

Idaho Academy of Family Physicians
2019 Legislative Report
Week 11, March 18 -- March 22

Medicaid Merry-Go-Round:

The Medicaid shuffle hit high stride this week as the full House approved yet a new version of a “sideboards” bill that includes mandatory work requirements. At nearly the same moment the Senate Health and Welfare Committee voted out a different “sideboards” bill sponsored by its chairman, Senator Fred Martin. That bill includes a voluntary work training provision for Medicaid recipients. Martin’s version of the bill represents the fifth one to be introduced this legislative session as a Medicaid expansion solution remains elusive.

In contrast to the previous versions of the bill, Senator Martin’s version (S1204, described below) was met with positive testimony and response from groups opposed to all previous versions.

So what happens now? The Senate will have in its possession two versions of the Medicaid bill. They could pass Senator Martin’s version and send it to the House at which time the two bodies might play a game of chicken (Senator Martin’s version almost certainly cannot pass the House). OR the Senate could simply vote to pass the House version and be done. The likely scenario is there will be some sort of back room compromise deal that gets worked out, or the rare possibility of a conference committee.

Either way, this issue is certainly the one to drag the legislative session out longer than planned.

New Legislation This Week:

[H277: Medicaid “sideboards” bill \(revised version of H249\)](#) – by Rep. Vander Woude

Status: Passed the House on March 20 by vote of 45-25, to Senate Health and Welfare committee.

Changes from H249:

- changes work requirement from 30 hours to 20 hours/week. Part time volunteering is acceptable. 20hrs/week based on minimum wage and to be calculated on monthly basis.
- Expands exemptions to the work requirement to include those over 59 years, and under 19 years; those attending secondary education; caretaker of a disabled child; and those in substance abuse treatment.
- asks for federal waiver to allow those between 100% and 138% of federal poverty level to purchase insurance from state insurance exchange.
- Instructs Dept of Health and Welfare to track substance abuse treatment exemption.

The new fiscal note for this bill indicates a total cost of \$32 million.

S1204: Medicaid “sideboards” bill – by Senator Martin

Status: has passed out of Senate Health and Welfare committee on March 20, to the full Senate for action.

- Allows for a voluntary work program and a bipartisan legislative task force to study the financial impacts of Medicaid eligibility.
- Includes a waiver request for mental health reimbursement
- a provision authorizing substance abuse assessments, and
- includes a null and void clause if the federal government’s cost share portion falls below 90%.

This version of the bill had overwhelmingly positive testimony from health care groups, proponents of the Medicaid expansion Prop 2 initiative, and others. The key provision is a voluntary work training requirement as opposed to a mandatory work requirement as proposed in the House version.

Status of previous legislation:

H 249: Medicaid “sideboards” bill – by Rep. Vander Woude

Status: Replaced by H 277.

Directs Department of Health and Welfare to seek federal waivers from Center for Medicare and Medicaid Services to do a number of things.

- add a 30-hour-a-week work or job training requirement for expansion enrollees.
- give those making between 100 percent and 138 percent of poverty level the option of getting insurance through Idaho’s health insurance exchange instead of Medicaid.

- limit retroactive Medicaid eligibility from 90 days to 30 days.
- use Medicaid funds to cover some behavioral health services.

The bill would also end Medicaid expansion in Idaho if the share of the costs paid by the federal government dips below 90 percent, and require the Legislative Health and Welfare Committees to review the program in 2023 and make recommendation as to whether to continue the expansion.

[S1165 – Medical Programs Appropriation](#) – by Joint Finance Committee
Status: LAW. Signed by Governor on March 21. Passed House 36-28 on March 15. Passed Senate unanimously on March 11.

Last week, we reported that the total amount appropriated for the State Board of Education as *\$21.4 million including the 10 Year GME Plan which is a gradual expansion of numbers of residents for FMRI, Eastern Idaho, Bingham and Boise Internal Medicine residencies, as well as an increase in the salary for those residents.* This appropriation also includes veterinary, dental and WWAMI, and University of Utah Medical education. For a breakdown of the costs, please view the link to [S1165](#).

[HB109 – Maternal Mortality Review Commission](#) – by the Idaho Medical Association:

Status: LAW. Signed by the Governor on March 18. Passed Senate on March 12, 30-3 to Governor. It had passed the House 34-33. Congratulations to Susie and the Idaho Medical Association team for getting this done.

The IMA introduced a maternal mortality review bill in House Health and Welfare this week. The bill would create a Maternal Mortality Review Committee, which is a multi-disciplinary peer-review committee to collect information, determine whether a death was preventable and, if so, plot a strategy for educating health care workers to address the issue. The United States has a higher maternal mortality rate than other countries such as the UK, Germany, France, and Canada.

[S1171 – Medicaid Appropriation](#) – by Joint Finance Committee

Status: passed Senate on March 11, 31-3. To House floor for action. This bill will likely be held until a Medicaid expansion solution is reached.

This is the Department of Health and Welfare's Division of Medicaid budget bill that includes, among other things, funding for Medicaid expansion.

