

Copic 2026 Legislative Recap:

What Passed, What Changed, What's Next

Top Takeaways from the 2026 Session

A quick look at the biggest changes for your practice. Read on for the full bill-by-bill breakdown.

- **Physician licensure requirements were streamlined.**
Renewal periods move from every two years to every three years, license and renewal processing timelines are shortened, designees may submit applications, and continuing education requirements are capped.
- **Minor consent rules changed in two important areas.**
Minors can no longer independently consent to STD/STI-related vaccinations, but pregnant minors may consent to prenatal, intrapartum, and postnatal care when a parent, guardian, or legal custodian is not readily available.
- **Medication abortion access is now more restricted.**
Abortion-inducing medications generally must be prescribed during an in-person visit, and the law creates civil liability and licensing consequences for clinicians who distribute medication outside the law.
- **End-of-life decision-making laws were updated.**
The legislature clarified authority and procedures tied to palliative care, hospice, life-sustaining treatment, out-of-hospital DNR orders, and durable power of attorney for healthcare.
- **Looking ahead to 2027:**
Expect Iowa healthcare legislation to continue focusing on clinician practice issues, patient consent requirements, insurance-related regulation, and policy proposals shaped by broader fiscal and public-program pressures.



Have questions?

Contact Copic's Director of Public Affairs, Sarah Meirose, at smeirose@copic.com.

About This Report

Copic developed this **2026 Legislative Recap Report** to help you understand the healthcare-related changes that came out of the 2026 legislative session and what actions, if any, you and your practice should consider.

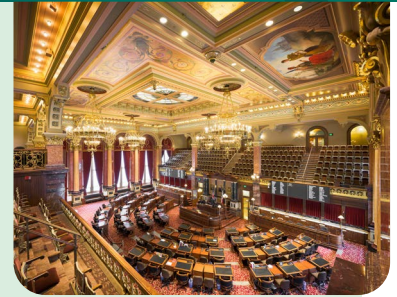
It's part of our dedicated, year-round legislative advocacy efforts, focused on protecting access to quality care, preserving the physician-patient relationship, and maintaining your ability to review, deliver and improve care.

This year, we tracked 643 bills across our key markets and worked directly with legislators and partners to shape healthcare policy. Across our markets, the 2026 legislative session taught us that **healthcare policy is inseparable from state budget issues**. Even bills that aren't explicitly about healthcare delivery are shaped by fiscal pressure, a dynamic likely to continue into 2027.

The information provided herein does not, and is not intended to constitute legal, medical, or other professional advice; instead, this information is for general informational purposes only. The specifics of each state's laws and the specifics of each circumstance may impact its accuracy and applicability, therefore, the information should not be relied upon for medical, legal, or financial decisions and you should consult an appropriate professional for specific advice that pertains to your situation.

What Did We Learn from the 2026 Iowa Legislative Session?

We tracked 124 bills in Iowa this year. Iowa continues to pursue substantial legislation related to healthcare. During the session, legislators demonstrated an increasing willingness to regulate insurance practice in favor of clinicians, pursue legislation related to Make American Healthy Again priorities, and increase patient requirements for participation in public programs.



The Full Breakdown

Explore details of key bills in this section, including who's impacted, what changed, and what to consider.

AREA: LICENSURE

Bill Title: Licenses to Practice Medicine and Surgery or Osteopathic Medicine and Surgery

Bill number: [SF 2184](#)

Who this impacts: Healthcare clinicians (MDs, DOs, and Administrative Medicine), hospitals and health systems, medical groups and physician practices, academic medical centers, and human resources teams.



Summary

This new law amends the licensing process for healthcare clinicians practicing medicine and surgery, as well as osteopathic medicine and surgery. It is designed to update licensure requirements by making them clearer and was championed by our partners at the Iowa Medical Society.



Considerations

This bill went into effect on July 1, 2026

For physicians

- **The bill updates the physician license renewal period from every two years to every three years.** This reduces administrative burden on practicing physicians while maintaining necessary oversight. The new law also adjusts expiration to happen automatically on your birth date.
- **You are now able to utilize a designee to submit applications on your behalf,** such as a hospital administrator or medical staff coordinator.
- **Processing times are now shorter.** The Iowa Board of Medicine is now required to process a license application and renewal within 45 days of receipt, including a cap of 75 days if additional documentation is requested. The Board must issue a final decision on administrative medicine license applications within the same timeframes as outlined for medical licenses.
- **Continuing education hours are also capped.** This bill prohibits the medical board from mandating that a clinician completes more than 15 hours of continuing education credits per year to maintain licensure.

AREA: MINORS AND CONSENT

Bill Title: Provides an Exception to a Minor's Legal Capacity to Consent to the Provision of Medical Care or Services for a Sexually Transmitted Disease or Infection

Bill number: [SF 304](#)

Who this impacts: Healthcare entities, pediatricians, family medicine clinicians, obstetricians and gynecologists, advanced practice providers, and legal/compliance.

**Summary**

This bill removes a minor's legal capacity to consent to vaccinations for an STD or infection. The minor still maintains the capacity to give consent to the prevention, diagnosis, and treatment of a sexually transmitted disease or infection by a hospital, clinic, or healthcare clinician.

