LEGISLATURE OF THE STATE OF IDAHO

Sixty-fifth Legislature

1

2

3

4 5

6

7

8

9 10

11

12

13

14

15 16

17

18 19

20

21

22

23

24

25

26

27

28 29

30 31

32 33

34

35

36

37

38

39

40

41

42

43

44

45

Second Regular Session - 2020

IN THE HOUSE OF REPRESENTATIVES

HOUSE BILL NO. 600

BY HEALTH AND WELFARE COMMITTEE

AN ACT

RELATING TO MEDICAL AND INDIGENT ASSISTANCE; AMENDING SECTION 31-3502, IDAHO CODE, TO REVISE A DEFINITION; REPEALING SECTION 31-3503D, IDAHO CODE, RELATING TO COUNTY PARTICIPATION AND CONTRIBUTION TO THE UTI-LIZATION MANAGEMENT PROGRAM AND THIRD PARTY RECOVERY SYSTEM; AMENDING CHAPTER 35, TITLE 31, IDAHO CODE, BY THE ADDITION OF A NEW SECTION 31-3503G, IDAHO CODE, TO PROVIDE FOR THE END OF COUNTY MEDICAL ASSIS-TANCE; AMENDING CHAPTER 35, TITLE 31, IDAHO CODE, BY THE ADDITION OF A NEW SECTION 31-3519A, IDAHO CODE, TO PROVIDE FOR THE SUSPENSION OF THE CATASTROPHIC HEALTH CARE COST PROGRAM; AMENDING SECTION 20-605, IDAHO CODE, TO PROVIDE A RATE OF REIMBURSEMENT FOR MEDICAL CARE FOR INMATES; AMENDING SECTION 20-612, IDAHO CODE, TO REMOVE A PROVISION REGARDING REIMBURSEMENT FOR MEDICAL CARE FOR INMATES; AMENDING SECTION 31-863, IDAHO CODE, TO REVISE PROVISIONS REGARDING THE LEVY FOR CHARI-TIES FUND; AMENDING SECTION 31-3302, IDAHO CODE, TO REVISE PROVISIONS REGARDING REIMBURSEMENT FOR MEDICAL CARE FOR INMATES; AMENDING SECTION 31-3401, IDAHO CODE, TO REVISE PROVISIONS REGARDING CERTAIN POWERS TO IMPOSE A LEVY; AMENDING THE HEADING FOR CHAPTER 35, TITLE 31, IDAHO CODE; REPEALING SECTION 31-3501, IDAHO CODE, RELATING TO A DECLARATION OF POLICY; REPEALING SECTION 31-3502, IDAHO CODE, RELATING TO DEFI-NITIONS; AMENDING SECTION 31-3503, IDAHO CODE, TO REVISE PROVISIONS REGARDING POWERS AND DUTIES OF COUNTY COMMISSIONERS; AMENDING SECTION 31-3503A, IDAHO CODE, TO REVISE PROVISIONS REGARDING POWERS AND DUTIES OF THE BOARD OF THE CATASTROPHIC HEALTH CARE COST PROGRAM; REPEALING SECTION 31-3503C, IDAHO CODE, RELATING TO THE POWERS AND DUTIES OF THE DEPARTMENT OF HEALTH AND WELFARE; REPEALING SECTION 31-3503E, IDAHO CODE, RELATING TO MEDICAID ELIGIBILITY DETERMINATION; REPEALING SEC-TION 31-3503F, IDAHO CODE, RELATING TO PATIENT MEDICAL HOMES; REPEALING SECTION 31-3504, IDAHO CODE, RELATING TO AN APPLICATION FOR FINANCIAL ASSISTANCE; REPEALING SECTION 31-3505, IDAHO CODE, RELATING TO THE TIME AND MANNER OF FILING APPLICATIONS FOR FINANCIAL ASSISTANCE; REPEALING SECTION 31-3505A, IDAHO CODE, RELATING TO INVESTIGATION OF AN APPLI-CATION FOR FINANCIAL ASSISTANCE; REPEALING SECTION 31-3505B, IDAHO CODE, RELATING TO APPROVAL OF AN APPLICATION FOR FINANCIAL ASSISTANCE; REPEALING SECTION 31-3505C, IDAHO CODE, RELATING TO AN INITIAL DECI-SION BY THE COUNTY COMMISSIONERS; REPEALING SECTION 31-3505D, IDAHO CODE, RELATING TO AN APPEAL OF INITIAL DETERMINATION DENYING AN APPLI-CATION; REPEALING SECTION 31-3505E, IDAHO CODE, RELATING TO HEARING ON APPEAL; REPEALING SECTION 31-3505F, IDAHO CODE, RELATING TO ARBITRA-TION; REPEALING SECTION 31-3505G, IDAHO CODE, RELATING TO A PETITION FOR JUDICIAL REVIEW; REPEALING SECTION 31-3506, IDAHO CODE, RELATING TO AN OBLIGATED COUNTY; REPEALING SECTION 31-3507, IDAHO CODE, RELAT-ING TO THE TRANSFER OF A MEDICALLY INDIGENT PATIENT; REPEALING SECTION 31-3508, IDAHO CODE, RELATING TO LIMITATIONS ON PAYMENTS FOR NECESSARY MEDICAL SERVICES; REPEALING SECTION 31-3508A, IDAHO CODE, RELATING TO

