



Idaho Medical Association

2018 LEGISLATURE: IMA STATUS REPORT Week of February 19, 2018

THIS WEEK'S HIGHLIGHTS

HB 472: State Match for Rural Physician Incentive Program (RPIP) ~ SUPPORT

Idaho's RPIP offers debt repayment for rural physicians who practice primary care medicine in an Idaho federally-designated health professional shortage area (HPSA) that demonstrates a need for assistance in physician recruitment. The program includes family medicine, internal medicine and pediatrics and, in high levels of need, OB/GYN, psychiatry, general surgery and emergency medicine. RPIP awards are limited to a maximum of \$100,000 payable over a four-year period. Currently, RPIP is one hundred percent funded by fees from Idaho WWAMI and University of Utah students with no funding from the state or other sources.

Due to the physician workforce shortages Idaho faces, IMA is supporting legislation sponsored by Rep. John Vander Woude to seek \$2:\$1 state matching funds for the RPIP program to strengthen Idaho's physician recruitment and retention efforts.

Status: HB 472 passed the House on a 41-28 vote and is awaiting a hearing in the Senate Health & Welfare Committee.

HB 353: Immunity for Physician Volunteers ~ SUPPORT

IMA introduced legislation to provide additional immunity for physicians and other healthcare providers who volunteer at community screening events. Currently, many physicians' professional liability insurance does not cover them for volunteer screening events offsite from their regular practice. To encourage more volunteerism, IMA is seeking limited immunity for volunteer activities.

Status: HB 353 passed the House on a 68-1 vote and is awaiting a vote of the full Senate.

SB 1246: Reimbursement for Incarcerated Patients

This bill sets reimbursement rates for incarcerated patients at Medicaid rates. Although this bill has passed the Senate, concerns have been raised and the Idaho Department of Corrections has agreed to hold the bill for a period of time to allow issues to be addressed.

Status: SB 1246 passed the Senate on a 34-0 vote.

HB 393: Immunization Assessment Board ~ SUPPORT

This bill adds a new member representing a self-funded insurance plan to the Idaho Immunization Assessment Board and extends the sunset date for the Board five years. Passage of this bill ensures Idaho remains a VFC state and lessens the possibility that status will change before 2024.

Status: HB 393 passed the House and the Senate and will go to the Governor for signature into law.

HB 495: Balance Billing ~ OPPOSED

The balance billing legislation was introduced in the House Health & Welfare Committee on February 5. The bill contains provisions that result in government price controls on physician reimbursement for out of network (OON) services and disclosure requirements that will be extremely difficult to comply with. This approach to dealing with surprise gaps in insurance coverage for patients is totally unacceptable and will drive physicians out of independent practice.

As reported last week, legislators voted to hold this bill in committee killing it for the year. However, IMA has been directed by the Legislature to work with stakeholders to find a workable solution. If you would like to be involved in that workgroup, please contact susie@idmed.org.

Status: *HB 495 will not proceed in 2018.*

GME EXPANSION PLAN AWAITING BUDGET COMMITTEE VOTE

Ten-Year Plan for Residency Expansion ~ *SUPPORT*

IMA continues to advocate for the Ten-Year GME Expansion Plan for Idaho. At full build-out, the plan increases the number of residency programs in Idaho from nine to 21 and increases the number of Idaho medical residents from 141 to 357. Implementation of the first year of the expansion plan includes a \$5.239 million state funding request to the Joint Appropriations & Finance Committee (JFAC). Please visit the IMA website for background information and other resources to help advocate for the plan: https://www.idmed.org/idaho/assets/files/GME/GME_Expansion.pdf

Governor Otter recommended a severely scaled-down version of the plan, but the IMA lobby team is working hard to make a convincing case to the Joint Finance & Appropriations Committee (JFAC) and to the Legislature as a whole that it is important to support the plan at the full \$5.239 million funding level in the original agency request.

Budget setting will start soon, and legislators need to know this is a priority issue to their constituents. Please send a message to your legislators letting them know of the importance of residency expansion in Idaho and of your support for full funding of the Ten-Year Residency Expansion Plan.

Go [HERE](#) to send a message to your Legislators in support of full funding of the GME plan.

Status: *Budget setting will begin soon. IMA lobby team members are reaching out to legislators on JFAC, plus the Health and Education Committees. Legislators need to hear from you, so we appreciate your help in supporting this effort.*

PLEASE CONTACT LEGISLATORS IN OPPOSITION TO ONEROUS VACCINATION LEGISLATION

HB 494: Immunization Notices – Signatures Required ~ *OPPOSED*

This bill requires that, for every immunization given, the provider and the patient or guardian must sign an acknowledgment of receipt of the required immunization notices. This bill would place additional administrative burdens on already overburdened physician offices.

Go [HERE](#) to send a message to your Legislators in opposition to HB 494.