**Considerations**

This bill went into effect on July 1, 2026

For clinicians

- **Obtain mandatory parental consent for vaccines.** This includes approval to receive HPV and Hepatitis B vaccines. STD/STI testing and treatment may still be provided based on a minor's consent.
- **Consult Legal and Compliance teams to review existing policies, adolescent confidentiality programs, vaccination procedures, and electronic health record workflows.**

For healthcare entities

- **Update consent policies and educate staff on the distinction between STI-treatment and STI-related vaccinations.**

AREA: MINORS AND CONSENT

Bill Title: Pregnant Minor's Legal Capacity to Consent to the Provision of Certain Medical Care

Bill number: [HF 2564](#)

Who this impacts: Obstetric clinicians, family medicine clinicians providing obstetric care, advanced practice providers, nursing staff, emergency medical clinicians, hospitals, medical practices, and legal/compliance.

**Summary**

This new law grants pregnant minors the legal consent to prenatal, intrapartum, and postnatal medical care if a parent, guardian, or legal custodian is not readily available.

**Considerations**

This bill went into effect on July 1, 2026

For legal and compliance

- **Educate your clinicians on their continued responsibility to obtain consent, including when received from the minor patient.** The law explicitly states that healthcare clinicians are not absolved of their duty to obtain full, standard informed consent directly from the minor patient before administering care.
- **Make it clear that the consent can be obtained from all outlined authorized providers.** This includes physicians, advanced registered nurse practitioners (ARNPs), physician assistants (PAs), registered nurses (RNs), licensed practical nurses (LPNs), or emergency medical care personnel.

AREA: NONCOMPETE AGREEMENTS

Bill Title: Prohibition of Noncompete Clauses in Certain Employment Contracts Entered into by the University of Iowa Hospitals and Clinics (UIHC)

Bill number: [HF 2254](#)

Who this impacts: UIHC healthcare clinicians

**Summary**

This bill requires the University of Iowa Hospitals and Clinics to establish a policy prohibiting noncompete clauses in employment contracts with certain healthcare professionals. Specifically, this prohibition applies to employment agreements entered into, extended, or renewed on or after the effective date of the bill and covers advanced registered nurse practitioners, licensed practical nurses, pharmacists, physicians, physician assistants, and registered nurses.

**Considerations**

This bill went into effect on June 2, 2026

For clinicians

- **Always be mindful of the stipulations within your contract of employment.** This bill defines a noncompete clause as any post-employment restriction that stops a healthcare worker from practicing within a specific geographic boundary or for a set length of time. The noncompete restriction applies directly to any new employment agreements, as well as any existing contracts that are extended or renewed on or after the law's effective date.
- **This legislation was intended to encourage medical professionals moving into the broader state workforce.**

AREA: ABORTION

Bill Title: Relating to Medication Abortions Including Informed Consent and the Dispensing of Abortion-Inducing Drugs to Patients Within the State

Bill number: [HF 2788](#)

Who this impacts: Obstetric clinicians, and legal/compliance

**Summary**

This bill restricts access to abortion-inducing medications by requiring patients to receive prescriptions during an in-person visit.

**Considerations**

This bill went into effect on July 1, 2026

For clinicians

- **Be aware that medications for abortion-inducing medications cannot be prescribed via telehealth or through mail-order services in the state of Iowa.**
- **Understand that the definitions in the bill provide exceptions for treatments for miscarriage and ectopic pregnancy.**

**Medical liability coverage considerations**

This law places civil liability on the healthcare clinician who distributes abortion-inducing medication outside of the law. The clinician's license will be subject to disciplinary measures, and the patient seeking the medication will be redacted from all documentation in court proceedings. Medical professional liability policies typically contain exclusions for unlawful acts.

AREA: ADVANCED DIRECTIVES

Bill Title: Healthcare Decisions Related to Palliative Care, Hospice Programs, Life-Sustaining Procedures, Out-of-Hospital Do-Not-Resuscitate Orders, and Durable Power of Attorney for Healthcare

Bill number: [HF 2305](#)

Who this impacts: Healthcare clinicians, and legal/compliance



Summary

This legislative package amends laws related to end-of-life healthcare decision-making, focusing on palliative care, hospice programs, life-sustaining procedures, and out-of-hospital do-not-resuscitate (DNR) orders. It clarifies procedures for revoking health care directives, determining terminal conditions, and making treatment decisions when patients are incapacitated, emphasizing the importance of respecting patient preferences and designated decision-makers.



Considerations

This bill went into effect on July 1, 2026

For clinicians

- **Be aware of the expanded provider authority provided by this bill.** The bill allows physician assistants and advanced registered nurse practitioners to officially declare terminal conditions, manage care, and execute end-of-life protocols independent of physicians.

For legal and compliance

- **This new law grants the patient's legal representatives (attorneys in fact or guardians), or the patient's family and others in the absence of formally appointed legal representatives, the authority to make critical health decisions** regarding hospice placement, out-of-hospital Do-Not-Resuscitate (DNR) orders, and the withdrawal of life-sustaining measures without needing court approval.