3

5

6

7

8

9

11

12

13

14

15 16

17

18

19 20

21

22

23

24

25

26

27

28

29

30

31

32

33

34

35

36

37

38

39

40

41

42

43

44

45

46

47

48

49

PAYMENT FOR NECESSARY MEDICAL SERVICES BY AN OBLIGATED COUNTY; REPEAL-ING SECTION 31-3510, IDAHO CODE, RELATING TO A RIGHT OF SUBROGATION; AMENDING SECTION 31-3510A, IDAHO CODE, TO REMOVE PROVISIONS REGARDING REIMBURSEMENT AND TO MAKE A TECHNICAL CORRECTION; REPEALING SECTION 31-3511, IDAHO CODE, RELATING TO VIOLATIONS AND PENALTIES; AMENDING SECTION 31-3514, IDAHO CODE, TO PROVIDE A CORRECT CODE REFERENCE AND TO MAKE TECHNICAL CORRECTIONS; AMENDING SECTION 31-3516, IDAHO CODE, TO PROVIDE CORRECT TERMINOLOGY; REPEALING SECTION 31-3518, IDAHO CODE, RELATING TO ADMINISTRATIVE RESPONSIBILITY; AMENDING SECTION 31-3519, IDAHO CODE, TO REMOVE PROVISIONS REGARDING APPROVAL BY THE BOARD OF THE CATASTROPHIC HEALTH CARE COST PROGRAM AND TO MAKE A TECHNICAL COR-RECTION; REPEALING SECTION 31-3520, IDAHO CODE, RELATING TO CONTRACTS FOR THE PROVISION OF NECESSARY MEDICAL SERVICES; REPEALING SECTION 31-3521, IDAHO CODE, RELATING TO EMPLOYMENT OF PHYSICIANS AND OTHER PROVIDERS; REPEALING SECTION 31-3550, IDAHO CODE, RELATING TO A DECLA-RATION OF POLICY; REPEALING SECTION 31-3551, IDAHO CODE, RELATING TO AN ADVISORY PANEL; REPEALING SECTION 31-3552, IDAHO CODE, RELATING TO AP-POINTMENT OF AN ADVISORY PANEL; REPEALING SECTION 31-3553, IDAHO CODE, RELATING TO ADVISORY DECISIONS; REPEALING SECTION 31-3554, IDAHO CODE, RELATING TO TOLLING OF LIMITATION PERIODS; REPEALING SECTION 31-3555, IDAHO CODE, RELATING TO STAY OF COURT PROCEEDINGS; REPEALING SECTION 31-3556, IDAHO CODE, RELATING TO EXPENSES FOR ADVISORY PANEL MEMBERS; REPEALING SECTION 31-3557, IDAHO CODE, RELATING TO FREQUENCY OF AND AGENDA FOR ADVISORY PANEL MEETINGS; REPEALING SECTION 31-3558, IDAHO CODE, RELATING TO NONDISCLOSURE OF PERSONAL IDENTIFYING INFORMATION; AMENDING SECTION 31-3607, IDAHO CODE, TO REMOVE CODE REFERENCES AND TO MAKE TECHNICAL CORRECTIONS; AMENDING SECTION 49-673, IDAHO CODE, TO PROVIDE FOR THE APPORTIONMENT OF CERTAIN FINES TO THE MEDICAID EXPAN-SION FUND AND TO MAKE TECHNICAL CORRECTIONS; AMENDING SECTION 56-209b, IDAHO CODE, TO ESTABLISH THE MEDICAID EXPANSION FUND AND THE MEDICAID STABILIZATION FUND AND TO MAKE TECHNICAL CORRECTIONS; REPEALING SEC-TION 56-209f, IDAHO CODE, RELATING TO THE STATE FINANCIAL ASSISTANCE PROGRAM FOR MEDICALLY INDIGENT RESIDENTS; AMENDING CHAPTER 2, TITLE 56, IDAHO CODE, BY THE ADDITION OF A NEW SECTION 56-268, IDAHO CODE, TO PRO-VIDE FOR THE ALLOCATION OF MEDICAID EXPANSION COSTS AND TO PROVIDE FOR REGULAR FUNDING FORMULA REVIEW; AMENDING SECTION 57-813, IDAHO CODE, TO REVISE PROVISIONS REGARDING THE CATASTROPHIC HEALTH CARE COST ACCOUNT; AMENDING SECTION 63-3638, IDAHO CODE, TO PROVIDE FOR A DISTRIBUTION TO THE MEDICAID STABILIZATION FUND AND TO MAKE TECHNICAL CORRECTIONS; AMENDING SECTION 66-327, IDAHO CODE, TO REVISE PROVISIONS REGARDING RESPONSIBILITY FOR COSTS OF COMMITMENT AND CARE OF PATIENTS AND TO MAKE TECHNICAL CORRECTIONS; AMENDING CHAPTER 3, TITLE 66, IDAHO CODE, BY THE ADDITION OF A NEW SECTION 66-327A, IDAHO CODE, TO ESTABLISH PROVI-SIONS REGARDING COSTS OF AN OBLIGATED COUNTY; AMENDING SECTION 67-2302, IDAHO CODE, TO REMOVE A PROVISION REGARDING PROMPT PAYMENT FOR GOODS AND SERVICES AND TO MAKE TECHNICAL CORRECTIONS; AMENDING SECTION 67-7903, IDAHO CODE, TO REMOVE A PROVISION REGARDING VERIFICATION OF LAWFUL PRESENCE AND TO MAKE TECHNICAL CORRECTIONS; AMENDING SECTION 72-1003, IDAHO CODE, TO REMOVE A DEFINITION AND TO MAKE TECHNICAL CORRECTIONS;

