

MINUTES  
**HOUSE HEALTH & WELFARE COMMITTEE**

**DATE:** Wednesday, March 13, 2019

**TIME:** 9:00 A.M.

**PLACE:** Room EW20

**MEMBERS:** Chairman Wood, Vice Chairman Wagoner, Representatives Vander Woude, Gibbs, Blanksma, Kingsley, Zollinger, Christensen, Green(2), Lickley, Chew, Rubel, Davis (Goldman)

**ABSENT/  
EXCUSED:** Representative(s) Blanksma

**GUESTS:** Elizabeth Criner and Linda Swanstrom, ISDA; Michael McGrane, Susanne Jamison and Melissa Longgood, ID Dental Hygienists Assoc.; Cheryl Bloom, CID; Ron Williams, Delta Dental; Christine Pisani, DD Council; Deborah Johnson, ID Dental Hygienist; Denise Kimpson, Self; Pam Eaton, IRA/ILRA; Melinda Merrill, NW Grocery Assoc.; Tim S. Olson, Nez Perce Tribe; Taylor Wilkens and Helo Hancock, Marimn Health; Anna DeGraffenreid, CDA Tribe; Jim Baugh, DRI; Mel Leviton, Idaho SILC

**Chairman Wood** called the meeting to order at 9:00 a.m.

**MOTION:** **Rep. Lickley** made a motion to approve the minutes of the March 6, 2019, meeting.  
**Motion carried by voice vote.**

**S 1075aa:** **Sen. Abby Lee**, District 9, presented **S 1075aa**. This legislation addresses the ambiguity of service dog rights and provides direction to retail businesses. It stipulates what constitutes misbehavior, uncooperative handlers, and what businesses can do in those situations. The definition of service animals as dogs conforms to the Americans with Disabilities Act (ADA), with delineation between pets and service animals. Service animal licensure is broadened to include the animal's public behavior and business owners are given the right to remove a misbehaving animal from their businesses.

**Cheryl Bloom**, Consortium of Idahoans with Disabilities, Service Dog Owners, testified **in support** of **S 1075aa**. Her service dog can no longer perform her tasks after being attacked at the Chicago airport. Disabled handlers and trainers have rights of access, unless the dog is misbehaving. This federal alignment assists businesses to better serve their customer base. Handlers or trainers must carry an identification card from their training organization.

**Christine Pisani**, Executive Director, Idaho Council on Developmental Disabilities, testified **in support** of **S 1075aa**, which helps business owners understand what qualifies as a service animal, what constitutes a legal reason to leave a place of business, and expands the disability definition for those who rely on service animals.

**MOTION:** **Rep. Gibbs** made a motion to send **S 1075aa** to the floor with a **DO PASS** recommendation.

**Denise Kimpson**, Puppy Raiser, Canine Companions for Independence, appeared before the committee with **Joanie**, her nine-month old service animal in training. She testified **in support** of **S 1075aa** stating the legislation clarifies Idaho statute in line with the ADA and provides protections for Idahoans with disabilities.

**Pam Eaton**, CEO, President, Idaho Retailers Association, Idaho Lodging and Restaurant Association (IRA/ILRA), testified **in support** of **S 1075aa**, describing their interim work with the consortium to produce this legislation.

**Jim Baugh**, Executive Director, Disability Rights Idaho (DRI), testified **in support** of **S 1075aa**. The DRI staff attorney has assured them this legislation aligns with both federal statutes and the ADA intention.

For the record, no one else indicated their desire to testify.

**VOTE ON MOTION:**

**Chairman Wood** called for a vote on the motion to send **S 1075aa** to the floor with a **DO PASS** recommendation. **Motion carried by voice vote. Rep. Davis** will sponsor the bill on the floor.

**S 1129aa:**

**Tyrel Stevenson**, Legislative Director, Coeur d'Alene Tribe, presented **S 1129aa**. The tribe operates the Marimn Health Center as a cooperative effort with both the Health and Human Services (HHS) and the Indian Health Service (IHS) to address previous intermittent provider care. This collaboration has become a successful national model.

Attempting to decrease the tribe's dental decay rate, which is four times greater than the general public average, the IHS has approved the Dental Health Aid Therapy Program (DHAT). Because state approval is also required, this legislation authorizes the Idaho Board of Dentistry (IBOD) to license graduates from an accredited DHAT program. This legislation limits the DHATs to working on reservations, with one provision for preventative care to contiguous areas, such as the St. Mary's long-term care home at the edge of the reservation.

