



Iowa Senator Amanda Ragan

13-year legislative veteran remains focused on ensuring care for the most vulnerable, and helped craft recent Medicaid expansion

by Kate Tormey (ktormey@csg.org)

Even before being elected to the Iowa Senate in 2002, Amanda Ragan knew her way around the Capitol. She previously had been a legislative page and, early on in her career, served as a legislative clerk.

But it was another experience that uniquely prepared Ragan to serve during this period in Iowa's political history. She grew up with parents of two different political parties — her father was a staunch Democrat and supporter of President Franklin Roosevelt; her mother had lost a brother in World War II and was not of the same opinion.

"I found that you could have people that have different opinions still share the same values," Ragan says. "My parents got along fine; they just felt there were different [parties] that answered their needs."

That perspective has served Ragan well during her 13 years in the Iowa Legislature, a period in which partisan control of state government has, more often than not, been divided. That means bipartisan compromise has not just been a goal in Iowa; it has been a necessity for state government to work.

Take, for example, Iowa's recent Medicaid expansion.

Achieved through a federal waiver, the Health and Wellness Plan was developed by Ragan and other legislators from both sides of the aisle. Because of that bipartisan work inside the Capitol, people across Iowa have now been enrolling in health coverage through the expansion for over a year.

Providing help inside, outside Capitol

Ragan was raised on an Iowa cattle farm, and the northern Iowa district that she represents today includes a mix of rural areas and bigger towns such as Mason City (where she now lives).

But wherever she goes in the district — and she knocked on 10,000 doors during the most recent election — Ragan says her constituents share similar goals and priorities.

"For the entire time I have been in the legislature, people of any age are concerned about education," she notes.

"Whether they are grandparents or have no children, they understand that [it] is a great investment. It's the infrastructure of what your state is going to be and of how it will care for the next generation."

CSG Midwest talked with Ragan about her own policy priorities and insights on the future of her state. Here are excerpts from the recent interview.

Q: You decided to run for state office in part because of some experiences you've had outside the legislature. What inspired you to run?

A: In the real world, I come from a farming background; we raised cattle. And then I became a single mom for a while with two kids, so I understand the struggles families face. Right now I am the director of a Meals on Wheels program and community kitchen; I've done that for about

Bio-sketch: Sen. Ragan

- ✓ elected to Iowa Senate in 2002
- ✓ a Democrat who currently serves as assistant majority leader
- ✓ executive director of two nonprofit organizations in her community
- ✓ raised on a cattle farm in her northern Iowa legislative district
- ✓ vice chair of the Human Resources Committee and chair of the Health & Human Services Budget Subcommittee; vice chair of the Agriculture Committee

17 years. The soup kitchen started in the 1980s, and I've seen a lot of people go through there that have needs that many people would not see.

One of the things I saw were a lot of elderly people who were on fixed incomes and were struggling with prescription-drug costs and a wide variety of other things that affect them because of their health issues.

Many times, my focus is on the most vulnerable people who don't have a voice. There are a lot of others that do that as well, I just have the opportunity to see them in my other job, too. There are a lot of issues with child care and helping families that are struggling that go unnoticed.

Q: You were instrumental in helping to craft Iowa's Medicaid expansion. Can you talk about how it came together?

A: Rep. [Linda] Upmeyer and I worked on the Iowa Health and Wellness Plan, which was the expansion of Medicaid. We didn't seem to be getting anywhere because both parties had their ideas of how to solve the problem. So we worked hard on it, and I think our state has done very well in getting people signed up and making sure they receive services.

Learning to work together is something we should be proud of. It made such a difference in so many lives, and when you're working on it, you don't always realize that. But I feel really good that people are able to access health care and that compromise does work. When people work together, there is a light at the end of the tunnel.

While it wasn't a perfect piece of legislation and there are probably things that both parties would have done differently, I think we can be proud of it.

Q: Now that the plan is up and running, what has been the reaction among Iowans?

A: One of the things that really makes me feel good is meeting folks that did not have health care before. They were working hard

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and now have something as simple as getting their blood-pressure medicine or getting a physical. We have been blessed to offer this plan to folks.

When you don't have health insurance, that can be devastating, so this is something that is going to make a difference for families. I have heard from numerous people things like, "I can get medication that I couldn't before" and "I was able to get in to see a doctor, and I couldn't before."

The hospitals have seen the plan as helpful because their charity care went down, and they don't see as much of that population in the emergency room, which is where they were seeing them. And that's costly. ... I hope that other states look at [replicating the plan] — it would be sad if others didn't take the opportunity.

Q: Iowa is moving a large part of its Medicaid population into managed care. You've said you have concerns about that transition; what are they?

A: The [state] Department of Human Services is moving to managed care, which is a \$4.2 billion change. While we understand that many states are doing that, I think that it would have been important to involve the Legislature in that process. [We've come up with] some basics we can put in to protect the consumers and the providers, and we hope the governor is agreeable to that.

There are a lot of unknowns out there. For example, when it comes to [care for people with] mental health issues and disabilities, there is \$51 million to be saved in the first six months. We think that is an interesting number because we don't have any details on [how that will happen], so we are concerned about that to say the least. ...

It is a large change from the services we have now. We have had managed care in substance abuse and other programs ... but we have to be sure it all fits together and people don't fall through the cracks.

We just want to make sure that our constituents who are vulnerable can continue to get services. We have seen successes in other states, and we have seen less-than-successes in other states. ★