1 AMENDING SECTION 31-3503B, IDAHO CODE, TO REMOVE A CODE REFERENCE; 2 DECLARING AN EMERGENCY; AND PROVIDING EFFECTIVE DATES.

Be It Enacted by the Legislature of the State of Idaho:

SECTION 1. That Section 31-3502, Idaho Code, be, and the same is hereby amended to read as follows:

- 31-3502. DEFINITIONS. As used in this chapter, the terms defined in this section shall have the following meaning, unless the context clearly indicates another meaning:
- (1) "Applicant" means any person who is requesting financial assistance under this chapter.
- (2) "Application" means the combined application for state and county medical assistance pursuant to sections 31-3504 and 31-3503E, Idaho Code. In this chapter an application for state and county medical assistance shall also mean an application for financial assistance.
- (3) "Board" means the board of the catastrophic health care cost program, as established in section 31-3517, Idaho Code.
- (4) "Case management" means coordination of services to help meet a patient's health care needs, usually when the patient has a condition that requires multiple services.
- (5) "Catastrophic health care costs" means the cost of necessary medical services received by a recipient that, when paid at the then existing reimbursement rate, exceeds the total sum of eleven thousand dollars (\$11,000) in the aggregate in any consecutive twelve (12) month period.
- (6) "Clerk" means the clerk of the respective counties or his or her designee.
- (7) "Completed application" shall include at a minimum the cover sheet requesting services, applicant information including diagnosis and requests for services and signatures, personal and financial information of the applicant and obligated person or persons, patient rights and responsibilities, releases and all other signatures required in the application.
- (8) "County commissioners" means the board of county commissioners in their respective counties.
- (9) "County hospital" means any county approved institution or facility for the care of sick persons.
 - (10) "Department" means the department of health and welfare.
- (11) "Dependent" means any person whom a taxpayer claims as a dependent under the income tax laws of the state of Idaho.
- (12) "Emergency service" means a service provided for a medical condition in which sudden, serious and unexpected symptoms of illness or injury are sufficiently severe to necessitate or call for immediate medical care, including, but not limited to, severe pain, that the absence of immediate medical attention could reasonably be expected by a prudent person who possesses an average knowledge of health and medicine, to result in:
 - (a) Placing the patient's health in serious jeopardy;
 - (b) Serious impairment to bodily functions; or
 - (c) Serious dysfunction of any bodily organ or part.
- (13) "Hospital" means a facility licensed and regulated pursuant to sections 39-1301 through 39-1314, Idaho Code, or an out-of-state hospital

providing necessary medical services for residents of Idaho, wherein a reciprocal agreement exists, in accordance with section 31-3503B, Idaho Code, excluding state institutions.

