

MINUTES
SENATE HEALTH & WELFARE COMMITTEE

DATE: Tuesday, February 13, 2024

TIME: 3:00 P.M.

PLACE: Room WW54

MEMBERS PRESENT: Chair VanOrden, Senators Lee, Bjerke, Zuiderveld, Wintrow, and Taylor

ABSENT/ EXCUSED: Senator Harris

NOTE: The sign-in sheet, testimonies and other related materials will be retained with the minutes in the committee's office until the end of the session and will then be located on file with the minutes in the Legislative Services Library.

CONVENED: **Chair VanOrden** called the meeting of the Senate Health and Welfare Committee (Committee) to order at 3:00 p.m.

PRESENTATION: Medicaid Modernization: America's Health Insurance Plans (AHIP). **Rhys Jones**, Vice President of Medicaid Advocacy, provided information about America's Health Insurance Plans related to managed Medicaid care. AHIP offered the ability to improve effectiveness and quality of the Medicaid programs in Idaho, achieved budget predictability, improved use of State staff resources, and offered experience, innovations, and infrastructure. AHIP provided the State of Idaho flexibility in designing programs and focused on the benefits and ability to set network access standards and payments (Attachment 1).

DISCUSSION: In response to Committee questions, **Rhys Jones** stated that budgets and funding policy varied from state to state. Some states had saved money. Most often states were focused on repurposing state funds. The new structure and processes developed took time to learn and implement. Several states including Oregon, Tennessee, and Texas had long-term experience in managed Medicaid and would serve as excellent examples.

PRESENTATION: Medicaid Modernization: Select Health. **Russ Elbel**, Assistant Vice President provided an overview about Select Health related to managed Medicaid. Select Health put heavy investment in quality for Medicaid and included both physical and mental health as priorities. Individual costs were based on use of services with providers, and payment terms linked to outcomes, both for quality and for total cost of care. Being accredited with the National Committee for Quality Insurance was a standard that created a foundation for the organization to provide quality outcomes and quality processes. Select Health used value-based payments ranging from basic fee-for-service to services categorized by quality and value (Attachment 2).

DISCUSSION: In response to Committee questions, **Russ Elbel** clarified the use of the State's rainy day fund in that the financial peaks and valley of managed Medicaid would be directed through the Medicaid Stabilization Fund.

ADJOURNED: There being no further business at this time, **Chair VanOrden** adjourned the meeting at 4:15 p.m.

Senator VanOrden
Chair

Lena Amoah
Secretary