



# Idaho Medical Association

## 2019 LEGISLATURE: IMA STATUS REPORT Week of February 11 – February 15, 2019

### MEDICAID EXPANSION UPDATE

Things are really heating up in the legislature regarding the implementation of Medicaid expansion now that the lawsuit was decided in our favor. There are constant meetings with multiple bill drafts and ideas being passed around that include various approaches to adding waiver options to place conditions or restrictions on the new Medicaid recipients.

The IMA Board of Trustees met last week and developed three principles as a yardstick against which to evaluate all proposals and for IMA to use when developing a formal position on legislation. IMA will not support any provisions in proposed bills that:

- Lead to delayed implementation of Medicaid expansion
- Add administrative burdens and costs to the state in administering Medicaid expansion
- Take away coverage from eligible individuals or are punitive in nature

It is too soon to know whether the legislature will place additional requirements or restrictions on new Medicaid recipients. There was one bill introduced in the Senate this week and we expect more to surface in the House next week. Rest assured that the IMA lobby team is very involved in these discussions and will work to uphold the principles outlined by our Board of Trustees.

### TOP PRIORITY ISSUES

#### **Graduate Medical Education ~ *SUPPORT***

IMA strongly supports full implementation of the State Board of Education's 10-Year Strategic Plan for GME Expansion, which will create 19 new slots for residents and fellows in the next year. It also increases the per-resident funding amount that the state provides to our existing GME programs, which is critical to their sustainability. This year is the second year of funding for the ten-year plan and we anticipate programs will receive an additional amount of \$1,657,500 over and above existing funding for residency programs in Idaho.

*Status: Presentations to JFAC are complete; the committee is working on budget setting and appropriations bills will follow.*

#### **HB 109: Maternal Mortality Review Committee ~ *SUPPORT***

IMA has finalized legislation to create a Maternal Mortality Review Committee (MMRC) within the Idaho Department of Health and Welfare. The US has experienced an increase in maternal deaths in recent decades that far exceeds the rates in other comparable countries. For example, the US has a maternal death rate of 26.4 per 100,000 live births compared to other countries such as UK (9.2), Germany (9), France (7.8), Canada (7.3), Spain (5.6), Italy (4.2) and Finland (3.8). (Source: *The Lancet*). Idaho had six maternal deaths in 2017 (27.1 deaths per

100,000 live births) and has had an average of just over five maternal deaths per year from 2008 to 2017 for a total of 49 maternal deaths among Idaho women in that nine-year period. (Source: IDHW 2017 Mortality Report by Idaho Vital Statistics).

The majority of maternal deaths are preventable and the MMRC would be created to study why maternal deaths are happening in Idaho and what can be done to improve outcomes. The MMRC would cover all deaths, regardless of provider type or birth setting. The purpose is education, not punishment, and all MMRC work would be under the protection of state peer review statutes.

**Status:** *This legislation will be heard on Monday, February 18, in the House Health & Welfare Committee.*

## **NEW THIS WEEK**

### **HB 114: Female Genital Mutilation**

This legislation makes female genital mutilation of a minor a felony.

**Status:** *Awaiting a vote of the House.*

### **HB 133: Notice of Immunization Requirements**

This legislation requires daycares and schools to notify parents or guardians of their right to opt out of immunizations at the same time they provide information about immunization requirements.

**Status:** *Awaiting a hearing in the House Health & Welfare Committee.*

### **HB 152: Licensing Naturopaths Under the Idaho Board of Medicine ~ NEUTRAL**

This legislation would create state licensure for naturopathic physicians with 4-year post-graduate training from accredited naturopathic colleges. Neither the Board of Medicine nor the IMA are opposing this legislation because it would give the Board of Medicine oversight and regulatory authority over these practitioners rather than creating a regulatory board made up of other naturopaths.

**Status:** *Awaiting a hearing in the House Health & Welfare Committee.*

### **SB 1068: Requirements for Pharmacy Benefit Managers (PBMs) ~ SUPPORT**

This legislation creates registration for PBMs under the Idaho Department of Insurance and requires transparency of PBM activities in Idaho.

**Status:** *Awaiting a hearing in the Senate Commerce & Human Resources Committee.*

### **SB 1098: Bone Marrow Donors**

Allows physicians to inquire whether patients ages 18-45 are bone marrow donors and to provide information about bone marrow donor registration.

**Status:** *Awaiting a hearing in the Senate Health & Welfare Committee.*

## **OTHER ISSUES**

### **HB 9: Board of Medicine Statute and Administrative Rules Updates ~ SUPPORT**

The Idaho Board of Medicine has undertaken a rewrite of their statutes and rules to modernize the language and to ensure that what is in law reflects the processes and procedures BOM currently follows. There are, however, a few new provisions:

New Grounds for Medical Discipline. BOM has added unprofessional or disruptive behavior to the list of acts that are considered grounds for medical discipline. The language in the new law addresses a physician who is: Engaging in a pattern of unprofessional or disruptive behavior or interaction in a healthcare setting that interferes with patient care or could reasonably be expected to adversely impact the quality of care rendered to a patient; provided that such behavior does not have to have caused actual patient harm to be considered unprofessional or disruptive.