- (14) "Medicaid eligibility review" means the process used by the department to determine whether a person meets the criteria for medicaid coverage.
- (15) "Medical claim" means the itemized statements and standard forms used by hospitals and providers to satisfy centers for medicare and medicaid services (CMS) claims submission requirements.
- (16) "Medical home" means a model of primary and preventive care delivery in which the patient has a continuous relationship with a personal physician in a physician directed medical practice that is whole person oriented and where care is integrated and coordinated.
- (17) "Medically indigent" means any person who is in need of necessary medical services and who, if an adult, together with his or her spouse, or whose parents or guardian if a minor or dependent, does not have income and other resources available to him from whatever source sufficient to pay for necessary medical services whose modified adjusted gross income does not exceed one hundred thirty-three percent (133%) of the federal poverty level as described in section 56-267, Idaho Code. Nothing in this definition shall prevent the board and the county commissioners from requiring the applicant and obligated persons to reimburse the county and the catastrophic health care cost program, where appropriate, for all or a portion of their medical expenses, when investigation of their application pursuant to this chapter, determines their ability to do so.
 - (18) A. "Necessary medical services" means health care services and supplies that:
 - (a) Health care providers, exercising prudent clinical judgment, would provide to a person for the purpose of preventing, evaluating, diagnosing or treating an illness, injury, disease or its symptoms;
 - (b) Are in accordance with generally accepted standards of medical practice;
 - (c) Are clinically appropriate, in terms of type, frequency, extent, site and duration and are considered effective for the covered person's illness, injury or disease;
 - (d) Are not provided primarily for the convenience of the person, physician or other health care provider; and
 - (e) Are the most cost-effective service or sequence of services or supplies, and at least as likely to produce equivalent therapeutic or diagnostic results for the person's illness, injury or disease.
 - B. Necessary medical services shall not include the following:
 - (a) Bone marrow transplants;
 - (b) Organ transplants;
 - (c) Elective, cosmetic and/or experimental procedures;
 - (d) Services related to, or provided by, residential, skilled nursing, assisted living and/or shelter care facilities;
 - (e) Normal, uncomplicated pregnancies, excluding caesarean section, and childbirth well-baby care;
 - (f) Medicare copayments and deductibles;

- (g) Services provided by, or available to, an applicant from state, federal and local health programs;
- (h) Medicaid copayments and deductibles; and
- (i) Drugs, devices or procedures primarily utilized for weight reduction and complications directly related to such drugs, devices or procedures.
- (19) "Obligated person" means the person or persons who are legally responsible for an applicant including, but not limited to, parents of minors or dependents.
- (20) "Primary and preventive health care" means the provision of professional health services that include health education and disease prevention, initial assessment of health problems, treatment of acute and chronic health problems and the overall management of an individual's health care services.
- (21) "Provider" means any person, firm or corporation certified or licensed by the state of Idaho or holding an equivalent license or certification in another state, that provides necessary medical services to a patient requesting a medically indigent status determination or filing an application for financial assistance.
- (22) "Recipient" means an individual determined eligible for financial assistance under this chapter.
- (23) "Reimbursement rate" means the unadjusted medicaid rate of reimbursement for medical charges allowed pursuant to title XIX of the social security act, as amended, that is in effect at the time service is rendered. The "reimbursement rate" shall mean ninety-five percent (95%) of the unadjusted medicaid rate.
- (24) "Resident" means a person with a home, house, place of abode, place of habitation, dwelling or place where he or she actually lived for a consecutive period of thirty (30) days or more within the state of Idaho. A resident does not include a person who comes into this state for temporary purposes, including, but not limited to, education, vacation, or seasonal labor. Entry into active military duty shall not change a person's residence for the purposes of this chapter. Those physically present within the following facilities and institutions shall be residents of the county where they were residents prior to entering the facility or institution:
 - (a) Correctional facilities;

