



2021 LEGISLATIVE REPORT

March 26, 2021

Due to the COVID-19 outbreak in the Idaho Legislature, the 2021 session is on a pause until April 6. During this break, check out what has been happening at state agencies and at the federal level.

IDHW information on value-based care

As many IMA members are aware, Idaho is moving swiftly towards value-based care due to legislation passed in 2017 and 2020 directing the Idaho Department of Health and Welfare (IDHW) Division of Medicaid to expand value-based payments. The Division of Medicaid is undertaking this effort to better control the Medicaid budget which has increased each of the last 3 years. The effort is being led by the Healthy Connections Value Care (HCVC) program.

The strategy is to create Value Care Organizations (VCO) that are partnerships between provider groups that share in the savings or losses, depending on how well VCO's perform against cost and quality targets established by Medicaid and meeting statewide budget neutrality requirements. A medical practice can contract directly with IDHW as a VCO itself, or partner with an already established VCO.

Idaho Medicaid Primary Care Providers that participate in the Healthy Connections Program are mandated to partner with or become a VCO. The following timelines are important to be aware of:

April 2 – VCO's should have proposed contracts in the hands of providers

May 3 – VCO's should sign and return contracts to Medicaid with the final list of affiliates

July 1 – Value-based care contracts will go into effect as mandated by current law

If you have any questions about the upcoming timelines, details related to specific VCO's, or any questions regarding value-based care, you can contact IDHW directly (MedicaidValueCare@dhw.idaho.gov) or IMA Director of Government of Affairs Jamie Neill (jamie@idmed.org).

You can also find more information from IDHW [here](#) or review the timelines [here](#).

Federal update

Medicare sequester fast-approaching March 31 deadline – Senate passes bipartisan fix

In the COVID-19 relief package that passed in December, there was a provision to delay a two percent across-the-board cut to Medicare payments. The cuts, known as the Medicare sequester, are delayed to March 31, 2021 which is less than a week away. However, members of Congress are considering several solutions to delay the Medicare sequester.

Last week, the House passed H.R. 1868 on a mostly Democrat party line vote, which would delay the Medicare sequester to December 31, 2021 and waives a budgetary rule that requires legislation not to create a net increase in the federal deficit over a 10-year period. In the Senate, that bill was amended to eliminate the budgetary waiver but retained the Medicare sequester delay until December 31, 2021. The bill received the support of both Idaho Senators Mike Crapo and Jim Risch and passed by a vote of 90-2. The legislation will return to the House for a vote in mid-April where bipartisan passage is expected. The cuts will likely not go into effect as CMS will wait to process claims until the legislation is signed into law. Idaho Rep. Mike Simpson is a cosponsor of H.R. 315, the Medicare Sequester Moratorium Act which was one of the first bipartisan proposals issued to delay the Medicare sequester in the 117th Congress.

What is in the American Rescue Plan besides state funding?

Last week, IMA shared details of Gov. Brad Little's plan to allocate the state funding included the American Rescue Plan Act (ARPA). However, there is more included than just the state-level funding and the \$1,400 stimulus checks for individuals making up to \$75,000. ARPA also includes the following provisions physicians may find helpful.

Provides funding increases for community health centers, teaching health centers, Medical Reserve Corps, National Health Service Corps Repayment Program and establishing, expanding and sustaining a public health workforce.

Adds an additional \$8.5 billion dollars to the Provider Relief Fund.

Gives an option for states to provide 12-month post-partum coverage under State Medicaid and CHIP.

Invests nearly \$35 billion in premium subsidy increases for those who buy coverage on the ACA marketplace.

Expands the availability of ACA advanced premium tax credits (APTCs) to individuals whose income is above 400% of the federal poverty line (FPL) for 2021 and 2022.

Increases funding to waive copays for veterans during the pandemic and to provide support to veterans, including COVID-19 vaccine distribution, expanded mental health care, enhanced telehealth coverage, extended support for veterans who are homeless or in danger of becoming homeless and PPE and supplies for VA clinical employees.

Telehealth bills in Congress

In Congress, the IMA will be working with AMA to monitor several telehealth bills in hopes of sustaining the high utilization created by the COVID-19 pandemic. In the Senate, Tim Scott from South Carolina and Brian Schatz from Hawaii released a bipartisan bill to make permanent several of the coverage restrictions that were waived during the pandemic. Specifically, the Telehealth Modernization Act would remove the geographic and originating site restrictions from Medicare, allow coverage for FQHC's under Medicare, and expand the types of telehealth services covered by Medicare. Idaho Sen. Mike Crapo will be a key player in telehealth reforms as the ranking member of the Senate Finance Committee. In February, Sen. Crapo pledged to work with the now Secretary of Health and Human Services on bipartisan reforms to telehealth and recently **noted it is a priority issue**.

Congressman Simpson leads on newborn screening reauthorization

In January, Rep. Mike Simpson joined a bipartisan coalition of colleagues to introduce the Newborn Screening Saves Lives Reauthorization Act. The legislation reauthorizes funding that assists states in improving and expanding newborn screening programs. Rep. Simpson was the lead sponsor of the original authorization for newborn screening programs in 2008 and also led when the law was reauthorized in 2014.

Upon introduction of the bill, Rep. Simpson said, "We know that newborn screening saves lives and reduces the cost of care, and that is why I am proud to once again join my colleagues in introducing the Newborn Screening Saves Lives Act to provide the tools necessary to screen babies for rare but treatable conditions."

To view a list of ALL healthcare-related bills and their statuses, visit the IMA Bill Tracker on the IMA website

IMA Bill Tracker

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The IMA Political Action Committee (IMPAC) Board uses your contributions to support a variety of bi-partisan candidates based on the best interests of Idaho physicians and their patients.

With the pandemic and constantly changing health care policies, it is more important now than ever that IMA has the resources to support legislators who will listen to our concerns. IMPAC needs your contributions now to support the house of medicine in Idaho!

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