Changes to PA Supervision Ratios. BOM is increasing the number of PAs a supervising physician or alternate supervising physician may supervise from three to four. The provision enabling a physician to petition the board to supervise up to six PAs will remain in place.

New PA Position on Board of Medicine. BOM is adding a PA position to their full board. The board will now consist of eleven members: seven physicians, one PA, two public members, and one representative of law enforcement.

**Status:** *The rules passed the House and Senate Health & Welfare Committees and will go into effect on July 1, 2019. HB 9 has passed the House and the Senate and is awaiting signature of the Governor.*

#### **HB 12: Expanded Access to Opioid Antagonists ~ **SUPPORT****

Current law states only “prescribers or pharmacists” may prescribe an opioid antagonist. HB 12 revises the language to state that any health professional licensed or registered under this title may prescribe and dispense an opioid antagonist. The bill sponsor reports that some public health programs have been hindered by the original language.

**Status:** *LAW.*

#### **HB 58: Expansion of Idaho Legend Drug Donation Act ~ **SUPPORT****

This legislation adds donation repositories to the current statute, including community health centers, free clinics, regional behavioral health centers, state charitable institutions and drug outlets. It also expands the definition of qualified donors.

**Status:** *Passed the House on a 68-0 vote and will now go to the Senate Health & Welfare Committee.*

#### **HB 59: Age for Self-Identifying as an Organ Donor on Driver’s License**

This legislation clarifies that 15-year-old drivers are able to volunteer as organ donors on their driver’s licenses.

**Status:** *Passed the House on a 64-5 vote and will now go to the Senate Health & Welfare Committee.*

#### **HB 64 (previously HB 29): Reporting on Abortion Complications**

HB 64 adds to and revises the legislation passed last year that requires reporting on abortion complications. The bill sponsor states that, “It is the intent of the State of Idaho to enact this statute to protect the health of women and advance Idaho’s medical knowledge about the frequency and nature of abortion complications in Idaho. The data collected as a result of this legislation will provide statistical information about actual patients who receive treatment because of an abnormal or a deviant process or event arising from the performance or completion of an abortion.”

**Status:** *Passed the House on a 54-16 vote and is awaiting a hearing in the Senate State Affairs Committee.*

## **HCR 4: Rejecting IDHW Rules Mandating Immunizations for Idaho School Students ~**

### **OPPOSE**

HCR 4 would reject (repeal) the entire docket of administrative rules of the Idaho Department of Health and Welfare requiring any immunizations for Idaho school students. The rationale is that these requirements “are not consistent with legislative intent.”

*Status: In House Ways & Means Committee – unlikely to receive a hearing this session.*

## **SB 1034: Access to Oral Chemotherapy ~** **SUPPORT**

This legislation creates co-insurance parity for anti-cancer medications regardless of the route of administration so that oral medications are no costlier than those that are injected or administered intravenously.

*Status: Awaiting a hearing in the Senate Health & Welfare Committee.*

## **SB 1049: Partial-Birth Abortions**

According to the bill sponsors, it is the purpose of this legislation to update the Idaho partial-birth abortion ban so it is consistent with the federal law that bans the performance of a partial-birth abortion except when necessary to save a mother's life.

*Status: Passed the Senate on a 29-6 vote and will now go to the House State Affairs Committee.*

## **Rule Docket 16-0215-1802. Requiring Meningitis Vaccination for High School Seniors ~**

### **SUPPORT**

The Idaho Department of Health & Welfare has submitted an administrative rule that adds a new school entry immunization requirement. It requires a second dose of meningococcal (MenACWY) vaccination before a student enters the 12th grade in Idaho, or a first dose if the student was not previously vaccinated, starting with school year 2020-2021. If a student received their first dose of the vaccine at 16 years of age or older, they will not be required to receive the second dose before entry into the 12<sup>th</sup> grade.

*Status: This rule was adopted and will go into effect July 1, 2019.*

## **WEEKLY REPORTS ON LEGISLATIVE ACTIVITY**

As always, the IMA will provide weekly electronic legislative reports during the session. If you have questions or concerns on any of the issues discussed in our reports, please contact us. We are always happy to provide context, additional information, or background on how IMA legislative policies are developed.

If we don't have your current email address you could miss out on important legislative news. If you would like to receive the reports, please send your current email address to [membership@idmed.org](mailto:membership@idmed.org) or call us at (208) 344-7888. For more frequent legislative updates, follow the IMA on Facebook!

## **ADDITIONAL LEGISLATION**

It is not possible for us to report on all legislation that is introduced in a legislative session. Go to this link for a complete list of 2019 legislation:

<https://legislature.idaho.gov/sessioninfo/2019/legislation/minidata/>.

**SUPPORT IMPAC, THE IMA'S POLITICAL ACTION COMMITTEE!**

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. Even though there was just an election in late 2018, please consider donating to IMA's political action committee (IMPAC). Campaign contributions are made during election years (every two years in Idaho) and it is important that the PAC coffers get refilled in the non-election years.

**IMPAC needs your contributions now to support the house of medicine in Idaho!**

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