Iowa has been active in introducing state market initiatives as part of the state’s healthcare reform efforts. In 2019, legislators pursued a bill establishing a single-payer system for the state. The proposed system, called the Healthy Iowa Program, would have provided comprehensive universal single-payer healthcare coverage and a healthcare cost control system for the benefit of all residents of Iowa. In another notable effort, the state pursued an act in 2018 that would establish a public option for Iowa residents by implementing a state-run Medicaid program. This plan would have allowed Iowans to pay a premium to the state and get the same coverage as Medicaid patients. Although unsuccessful in their respective sessions, Iowa’s latest attempts at state-level reform can be seen as laying the groundwork for future efforts.

To control healthcare costs, Iowa protects consumers from some surprise medical bills by requiring insurers to cover all charges provided to an enrollee for emergency services, including those provided by out-of-network professionals and facilities. Additionally, Iowa’s telehealth law provides coverage parity, requiring insurers to provide the same level of coverage for telemedicine as in-person visits.

In the provider market, Iowa has limited oversight of certain non-profit corporations by requiring court approval for public benefit or religious corporations prior to a merger with a for-profit corporation. In 2020, Iowa’s certificate of need law, which requires healthcare providers to obtain state approval before opening a new facility, survived a legal challenge in the 8th Circuit after being attacked as anticompetitive and unconstitutional.