuant 6 6 33 to subsection 1. The department of public health, <u>34 cooperation with representatives of such nursing</u> <u>35 facilities, shall adopt rules regarding the format</u> 6 6 for 6 36 submission of such information. 37 3. With regard to the collection of information to 38 be submitted pursuant to subsection 1 as applicable to 37 6 6 39 each public hospital in the state, the department of 6 40 management shall forward to the department of public 6 41 health and the legislative services agency, annually, 6 42 the certified budget for each public hospital.> 6 43 <u>#40</u>. Page 74, by striking lines 19 through 25 and 6 44 inserting the following: <department and the Iowa</p> 45 hospital association regarding the collection, 6 46 reporting, disclosure, storage, and confidentiality of 6 47 the data.> 6 48 <u>**#41</u>.</u></u>** 6 By striking page 74, line 28, through page 49 75, line 9, and inserting the following: б <1. The community advisory council established by 6 50 1 the Iowa healthcare collaborative referred to in 2 section 135.40 shall convene a health care quality and 7 7 7 3 cost transparency workgroup to develop recommendations 4 for legislation and policies regarding health care 5 quality and cost including measures to be utilized in 7 7 7 6 providing transparency to consumers of health care and 7 7 health care coverage.> 7 8 <u>#42</u>. Page 75, by inserting after line 34 the 7 9 following: MEMORANDUM OF UNDERSTANDING == IOWA 7 10 <Sec. 7 11 HEALTHCARE COLLABORATIVE. The department of public 7 12 health shall enter into a memorandum of understanding 7 13 with the Iowa healthcare collaborative referred to in 14 section 135.40. The memorandum of understanding shall 7 7 15 include but is not limited to specification of the 7 16 duties of the Iowa healthcare collaborative with 7 17 respect to the utilization of funds appropriated by

7 18 the state.>
7 19 <u>#43</u>. By renumbering as necessary.
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