

Government Efficiency Review Committee

Iowa Department of Public Health
Presented by Director Gerd Clabaugh
November 13, 2019



IDPH: Licensing & Regulatory Functions

IDPH provides many licensing functions, including a wide variety of regulatory and professional licensure for health care, social services, behavioral health and more. Some work is done through boards, some is not. Among the many licensing areas are:

- Substance Use and Gambling Treatment
- Radioactive Materials
- Radon Testing
- Emergency Medical Services
- Pools and Spas
- Tattoos and Tanning
- Lead Testing
- Backflow Assembly
- Migrant Labor Camps
- Medical Cannabidiol Manufacturer and Dispensing



IDPH: Professional Licensure Boards

- IDPH has 24 professional licensure boards.
- The boards are regulatory bodies established to protect the health of Iowans.
- Boards do this by providing oversight to the professions for their social, behavioral health and health care services.
- 4 professional licensing boards have their own executive directors that report to IDPH and oversee the professions of:
 - Medicine
 - Dentistry
 - Pharmacy
 - Nursing
- 19 professional licensing boards are administered within the Bureau of Professional Licensure at IDPH.
- Those boards provide regulation and licensure functions for 39 professions, 14 temporary permits and 7 establishment licenses.
- The bureau is funded with fees for licenses that are retained and reinvested into the operations of each board.
- IDPH also supports the operation of the Plumbing and Mechanical Systems Licensing Board.

19 Professional Licensure Boards and Commissions

- Board of Athletic Training
- Board of Barbering
- Board of Behavioral Science
- Board of Chiropractic
- Board of Cosmetology Arts and Sciences
- Board of Dietetics
- Board of Hearing Aid Dispensers
- Board of Mortuary Science
- Board of Massage Therapy Examiners
- Board of Nursing Home Administrators
- Board of Optometry
- Board of Physician Assistants
- Board of Podiatry
- Board of Psychology
- Board of Physical and Occupational Therapy
- Board of Respiratory Care and Polysomnography
- Board of Sign Language Interpreters and Translators
- Board of Speech Pathology and Audiology
- Board of Social Work

IDPH Bureau of Professional Licensure: <https://idph.iowa.gov/Licensure>

Licensure Cont.



Across licensure functions, the department is responsible for regulating and licensing more than 200,000 active licenses in Iowa.

Members of professional licensure boards provide important professional and consumer guidance and regulatory oversight, ultimately working to protect the health of Iowans.

Boards Staffing & Efficiencies



- IDPH boards have focused on efficiencies and sharing resources whenever possible.
- 4 staff serve as executive officers of all 19 professional licensure boards.
- Staffing is shared with other agencies, including inspections with DIA and services by outside computer consultants.
- Professional licensure has seen a decrease from 22 FTE equivalents in 2017 to 16.5 today for performing the boards' duties.
- Plumbing and Mechanical Systems has seen reduction from 11 staff to 4 since its inception.
- Teleconference options are available for board members and do reduce travel costs.

Funding

Fee-Supported Programs

Fee History: The Legislature moved from an appropriation-based system to a fee-based system in July of 2007, with the expectation that most licensing programs charge and retain sufficient fees to offset the cost of the respective program.

Fee Challenges:

- Since 2007, it has been challenging to raise fees, which must be approved through the Administrative Rules Review Committee (ARRC).
- A number of boards and licensing programs do not retain enough fees to cover current expenditures.
- Fee-based programs have inconsistent statutory authority related to fee retention, with various methods for handling fee revenue.
- The number of licensees for most of the boards is similar to 2007, with a some boards having fewer licensees, lowering revenue further.
- Fees also have remained static, but during the same time period, inflation has increased average prices by more than 23 percent, according to the Bureau of Labor Statistics.

Recommendations & Other Actions

2013 Report Update



Iowa Department of Public Health
Promoting and Protecting the Health of Iowans

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Director

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

TO: Chief Clerk of the Iowa House
Secretary of the Iowa Senate
Office of the Governor and Lt. Governor

FROM: Iowa Department of Public Health
DATE: January 11, 2013
RE: In response to SF 2336.

I am pleased to submit this report from the Iowa Department of Public Health (IDPH) in fulfillment of the requirements of [Senate File 2336](#), Section 9 as passed by the Iowa Legislature and signed by Governor Branstad on May 25, 2012. Per the legislative charge, review was conducted of the regulatory boards, advisory councils, and committees under the purview of IDPH. The following report provides recommendations of improvements in efficiency, elimination of redundancies, and elimination of certain entities under consideration.

Dating back to the inception of the Iowa State Board of Health in 1880, IDPH has enjoyed a rich history of receiving feedback and direction from citizens through coordination of stakeholder boards, advisory councils, and commissions. Many of the department's boards were implemented by the General Assembly to serve as regulatory professional licensing bodies to oversee the practice of various professions serving Iowans. Promoting and protecting the health of Iowans is the mission of the department. Achievement of this mission is not possible without the input from the citizens of this state.

