



# Idaho Medical Association

## 2018 LEGISLATURE *Final Report*

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### LEGISLATURE WRAPS UP AFTER 80 DAY SESSION

The Idaho House and Senate adjourned for the year on Wednesday, March 28. With one notable exception, the Legislature made positive progress on health care issues in the 2018 session:

- Funded first year of GME expansion plan at \$2.1 million
- Approved \$640K/year funding for physician loan repayment
- Defeated a bill to ban balance billing & set government price controls on physicians
- Added two new behavioral health crisis centers
- Restored preventive dental services to adults on Medicaid

Among other actions taken this year, the Legislature increased the public schools budget by \$100 million and passed tax relief totaling \$130 million in the form of income and corporate tax cuts, unemployment tax cuts and expanded child tax credits.

Unfortunately, the Legislature again refused to offer relief to uninsured Idahoans. For the sixth straight year, lawmakers rejected efforts to provide health coverage for people in the gap – the majority of whom are employed full time, or are veterans, stay at home parents, or mentally ill.

A bill for an innovative dual waiver proposal to cover 35,000 uninsured Idahoans and lower insurance costs on the exchange passed the House Health & Welfare Committee, but never received full consideration on the House floor. Instead, representatives chose to send HB 464 back to committee -- twice!! – rather than cast a vote on the merits of the bill. IMA is disappointed in the Legislature's continued unwillingness to take action on this critically important issue, so we are turning our focus to support a ballot initiative to put the question of Medicaid Expansion to the voters of Idaho in November. Watch for more information on this effort coming soon!

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### STATUS OF IMA PRIORITY ISSUES

IMA successfully advocated for several important healthcare issues in the 2018 Legislature, and we sincerely thank all of our physician members who came to testify at the Capitol, wrote emails and made calls to their senators and representatives!

#### **GREAT NEWS! FIRST YEAR FUNDING OF GME EXPANSION PLAN PASSES**

#### **SB 1366: Ten-Year Plan for Residency Expansion ~ *SUPPORT***

The Legislature approved initial funding of \$2.1 million for the Ten-Year GME Expansion Plan for Idaho. While not reaching full funding of the Plan, IMA was successful in getting additional money approved over and above the Governor's severely limited recommendation. The new funding will:

- Increase the base funding of the per resident support from the state
- Give additional funding to the UW/VA Psychiatry Residency Program to allow for program expansion for much-needed psychiatrist training
- Provide first-time funding to the Bingham Memorial Internal Medicine Residency Program and the new EIRMC Internal Medicine Residency Program

**Status:** LAW

## **SUCCESS! LEGISLATURE APPROVES STATE MATCHING FUND FOR RPIP**

### **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. Previously, RPIP was solely 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 shortage Idaho faces, IMA successfully advocated for \$2:\$1 match of state funds.

**Status:** LAW

### **HB 353: Immunity for Physician Volunteers ~ SUPPORT**

Another IMA success! IMA sponsored and 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 practices. IMA believes successful passage of this bill will encourage more volunteerism.

**Status:** LAW

### **HB 393: Immunization Assessment Board ~ SUPPORT**

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 Vaccines for Children (VFC) state and lessens the possibility that status will change before 2024.

**Status:** LAW

### **HB 464: Closing the Coverage Gap ~ SUPPORT**

The Idaho Department of Insurance (DOI) and the Idaho Department of Health and Welfare (DHW) 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 percent Federal Poverty Level (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.

**Status:** *Passed the House Health & Welfare Committee; Refused a vote on the House floor twice; DEFEATED*

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

Requires that, for every immunization given, the physician 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 medical offices. Physicians and other health advocates sent hundreds of messages in opposition to this onerous bill, and IMA was successful in stopping it.

**Status:** *HB 494 passed the House 54-13; Did not receive a hearing in the Senate; DEFEATED*

### **HB 495: Ban on Balance Billing ~ OPPOSED**

Seeks to ban balance billing and contains provisions that result in government price controls on physician reimbursement for out of network (OON) services and disclosure requirements that are 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.

Thanks to the efforts of IMA physicians who were highly engaged in reaching out to their legislators about this dangerous bill, it did not move forward. IMA achieved an important victory by working closely with other health advocates and gathering resources from physician groups.

**Status:** *Voted down in the House Health & Welfare Committee; DEFEATED*

**HB 352: Exemption from Licensure for Visiting Medical Professionals ~ *SUPPORT***

Allows out of state physicians, PAs and other medical professionals, who are part of a visiting sports team or performing arts company, to be exempt from Idaho licensure requirements if they are exclusively providing care to members of that organization.

*Status: LAW*

**HB 354: Naloxone Reported to PDMP**

Requires that naloxone prescriptions be reported to the Board of Pharmacy's Prescription Drug Monitoring Program.

*Status: LAW*

**HB 431: Payment of Medical Directors at State Facilities**

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: LAW*

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

Exempts public breastfeeding from indecent exposure and obscenity laws.

*Status: LAW*

**HB 451: Tax Credit for Charitable Giving to Residency Programs ~ *SUPPORT***

Allows an income tax credit for charitable contributions made to Idaho-based, nationally accredited medical residency programs.

