HOUSE FILE 726
BY COMMITTEE ON HUMAN RESOURCES

(SUCCESSOR TO HF 549)

(As Amended and Passed by the House March 20, 2019)

[= New Language by the House

* = Language Stricken by the House

A BILL FOR

An Act relating to certain health and human services-related entities including membership, reimbursement, and the elimination or combining of such entities.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

DIVISION I

IOWA COLLABORATIVE SAFETY NET PROVIDER NETWORK

Section 1. Section 135.24, subsection 7, paragraph e, Code 2019, is amended to read as follows:

e. "Specialty health care provider office" means the private office or clinic of an individual specialty health care provider or group of specialty health care providers ~~as referred by the Iowa collaborative safety net provider network established in section 135.153~~, but does not include a field dental clinic, a free clinic, or a hospital.

Sec. 2. Section 135.159, subsection 1, paragraph h, Code 2019, is amended by striking the paragraph.

Sec. 3. REPEAL. Section 135.153, Code 2019, is repealed.

DIVISION II

HOSPITAL HEALTH CARE ACCESS TRUST FUND BOARD

Sec. 4. Section 249M.4, Code 2019, is amended to read as follows:

249M.4 Hospital health care access trust fund ~~board~~.

1. A hospital health care access trust fund is created in the state treasury under the authority of the department. Moneys received through the collection of the hospital health care access assessment imposed under this chapter and any other moneys specified for deposit in the trust fund shall be deposited in the trust fund.

2. Moneys in the trust fund shall be used, subject to their appropriation by the general assembly, by the department to reimburse participating hospitals the medical assistance program upper payment limit for inpatient and outpatient hospital services as calculated in this section. Following payment of such upper payment limit to participating hospitals, any remaining funds in the trust fund on an annual basis may be used for any of the following purposes:

a. To support medical assistance program utilization shortfalls.

b. To maintain the state's capacity to provide access to and

delivery of services for vulnerable Iowans.

c. To fund the health care workforce support initiative created pursuant to section 135.175.

d. To support access to health care services for uninsured Iowans.

e. To support Iowa hospital programs and services which expand access to health care services for Iowans.

3. The trust fund shall be separate from the general fund of the state and shall not be considered part of the general fund. The moneys in the trust fund shall not be considered revenue of the state, but rather shall be funds of the hospital health care access assessment program. The moneys deposited in the trust fund are not subject to section 8.33 and shall not be transferred, used, obligated, appropriated, or otherwise encumbered, except to provide for the purposes of this chapter. Notwithstanding section 12C.7, subsection 2, interest or earnings on moneys deposited in the trust fund shall be credited to the trust fund.

4. The department shall adopt rules pursuant to chapter 17A to administer the trust fund and reimbursements and expenditures as specified in this chapter made from the trust fund.

5. *a.* Beginning July 1, 2010, or the implementation date of the hospital health care access assessment program as determined by receipt of approval from the centers for Medicare and Medicaid services of the United States department of health and human services, whichever is later, the department shall increase the diagnostic related groups and ambulatory patient classifications base rates to provide payments to participating hospitals at the Medicare upper payment limit for the fiscal year beginning July 1, 2010, calculated as of July 31, 2010. Each participating hospital shall receive the same percentage increase, but the percentage may differ depending on whether the basis for the base rate increase is the diagnostic related groups or ambulatory patient classifications.

b. The percentage increase shall be calculated by dividing the amount calculated under subparagraph (1) by the amount calculated under subparagraph (2) as follows:

(1) The amount under the Medicare upper payment limit for the fiscal year beginning July 1, 2010, for participating hospitals.

(2) The projected expenditures for participating hospitals for the fiscal year beginning July 1, 2010, as determined by the fiscal management division of the department, plus the amount calculated under subparagraph (1).

6. For the fiscal year beginning July 1, 2011, and for each fiscal year beginning July 1, thereafter, the payments to participating hospitals shall continue to be calculated based on the upper payment limit as calculated for the fiscal year beginning July 1, 2010.

7. Reimbursement of participating hospitals shall incorporate the rebasing process for inpatient and outpatient services for state fiscal year 2012. However, the total amount of increased funding available for reimbursement attributable to rebasing shall not exceed four million five hundred thousand dollars for state fiscal year 2012 and six million dollars for state fiscal year 2013.

8. Any payments to participating hospitals under this section shall result in budget neutrality to the general fund of the state.

