

Idaho Academy of Family Physicians 2018 Legislative Report Week 1: January 8 – January 12

The first week of the Legislative session is typically highlighted by the Governor's State of the State speech in which he lays out his broad agenda for the session. The legislature typically starts slowly with some training, and organizational items, before launching into about two weeks of rules review.

Executive Order on Health Insurance

Before the legislative session began, Governor Otter and Lieutenant Governor Brad Little announced the signing of an Executive Order in which the Idaho Department of Insurance is directed to develop more "affordable" insurance plans to offer to Idahoans. [A copy of that Executive Order is included in this link.](#) Since the Federal Tax reform bill passed in late December, eliminating the individual mandate of the Affordable Care Act, people will no longer be penalized for NOT purchasing ACA-qualified health plans. Otter, Little, and Department of Insurance Director, Dean Cameron, believe this offers an opportunity to develop health insurance plans that would be more affordable to those Idahoans who cannot afford coverage purchased from the Idaho Health Exchange – and in some cases, may still be more affordable for those who qualify for a subsidy through the Exchange. They claim that this "Idaho Plan" will allow more people who have chosen to not buy health insurance an opportunity to do so. (It is estimated that 104,000 individuals who formerly had health insurance coverage have fallen off the health insurance rolls because of affordability). Director Cameron claims that they should have a suite of options through Idaho Insurance carriers ready for purchase by as early as March of this year.

Governor Otter's State of the State speech

Mostly about education

The main focus of the Governor's address was on education. Chief among those issues was his desire to fund the next round of the K-12 teacher career ladder at a cost of \$42 million. He also talked about the expansion of the Community College system, expansion of STEM initiatives, and the need for expansion of Career Technical Education. On the Higher Education front, he is proposing a rather large budget item to create a College Executive Officer to coordinate efforts amongst Idaho Colleges and Universities.

On the Healthcare front, he also announced his plan for a new Idaho Healthcare Plan, which would allow those with more complicated expensive medical issues to move to Medicaid when needed. This could lower premiums by cutting costs for payers, without expanding Medicaid. It could also stabilize insurance markets and allow more availability for coverage. The health plan would pull \$17.4 million from the state general fund and \$11.4 million from the Millennium fund to implement the program.

Otter also praised the potential expansion of the medical profession in the state through the opening of the Idaho College of Osteopathic Medicine and is requesting funding for 11 new residency slots at Eastern Idaho Medical Center and Bingham Memorial Hospital. Otter pointed out that Idaho has successfully expanded the number of Idaho WWAMI seats to 40 – twice as many as when he first became Governor.

After noting the success of current behavioral health crisis centers, Governor Otter called for \$2.6 million to establish three new crisis centers by the end of next year in Lewiston, Nampa/Caldwell area, and Pocatello.

Speaking of Residencies:

One of the very first presentations to the Joint Finance-Appropriations Committee was by Dr. Ted Epperly who discussed the 10-year long-range plan to develop more Idaho-based residency positions throughout the state. Dr. Epperly is very well-respected by the members of the legislature and his proposal was very well received and presented. As always though, the challenge for the JFAC members lies in their willingness to fund such programs. Otter is reluctant to fully fund the recommended plan...[read more.](#)

First Bill of the Session: Unemployment Insurance Tax reduction

This should be of interest to any of you who have employees and pay Unemployment Insurance Tax. The first bill of the session is a proposal to reduce the amount employers pay into the unemployment insurance trust fund. The

bill will adjust the multiplier for calculating unemployment insurance rates. It is estimated that this move will reduce employer's unemployment taxes approximately 30% over a three-year period beginning in 2018.

This bill was proposed last year but failed in the waning days of the session. It is expected to move through quickly this session with little opposition.

Health and Welfare Committee actions

The agenda for the first few weeks of the legislative session are typically filled with approval of rules the agencies have brought forth for approval by the legislature, and this first week has been no exception. These rules are a more refined implementation of laws that were passed in the previous legislative session – most of went into effect on July 1, 2017. It is theoretically a way for the legislature to ensure that the agencies are implementing the laws as the legislature intended. It is designed as a check on agency bureaucrats to make sure they aren't overstepping their bounds or missing the point of the legislation. Idaho is one of the few states that does such rules review and approval process.

We will track these rules and make you aware of any that directly affect IAFP. There will certainly be more pieces of legislation of interest to the IAFP to be monitored.

The first rules to be reviewed and approved were from the Board of Pharmacy regarding pharmacist prescribing rights. However, BOP's proposed rule will grant pharmacists the ability to diagnose and prescribe for complicated conditions and drugs such as statins for patients using diabetes medications (not requiring diabetes to be previously diagnosed), and treatments for uncomplicated urinary tract infections (not requiring a CLIA-waived test).

The rule does not place any limitations on pharmacist prescribing for vulnerable patient populations such as children, elderly or chronically ill people. The rule does not require any additional education or training to authorize diagnosis and treatment, and it allows pharmacists to prescribe without access to the patient's medical record or healthcare team to determine existing diagnoses. [This is a link to the rules.](#)

The 2018 Idaho Legislative session is off and running and we look forward to working with you this year.

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If you have questions regarding a piece of legislation or you would like the IAFP to monitor specific legislation that is not currently being monitored, please contact me at Idahoafp@aol.com or [\(208\) 323-1156](tel:2083231156).