Limitations are placed on the number of DHATs per supervising dentist and within Idaho. The scope of practice rules will be promulgated by the IBOD. The use of DHATs will allow community members to train and return to help their community.

**Vice Chairman Wagoner** declared Rule 38 and will be voting.

Answering questions, **Mr. Stevenson** said both the American Dental Association and the IBOD require graduation from a Commission on Dental Accreditation (CODA) program. CODA is an independent accrediting body which sets the dental therapy training standards. Preventative care, to be defined in rules, will be routine care and not include fillings or extractions.

**Dr. Taylor Wilkens**, Dental Director, Marimn Health, testified **in support** of **S 1129aa**. He has toured the DHAT Alaskan training facility, met with the faculty, and observed classes. They use the same books and studies he used in dental school. He has no concerns about a DHAT's ability to deliver safe and effective care. The scope of practice is limited to fifty procedures. This assistance will be a more effective and efficient use of his skills. DHATs are designed to work with, not replace, team members.

**Anna DeGraffenreid**, Coeur d'Alene Tribal Member, testified **in support** of **S 1129aa**. Currently attending the Alaskan DHAT program, she plans to return to her community to teach the members how to take care of their teeth and help her people.

**Linda Swanstrom**, Executive Director, Idaho State Dental Association, testified the Association **is neutral** regarding **S 1129aa**. The association respects the people, tradition, and sovereignty of the Coeur d'Alene tribe and all native American communities in Idaho. There are concerns regarding adding DHATs to the oral health workforce because dental procedures are challenging and irreversible. The current model works well, leaving no need for a new mid-level provider.

**Michael McGrane**, Idaho Dental Hygienist Association (IDHA), testified in **opposition** to **S 1129aa** because it would establish an unnecessary mid-level dentistry provider. Alaska's DHAT program was designed for remote native Alaskan villages. A two-year training program following high school, it provides limited education and experience. The dental therapy model, with a dental hygiene therapy degree and additional education, is a better concept for oral health care, diseases, and this issue. The tribal extended access is already available.

**Susanne Jamison**, Executive Director, IDHA, Dental Hygienist, testified in **opposition** to **S 1129aa**. She suggested other options could be dual licensure and an access model. Licensure requires a three-year program and the Alaskan program is a two-year program. She requested this legislation be held and one to benefit all Idahoans be created.

**Deborah Johnson**, Registered Dental Hygienist, Idaho, Oregon, with extended practice permits, testified in **opposition** to **S 1129aa**. The dental hygienist model can provide periodontal disease therapy and is a safer, more educated model to advocate for the patient's whole health.

**Melissa Longgood**, Self, IDHA, testified in **opposition** to **S 1129aa**. Having lived on an Alaskan island, she saw the need for DHATs in rural territories; however, there is more dental care access in Idaho.

**Tim Olson**, Nez Perce Tribe, testified in **support** of **S 1129aa**. This is only for the reservations, not the general public beyond the reservation. It is difficult to recruit dental professionals for the rural reservations. The Nez Perce reservation has 4,900 members and one dentist.

For the record, no one else indicated their desire to testify.

Answering questions, **Dr. Wilkens** said the CODA accreditation three-year program is condensed into two years in the Alaskan DHAT program. Dentists, like DHATs, use referrals when situations are beyond their scope.

**Tyrel Stevenson**, in closing remarks, stated the unique sovereignty structure of the tribe excludes them from some models. The DHAT model will help address their dental issues.

- MOTION:** **Rep. Chew** made a motion to send **S 1129aa** to the floor with a **DO PASS** recommendation. Speaking to the motion, she shared her experience with the cultural trust level on the reservation and the benefit of using community members.
- VOTE ON MOTION:** **Chairman Wood** called for a vote on the motion to send **S 1129aa** to the floor with a **DO PASS** recommendation. **Motion carried by voice vote.** **Chairman Wood, Vice Chairman Wagoner, and Rep. Gibbs** requested they be recorded as voting **NAY.** **Rep. Chew** will sponsor the bill on the floor.
- ADJOURN:** There being no further business to come before the committee, the meeting adjourned at 10:05 a.m.

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Representative Wood  
Chair

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Irene Moore  
Secretary