Status: *HB 494 passed the House Health & Welfare Committee and is awaiting a vote in the full House.*

NEW INTRODUCTIONS THIS WEEK

HB 625: Tax on Opioids

This legislation would create a tax on the sale of opioids to provide funding for treatment programs.

Status: *HB 625 was introduced and will be assigned to a committee for hearing.*

UPDATED STATUS OF LEGISLATION AND ISSUES

HB 577: Cannabidiol Oil (CBD)

This legislation would allow for the use and possession of cannabidiol oil. (Replaces HB 410)

Status: *HB 577 passed the House Health & Welfare Committee and is awaiting a vote of the full House.*

HB 576: Limited Immunity When Seeking Emergency Medical Assistance ~ *SUPPORT*

This legislation provides limited immunity for those who seek emergency medical assistance when in the presence of illegal substance use.

Status: *HB 576 is awaiting a hearing in the House Health & Welfare Committee.*

HB 571: Abortion Complications Reporting Act

This bill provides for significant increases in reporting requirements for abortion complications.

Status: HB 571 is being replaced by a new bill that will be available next week.

HB 505: Physical Therapist Dry Needling

This bill allows physical therapists to use a technique called “dry needling” that is similar to acupuncture in that it uses a thin filiform needle to stimulate neural, muscular and connective tissues under the skin. It is used to treat pain and movement impairments.

Status: HB 505 passed the House on a 63-4 vote and is awaiting a hearing in the Senate Health & Welfare Committee.

HB 464: Closing the Coverage Gap ~ SUPPORT

The Idaho Department of Insurance and the Idaho Department of Health and Welfare have introduced a dual waiver proposal to provide coverage options for people in the gap, and to lower rates for individual insurance plans. The 1332 waiver sponsored by DOI will allow approximately 35,000 uninsured Idahoans under 100% FPL to receive subsidies to purchase health plans on the state health insurance exchange. The 1115 waiver sponsored by DWH will allow approximately 3,000 patients with certain high-risk, high-cost conditions to move from private insurance to Medicaid for the duration of their diseases. By moving these individuals away from the private market, it is estimated to lower insurance rates by 25 percent.

This week, Medicaid recipient work requirements were added to the legislation similar to existing requirements in other state assistance programs. While the addition of work requirements will make the bill’s passage more likely in the Legislature, the move has caused concern among patient advocacy groups.

Status: HB 464 passed the House Health & Welfare Committee and will now go to the full House for a vote.

HB 448: Provides Exemption from Obscenity Laws for Breastfeeding ~ SUPPORT

This legislation would exempt public breastfeeding from indecent exposure and obscenity laws.

Status: HB 448 passed the House on a 66-0 vote and is awaiting a hearing in the Senate.

HB 431: Payment of Medical Directors at State Facilities

This legislation removes medical directors at state hospitals from Idaho’s classified employee system. Because of the difficulties of recruiting physicians to state hospitals, this designation change will allow the state to offer more competitive compensation packages.

Status: HB 431 passed the House on a 53-17 vote and is awaiting a hearing in the Senate.

HB 410: Cannabidiol Oil (CBD)

This legislation would allow for the use and possession of cannabidiol oil if prescribed by a physician.

Status: HB 410 has been replaced by HB 577.

SB 1296: Definition of Persons with Disabilities for Use of Service Dogs

This bill adds mental disabilities to the definition of disabled persons for protection of use of service dogs.

Status: SB 1296 passed the Senate Health & Welfare Committee and is awaiting a vote of the full Senate.

SB 1281: Insurance Coverage of Contraceptives

This bill would provide for availability of a 12-month supply of contraceptives under certain health benefit plans.

Status: SB 1281 is awaiting a hearing.

SB 1273: Oral Chemotherapy Reimbursement Disparity ~ SUPPORT

This legislation amends Idaho Code so that a health benefit plan’s copayment, deductible, or coinsurance amount for orally administered chemotherapy is similar to those required of injected or intravenously administered chemotherapy.

Status: SB 1273 is awaiting a hearing.

SB 1262: AARP Patient Caregiver Support Act

This bill would require hospitals to ask if a patient wants to designate an unpaid caregiver, to notify the designated caregiver when the patient will be discharged or transferred, and to provide the designated caregiver with instructions for medical/nursing tasks that the caregiver will need to perform at home.

Status: SB 1262 is awaiting a hearing.

SB 1255: Increases Legal Tobacco Possession to Age 21 ~ SUPPORT

This bill amends existing law to change the legal age of tobacco possession from 18 to 21.

Status: SB 1255 failed in the Senate State Affairs Committee and will not proceed in 2018.

SB 1243: Information Posted on Abortion Reversal

This legislation would require the Idaho Department of Health & Welfare to post information on their website directing a patient where to obtain further information and assistance in locating a provider for consultation about chemical abortion. The bill's sponsors assert that some patients have a change of heart after taking the first medication in the two-step medication process required for a chemical abortion. The sponsors further assert that there have been instances where administration of progesterone may "reverse" the chemical abortion and allow for safe continuation of the pregnancy. This legislation would require IDHW to post information about this process on their website. It does not require anything of physicians.