*Status: LAW*

**HB 465: Restoration of Medicaid Dental Benefits ~ *SUPPORT***

Restores preventive dental benefits to adults on Medicaid. These services were cut in 2011 during an economic downturn, with the intention that they be restored. Providing preventive dental services actually saves money in the Medicaid program.

*Status: LAW*

**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: LAW*

**HB 563: Family Planning Services for the Uninsured (Plan First Idaho) ~ *SUPPORT***

The Plan First Idaho bill sought to provide family planning services and supplies to Idaho women ages 19-44 with a family income at or below 133 percent of the Federal Poverty Level (FPL) and who are otherwise ineligible for Medicare, Medicaid, or health insurance that covers family planning services. Currently these women are only eligible to enroll in Medicaid if they become pregnant and lose coverage within 60 days of delivery. The goal of this legislation is to improve access to family planning services to prevent unintended pregnancies and provide preconception planning to improve maternal and birth outcomes.

*Status: Passed the House Health & Welfare Committee; Did not receive a hearing on the House floor; DEFEATED*

**HB 577: Cannabidiol Oil (CBD)**

Allows for the use and possession of cannabidiol oil. (Replaces HB 410)

*Status: Passed the House 59-11 vote; Did not receive a hearing in the Senate; DEFEATED*

**HB 625: Tax on Opioids**

Creates a tax on the sale of opioids to provide funding for treatment programs.

*Status: Voted down in the House Revenue & Taxation Committee; DEFEATED*

**HB 634: Suicide Prevention Programs in Schools ~ *SUPPORT***

Directs the Idaho State Board of Education and Department of Education to develop suicide awareness and prevention training materials to be used in Idaho schools. Also requires that each public school district adopt a policy on student suicide prevention.

*Status: LAW*

**HB 638: Abortion Complications Reporting Act**

Requires physicians and other medical providers to file reports with the Idaho Department of Health & Welfare on complications from abortions. (Replaces HB 571)

*Status: LAW*

**HB 649: Limited Immunity When Seeking Emergency Medical Assistance ~ *SUPPORT***

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

*Status: LAW*

**HB 657: Felony Battery on Healthcare Providers**

Retains the ability to charge a felony for those who deliberately assault medical personnel, while creating a safety valve for a mentally ill patient from being charged with a felony if the commission of the battery is the direct result of mental illness. A misdemeanor charge of battery is still available in that instance. (Replaces HB 570)

*Status: Did not received a hearing in the House Judiciary Committee; DEFEATED*

**SB 1224: Medicaid Expansion ~ *SUPPORT***

Changes the eligibility requirements for Medicaid to allow expansion of coverage to 78,000 Idahoans in the gap using federal funds.

*Status: Did not receive a hearing in the Senate Health & Welfare Committee; DEFEATED*

**SB 1243: Information Posted on Abortion Reversal**

Requires 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: LAW*

**SB 1246: Reimbursement for Incarcerated Patients ~ *OPPOSED***

Sets reimbursement for incarcerated patients at Medicaid rates. Currently, the Department of Corrections (DOC) contracts with a for-profit company called Corizon which receives a per diem rate from the State of Idaho to cover health services for inmates, and is supposed to contract with hospitals, physicians and other providers. Physicians and hospitals have reported several instances of Corizon repeatedly denying coverage for legitimate medical services, significant delays in payment, and paying only Medicaid rates to providers. Corizon has been the subject of numerous lawsuits. SB 1246 codifies the ability of DOC and its contractors to pay Medicaid rates for healthcare services for inmates.

*Status: LAW*

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

Amends existing law to change the legal age of tobacco possession from 18 to 21.

**Status:** Voted down in the Senate State Affairs Committee; DEFEATED

**SB 1262: AARP Patient Caregiver Support Act**

Requires 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:** Did not receive a hearing in the Senate Health & Welfare Committee; DEFEATED

**SB 1273: Oral Chemotherapy Reimbursement Disparity ~ **SUPPORT****

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:** Did not receive a hearing in the Senate Commerce & Human Resources Committee; DEFEATED

**SB 1281: Insurance Coverage of Contraceptives**

Provides for availability of a 12-month supply of contraceptives under certain health benefit plans.

**Status:** Voted down in the Senate Commerce & Human Resources Committee; DEFEATED

**SB 1289: Regulation of PBMs**

Establishes a Pharmacy Benefit Manager (PBM) Transparency Act that includes registration requirements, transparency for covered prescription drug lists, and disclosure of the methodology that determines how reimbursement to the pharmacies is calculated.

**Status:** Did not receive a hearing in the Senate Commerce & Human Resources Committee; DEFEATED

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

Adds mental disabilities to the definition of disabled persons for protection of use of service dogs.

**Status:** LAW

**SB 1311: Direct Primary Care Pilot Program**

This bill creates a pilot program of three health districts where individuals may receive primary care for up to 10 months if they attend a financial literacy course or use a health coach.

**Status:** Passed the Senate 34-0; Did not receive a hearing in the House Health & Welfare Committee; DEFEATED

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**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 1<sup>st</sup> 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.