Periodically, it is prudent to review the many stakeholder groups that exist in the department. It is important to be sure that they continue to be unique in their charge and to have a clear and distinguishable purpose so that staff and funding resources can be utilized efficiently and effectively. The General Assembly's request for the development of this report is welcomed for those reasons. The department has worked to develop thoughtful recommendations for policy makers to consider.

Our task in this report has not been to pass judgment on the viability and worthiness of the work that each of these important boards, councils, and committees conduct. Rather, our effort has been focused on the efficient operations, appropriate organizational affiliation, and identification of duplication to ensure we can provide adequate staff resources to support the work of each group. Our recommendations offer policy makers ideas to organize and improve the structure of specific boards, councils, and committees to optimize the public direction, feedback, and function of these entities for the benefit of all Iowans.

We look forward to working with the members of the General Assembly, the Governor and Lt. Governor, and the public to answer questions about these recommendations. We appreciate the opportunity to provide them.

Sincerely,

IDPH provided an extensive report to the General Assembly in 2013 examining boards and commissions and professional licensure.

Some recommendations have been adopted, some have changed over time.

A copy and the report is found here:

<https://www.legis.iowa.gov/docs/publications/DF/661969.pdf>

Updates & Reminders from 2013 Report

Board-Specific Recommendations:

- Combine Board of Athletic Training and Board of Physical and Occupational Therapy
- Combine Board of Barbering and Board of Cosmetology Arts and Sciences
- Combine Board of Hearing Aid Dispensers and Board of Speech Pathology and Audiology
- Maintain Physician Assistants separate from Board of Medicine

Licensing Recommendations:

- Create a moratorium on new licenses. Legislation has created 7 new licenses since 2012 - orthotists, prosthetists, pedorthists, polysomnographers, behavioral analysts (and asst.) and genetic counselors.
- Licenses types that have been proposed in recent years but not approved: Music therapists, art therapists and midwives.
- Continue to evaluate endorsement/license portability as well as compacts.
- Consider a legislative directive to require all professional licensure boards to examine endorsement/license portability and compacts.

Recommendations Continued



Possible Fee Solutions: (No Impact to General Fund)

- Support fee retention flexibility to meet statutory obligations.
- Establish a standardized process for fee-based programs to “true-up” revenues with expenditures.
- Mandate a process for regular fee adjustment intervals and amounts.
- Include annualized increased costs in doing business to match the Consumer Price Index.
- Edit appropriate sections of code to allow IDPH to retain fees collected for each program.

Other Actions – Endorsement

- Many IDPH professional licensure boards have adopted provisions for endorsement.
- This happens when evidence of licensure in good standing for a specified period of time (generally 1-2 years) in another state, with qualifications substantially similar to those in Iowa, is deemed sufficient to meet Iowa's licensing requirements.
- Boards work to make the endorsement process as simple as possible, to ease license portability into the state and for administrative efficiency.
- Endorsement eases the portability path one-way; it does not ease the path for licensees leaving Iowa.
- [Arizona](#) and [Pennsylvania](#) have recently passed sweeping endorsement laws that echo this approach.

Other Actions – Licensing Compacts



- Compacts allow portability both ways and are another option that several boards are reviewing.
- The Physical Therapy/Occupational Therapy Board joined a compact [following 2018 legislation](#).
- The compact does not provide a separate Iowa license to out-of-state licensees or vice versa, but grants practice privileges to licensees outside their home state if they meet the compact requirements.
- The results:
 - Iowa has had many out-of-state physical therapists seamlessly receive a privilege to practice in Iowa.
 - The new background check requirement for an Iowa license has added to processing time, dropping Iowa from one of the quickest license issuers to middle of the pack.

Final Notes on the Committee's Request

Collaboration with Other State Agencies



IDPH Works Across Government

- Acute disease outbreak response and investigation with DIA and IDALS
- Emergency response and planning with HSEMD
- Radioactive material transportation security with State Patrol/DOT/HSEMD
- Water quality testing and environmental exposure risk assessments with DNR
- Provide vital record data (birth, death) for purposes of agency verification and public health research
- Paternity processing work with DHS
- Verification of vital record events for purposes of investigations at DIA, DOT
- Vital records for DHS foster care services
- Co-occurring conditions - mental and behavioral health work with DHS
- Your Life Iowa resources with DHS
- Barbering apprenticeship and plumbing apprenticeship with DOC
- Childhood health screenings with DOE
- Tobacco enforcement with ABD
- Workforce conversations with IWD, DOE
- Medical Cannabidiol with IDALS, DPS, ODCP, DOT
- Ongoing collaboration with Dept. on Aging
- SNAP education with DHS, WIC collaboration with DOE programs, 5-2-1-0 shared resources with state agencies

Questions



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