~~9. *a.* A hospital health care access trust fund board is established consisting of the following members:~~

~~(1) The co-chairpersons and the ranking members of the joint appropriations subcommittee on health and human services.~~

~~(2) The Iowa medical assistance program director.~~

~~(3) Two hospital executives representing the two largest private health care systems in the state.~~

~~(4) The president of the Iowa hospital association.~~

~~(5) A representative of a consumer advocacy group, involved in both state and national initiatives, that provides data on~~

~~key indicators of well-being for children and families in order to inform policymakers to help children and families succeed.~~

~~*b.* The board shall do all of the following:~~

~~(1) Provide oversight of the trust fund.~~

~~(2) Make recommendations regarding the hospital health care access assessment program, including recommendations regarding the assessment calculation, assessment amounts, payments to participating hospitals, and use of the moneys in the trust fund.~~

~~(3) Submit an annual report to the governor and the general assembly regarding the use and expenditure of moneys deposited in the trust fund.~~

~~*c.* The department shall provide administrative assistance to the board.~~

DIVISION III

ADVISORY COMMITTEE TO THE CENTER FOR RURAL HEALTH AND PRIMARY CARE

Sec. 5. Section 135.107, subsection 5, Code 2019, is amended by striking the subsection.

Sec. 6. Section 262.78, subsection 3, Code 2019, is amended to read as follows:

3. The president of the university of Iowa, in consultation with the president of Iowa state university of science and technology, shall employ a full-time director of the center. The center may employ staff to carry out the center's purpose. The director shall coordinate the agricultural health and safety programs of the center. The director shall regularly meet and consult with the ~~advisory committee to the~~ center for rural health and primary care. The director shall provide the board of regents with relevant information regarding the center.

DIVISION IV

GOVERNMENTAL PUBLIC HEALTH ADVISORY COUNCIL

Sec. 7. Section 135A.2, subsection 2, Code 2019, is amended by striking the subsection.

Sec. 8. Section 135A.9, subsection 1, Code 2019, is amended by striking the subsection.

Sec. 9. REPEAL. Section 135A.4, Code 2019, is repealed.

DIVISION V

PATIENT-CENTERED HEALTH ADVISORY COUNCIL

Sec. 10. REPEAL. Section 135.159, Code 2019, is repealed.

DIVISION VI

COMBINING STATE MEDICAL EXAMINER ADVISORY COUNCIL WITH THE INTERAGENCY COORDINATING COUNCIL

Sec. 11. Section 691.6B, Code 2019, is amended to read as follows:

691.6B Interagency coordinating council.

1. An interagency coordinating council is created to ~~advise~~ do all of the following:

a. Advise and consult with the state medical examiner on a range of issues affecting the organization and functions of the office of the state medical examiner and the effectiveness of the medical examiner system in the state.

b. Advise the state medical examiner concerning the assurance of effective coordination of the functions and operations of the office of the state medical examiner with the needs and interests of the departments of public safety and public health.

2. Members of the interagency coordinating council shall include ~~the~~ all of the following:

a. The state medical examiner, or when the state medical examiner is not available, the deputy state medical examiner~~; the~~.

b. The commissioner of public safety or the commissioner's designee~~; the~~.

c. The director of public health or the director's designee~~; and the~~.

d. The governor or the governor's designee.

e. Representatives from the office of the attorney general, the Iowa county attorneys association, the Iowa medical

society, the Iowa association of pathologists, the Iowa association of medical examiners, the statewide emergency medical system, and the Iowa funeral directors association.

3. The interagency coordinating council shall meet on a regular basis, and shall be organized and function as established by the state medical examiner by rule.

Sec. 12. REPEAL. Section 691.6C, Code 2019, is repealed.

DIVISION VII

TOBACCO USE PREVENTION AND CONTROL COMMISSION — MEMBERSHIP — MEETINGS — EXPENSES

Sec. 13. Section 142A.3, subsection 6, Code 2019, is amended to read as follows:

6. ~~Citizen members shall be reimbursed for actual and necessary expenses incurred in performance of their duties. Citizen members shall be paid a per diem as specified in section 7E.6.~~ Legislative members are eligible for per diem and expenses as provided in section 2.10.

Sec. 14. Section 142A.3, subsection 9, Code 2019, is amended to read as follows:

9. The commission shall elect a chairperson from among its voting members and may select other officers from among its voting members, as determined necessary by the commission. The commission shall meet ~~regularly~~ no more than quarterly as determined by the commission, upon the call of the chairperson, or upon the call of a majority of the voting members.

Sec. 15. TOBACCO USE PREVENTION AND CONTROL COMMISSION — MEMBERSHIP REDUCTION. The tobacco use prevention and control commission shall evaluate the membership of the commission and shall submit to the department of public health the * [commission's recommendation, to be submitted by the director of public health as proposed legislation in compliance with section 2.16 for consideration by the general assembly during the 2020 legislative session, to reduce the number of voting members from nine to seven members.]