Status: SB 1243 is awaiting a vote of the full Senate.

Idaho Board of Pharmacy Pharmacist Prescribing Protocols

The legislature approved the rules drafted by the Idaho Board of Pharmacy for pharmacist prescribing. BOP is hosting meetings to develop protocols to guide pharmacist prescribing practices and physicians are invited to participate. Information can be found on the Idaho Board of Pharmacy website.

Prior Authorization Simplification ~ SUPPORT

On January 5, IMA met with the Idaho Department of Insurance and the state's insurers and other stakeholders to start a process to remove at least some of the burdens on physicians and patients from prior authorization processes. A workgroup is being formed to work on consensus changes. If the Department of Insurance discussions do not bear fruit, we will consider legislation.

Status: A workgroup will begin working on simplification of prior authorization processes upon adjournment of the legislature.

ACTIONS MODIFYING ACA PLANS IN IDAHO

Executive Order No. 2018-02

Restoring Choice in Health Insurance for Idahoans

Governor C.L. "Butch" Otter and Lt. Governor Brad Little signed an executive order just before the start of this year's legislative session that eliminates some insurance plan mandates under the Affordable Care Act (ACA). The order allows Idahoans the opportunity to buy non-ACA compliant insurance plans that are less expensive but may not include some of the benefits the public has grown to expect under the ACA. The new plans are expected to be available in March of this year.

The Executive Order is an attempt by Otter and Little to mitigate some of the damage caused by not expanding Idaho Medicaid, as was envisioned by the ACA. Because the Idaho Legislature has failed to expand Medicaid, a large group of Idahoans are left in the insurance coverage gap. And those who do have access to purchase coverage are seeing rates steadily increase.

Executive Order: <https://gov.idaho.gov/mediacenter/execorders/eo2018/EO%202018-02.pdf>

Subsequent Guidance from the Idaho Department of Insurance

In response to Otter and Little's Executive Order, Department of Insurance Commissioner Dean Cameron released Bulletin No. 18-01, a guidance document for Idaho health insurance carriers offering provisions for them to follow when submitting state-based health benefit plans.

Important points of the Bulletin are that carriers must provide guaranteed issue and renewability for state-based plans, preexisting conditions are covered if there is continuous prior coverage, minimum health benefits are set forth (see document), and medical underwriting is allowed but resulting premiums must

not be more than 50 percent above the carriers adjusted index rate. Please click on the link below for a detailed description of the guidance:

Dept. of Insurance Bulletin No. 18-01: <https://doi.idaho.gov/DisplayPDF?Id=4712>

Status: *Neither Executive Orders nor DOI Bulletins require legislation approval and so are already in effect. Only the federal government can take action on these policy changes.*

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 or call us at (208) 344-7888. For more frequent legislative updates, follow the IMA on Facebook!

SUPPORT IMPAC, THE IMA'S POLITICAL ACTION COMMITTEE!

Idaho's Primary Election is May 15, 2018. This early-year election is pivotal, as it is likely to determine Idaho's next Governor, Lieutenant Governor, Secretary of State, Attorney General, and a majority of Legislators, as well as Idaho's 1st Congressional District Representative.

This is truly a watershed election that WILL change the face of politics in Idaho – either for the better or the worse. 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.

IMPAC NEEDS YOUR CONTRIBUTIONS NOW TO SUPPORT THE HOUSE OF MEDICINE IN IDAHO!

Go here to donate:

http://www.idmed.org/idaho/Idaho_Public/Membership/Idaho_Medical_Political_Action_Committee_IMPAC.aspx

PHYSICIANS HELP IDAHO IN MORE WAYS THAN CARING FOR PATIENTS

Legislators sometimes think of physicians only in terms of providing health care, but the AMA has just released a new economic impact study that shows the importance of physicians to Idaho's economy. When you talk to your legislators, remind them that physicians are leading economic drivers in their district and that investing in physicians pays off. Here are some Idaho-specific numbers for Idaho's 2,738 active patient care physicians' using four key economic indicators:

- **Jobs:** Physicians support 33,179 jobs in Idaho—12.1 for each physician on average.
- **Economic activity:** Physicians generate \$5.2 billion in economic output, comprising 7.9 percent of the Idaho economy. Each physician generates \$1.9 million for the state economy on average.
- **Wages and benefits:** Physicians contribute \$2.5 billion in total wages and benefits paid to workers across Idaho, empowering a high-quality, sustainable workforce. Each physician contributes \$900,894 to workers' wages and benefits on average.
- **State and local tax revenue:** Physicians' contribution to the Idaho economy generates \$168.6 million in state and local tax revenue for their communities—translating to \$61,584 for each physician on average—enabling community investments to be made.