H244 – Naturopathic Medicine (formerly H152, formerly H196) – by Idaho

Chapter of Association of Naturopathic Physicians

Status: Passed Senate on March 13, 32-2, to Governor. Passed House on March 8, 64-3.

This is the second new version of a bill introduced earlier. It has been changed slightly to address some concerns by dietitians, and other naturopathic groups. Would add a Naturopathic Licensure Advisory Board to Idaho Board of Medicine, the powers and duties to include licensing naturopathic physicians in Idaho.

H182 – Pharmacists, prescriptions – by Rep. Zollinger, Sen. Martin

Status: Passed the Senate unanimously on March 12, to the Governor. House had passed this bill unanimously on March 4.

Bill removes the requirement of the Board of Pharmacy to authorize which drugs may be prescribed by a pharmacist under certain circumstances.

This legislation will allow pharmacists to prescribe any medications they choose to treat any conditions that, in the pharmacist's judgment:

- Do not require a new diagnosis;
 - Are minor and generally self-limiting;
 - Have a test that is used to guide diagnosis or clinical decision-making and are waived under the federal clinical laboratory improvement amendments of 1988;
- or
- Threaten the health or safety of the patient should the prescription not be immediately dispensed.

The bill says pharmacists must prescribe in accordance with FDA product labeling and may not prescribe controlled, compounded or biological drugs or products. The Board of Pharmacy will no longer be required to develop administrative rules to authorize specific drugs or conditions allowed for use or treatment by pharmacists.

NOTE: The IAFP sent a letter to the committee asking them to oppose this bill.

H133 – Immunization exemption – by Rep. Giddings

Status: Passed full House 52-17 on Feb 25. To Senate Health and Welfare for action. Chairman Fred Martin has been reported as saying he will not give this bill a hearing in his committee, so it is likely dead for the year.

Would require daycares and schools, when informing parents about immunizations, to also provide information regarding the exemption provision allowed by Idaho law.

Here is an interesting report from this week noting a significant decrease in Idaho's childhood immunization rates:

<https://www.idahoednews.org/news/immunization-rates-drop-as-opt-out-numbers-surge/>

S1100 – Medicaid Expansion “sideboards” – by Sen. Souza

Status: Dead for the year. Still awaiting Senate Health and Welfare committee hearing. Introduced on Feb 11.

Authorizes an optional workforce development training program for population covered by expansion; Allows state to apply for Federal waiver for those over 100% of Federal Poverty Level to seek subsidized insurance on the health Insurance exchange; allows application of Federal waiver to provide mental health treatment; Requires a legislative review of Medicaid expansion in 2023; voids Medicaid expansion if federal funding ratios change.

S1098 – Bone Marrow Donation – by Sen. Heider

Status: Dead for the year. Still awaiting hearing in House Health and Welfare. Passed Senate unanimously on Feb 21.

Allows Primary Care Providers and Urgent Care Physicians to inquire of patients age 18-45 whether they are a bone marrow donor and provide educational material to those patients on the subject. Directs Idaho Department of Health and Welfare to develop materials and information regarding bone marrow registry.

S1095 – Employment, Health Assistance – by Sen. Thayn

Status: Not likely to advance. Introduced in Senate Health and Welfare on Feb 11, awaiting full hearing.

To help those transitioning of SNAP and Medicaid by providing \$500 for medical and/or job training costs to be used over a six-month period if participant coordinates with a qualifying non-profit organization and follows a plan to get out of poverty.

Bills signed into law:

[SB1049 – Partial-birth Abortion](#) – by Senator Den Hartog:

Status: LAW. Signed by Governor on March 7. Passed House on March 1, 50-11. Passed Senate Feb 22, 29-6.

Amends Idaho's partial-birth abortion law to align with federal law and in response to US Supreme Court decision on the issue.

[HB64 \(formerly HB29\) – Abortion Complications Reporting](#) – by Rep. Chaney

Status: LAW. Signed by Governor on March 7. Passed the Senate 26-8. Passed the House earlier 56-14.

This bill makes some wording and technical changes to sections of this law passed last year. It appears that the law is not substantially changed from current.

[HB 9 – Medical Practice Act](#) – by State Board of Medicine:

Status: LAW. Signed into law by the Governor.

This is a 28-page bill being billed as a housekeeping or cleanup bill by the Board of Medicine. It updates and modernizes provisions of the Medical Practice Act. Among other provisions, it also would add a Physician Assistant to the Board of Medicine and adds a physician assistant and a public member to the Physician Assistant Advisory Committee. It also removes the requirement that medical students be registered with the Board.

[HB 10 – Pharmacy Practice Act](#) – by State Board of Pharmacy

Status: LAW. Signed into law by the Governor.

This is an 18-page bill updating and modernizing the Pharmacy Practice Act. It also establishes a multistate pharmacy license to increase portability and mobility of practice across state lines.

[HB11 – Uniform Controlled Substances Act](#) – by Board of Pharmacy

Status: LAW. Signed into law by the Governor.

Aligns DEA scheduling decisions by including synthetic opioids in Schedule I.

The end is near!!

Ken Burgess

Veritas Advisors, LLP