DIVISION VIII

TRAUMA SYSTEM ADVISORY COUNCIL

Sec. 16. Section 147A.24, subsection 2, Code 2019, is amended to read as follows:

2. The council shall consist of seven members to be appointed by the director from the recommendations of the organizations in subsection 1 for terms of two years. Vacancies on the council shall be filled for the remainder of the term of the original appointment. Members whose terms expire may be reappointed.

Sec. 17. TRANSITION PROVISIONS. Notwithstanding any provision of section 147A.24, subsection 2, to the contrary, a member of the trauma system advisory council on July 1, 2019, shall continue serving until the expiration of that member's term or until a vacancy occurs prior to the expiration of the applicable term, and such vacancy shall only be filled to the extent consistent with and necessary to maintain the total number of members of the council specified in section 147A.24, subsection 2, as amended in this Act.

DIVISION IX

TELECONFERENCE OPTION FOR STATE ENTITIES

Sec. 18. NEW SECTION. **135.11B Statutory board, commission, committee, or council of committee — teleconference option.**

Any statutorily established board, commission, committee, or council established under the purview of the department shall provide for a teleconference option for board, commission, committee, or council members to participate in official meetings.

DIVISION X

ELIMINATION OF PAYMENT OF EXPENSES FOR PUBLIC MEMBERS OF CERTAIN STATE ENTITIES

Sec. 19. Section 105.3, subsection 6, Code 2019, is amended by striking the subsection.

Sec. 20. Section 135.43, subsection 2, unnumbered paragraph 1, Code 2019, is amended to read as follows:

The membership of the review team is subject to the

provisions of sections 69.16 and 69.16A, relating to political affiliation and gender balance. Review team members who are not designated by another appointing authority shall be appointed by the state medical examiner. Membership terms shall be for three years. A membership vacancy shall be filled in the same manner as the original appointment. The review team shall elect a chairperson and other officers as deemed necessary by the review team. The review team shall meet upon the call of the state medical examiner or as determined by the review team. ~~The members of the team are eligible for reimbursement of actual and necessary expenses incurred in the performance of their official duties.~~ The review team shall include the following:

Sec. 21. Section 135.62, subsection 2, paragraph e, Code 2019, is amended by striking the paragraph.

Sec. 22. Section 147A.3, Code 2019, is amended to read as follows:

147A.3 Meetings of the council — quorum ~~— expenses~~.

Membership, terms of office, and quorum~~, and expenses~~ shall be determined by the director pursuant to chapter 135.

Sec. 23. Section 256I.3, subsection 3, Code 2019, is amended by striking the subsection.

DIVISION XI

ELIMINATION OF CHILD WELFARE ADVISORY COMMITTEE, CHILD SUPPORT ADVISORY COMMITTEE, CHILDREN'S MENTAL HEALTH WAIVER IMPLEMENTATION COMMITTEE, AND PROPERTY TAX RELIEF FUND RISK POOL.

Sec. 24. Section 217.3A, subsection 1, Code 2019, is amended to read as follows:

1. *General.* The council on human services shall establish and utilize the advisory ~~committees~~ committee identified in this section and may establish and utilize other advisory committees. The council shall establish appointment provisions, membership terms, operating guidelines, and other operational requirements for committees established pursuant to

this section.

Sec. 25. Section 217.3A, subsections 3 and 4, Code 2019, are amended by striking the subsections.

Sec. 26. Section 426B.5, subsection 1, Code 2019, is amended by striking the subsection.

Sec. 27. 2005 Iowa Acts, chapter 117, section 4, subsection 3, is amended by striking the subsection.

[DIVISION XII

MEDICAL ASSISTANCE ADVISORY COUNCIL

Sec. 28. MEDICAL ASSISTANCE ADVISORY COUNCIL — VOTING MEMBER SUSPENSION. Notwithstanding any provision of law to the contrary, if a representative of a professional or business entity, a public member, or a member of the hawk-i board who is a voting member of the medical assistance advisory council pursuant to section 249A.4B, subsection 2, is absent for two consecutive meetings of the medical assistance advisory council, the member shall be suspended from participation in the deliberations of the advisory council for a period of twelve months from the date of the member's second absence. During the member's suspension period, the voting rights of the professional or business entity, consumer group or consumer organization, or the hawk-i board shall not be exercised, but the vacancy in voting membership shall not prohibit the medical assistance advisory council from achieving a quorum.]