- (b) Nursing homes or residential or assisted living facilities;
- (c) Other medical facility or institution.
- (25) "Resources" means all property, for which an applicant and/or an obligated person may be eligible or in which he or she may have an interest, whether tangible or intangible, real or personal, liquid or nonliquid, or pending, including, but not limited to, all forms of public assistance, crime victims compensation, worker's compensation, veterans benefits, medicaid, medicare, supplemental security income (SSI), third party insurance, other insurance or apply for section 1011 of the medicare modernization act of 2003, if applicable, and any other property from any source. Resources shall include the ability of an applicant and obligated persons to pay for necessary medical services, excluding any interest charges, over a period of up to five (5) years starting on the date necessary medical services are first provided. For purposes of determining approval for medical indigency

only, resources shall not include the value of the homestead on the applicant or obligated person's residence, a burial plot, exemptions for personal property allowed in section 11-605(1) through (3), Idaho Code, and additional exemptions allowed by county resolution.

- (26) "Third party applicant" means a person other than an obligated person who completes, signs and files an application on behalf of a patient. A third party applicant who files an application on behalf of a patient pursuant to section 31-3504, Idaho Code, shall, if possible, deliver a copy of the application to the patient within three (3) business days after filing the application.
- (27) "Third party insurance" means casualty insurance, disability insurance, health insurance, life insurance, marine and transportation insurance, motor vehicle insurance, property insurance or any other insurance coverage that may pay for a resident's medical bills.
- (28) "Utilization management" means the evaluation of medical necessity, appropriateness and efficiency of the use of health care services, procedures and facilities. "Utilization management" may include, but is not limited to, preadmission certification, the application of practice guidelines, continued stay review, discharge planning, case management, preauthorization of ambulatory procedures, retrospective review and claims review. "Utilization management" may also include the amount to be paid based on the application of the reimbursement rate to those medical services determined to be necessary medical services.
- SECTION 2. That Section 31-3503D, Idaho Code, be, and the same is hereby repealed.
- SECTION 3. That Chapter 35, Title 31, Idaho Code, be, and the same is hereby amended by the addition thereto of a $\underline{\text{NEW SECTION}}$, to be known and designated as Section 31-3503G, Idaho Code, and to read as follows:
- 31-3503G. END OF COUNTY MEDICAL ASSISTANCE. (1) Notwithstanding any provision of law or rule to the contrary, no board of county commissioners shall approve an application for financial assistance after this section has been effective for one hundred eighty (180) days.
- (2) A board of county commissioners may, as necessary, continue to administer county medical assistance relating to applications approved prior to the deadline described in subsection (1) of this section for up to twelve (12) months following the effective date of this section.
- SECTION 4. That Chapter 35, Title 31, Idaho Code, be, and the same is hereby amended by the addition thereto of a $\underline{\text{NEW SECTION}}$, to be known and designated as Section 31-3519A, Idaho Code, and to read as follows:
- 31-3519A. SUSPENSION OF THE CATASTROPHIC HEALTH CARE COST PRO-GRAM. (1) Notwithstanding any provision of law or rule to the contrary, no application for financial assistance through the board of the catastrophic health care cost program shall be approved under this chapter if such application is made on or after the one (1) year anniversary of the effective date of this section.

(2) Final decisions by the board of the catastrophic health care cost program on all outstanding applications for financial assistance must occur on or before June 30, 2021.

1 2

3

4 5

6 7

8

10

11

12

13

14

15

16

17

18

19

20 21

22

23

24

25 26

27

28

29

30

31

32

33

34 35

36 37

38

39

40

41 42

43

44

45 46

47

48

- (3) Final payments on medical claims shall be disbursed with funds appropriated for fiscal year 2021.
- (4) Upon final decision of all outstanding applications for financial assistance, the board of the catastrophic health care cost program shall suspend operations, but board members shall retain their appointments. The department of health and welfare shall act as a fiscal agent to oversee any ongoing administrative actions, including distribution of any remaining outstanding payments from the catastrophic health care cost account and collection of ongoing reimbursements for deposit into that account in accordance with final board decisions.

SECTION 5. That Section 20-605, Idaho Code, be, and the same is hereby amended to read as follows:

COSTS OF CONFINEMENT. (1) The county wherein any court has 20-605. entered an order pursuant to section 20-604, Idaho Code, shall pay all direct and indirect costs of the detention or confinement of the person to the governmental unit or agency owning or operating the jail or confinement facilities in which the person was confined or detained. The amount of such direct and indirect costs shall be determined on a per day per person basis by agreement between the county wherein the court entered the order and the county or governmental unit or agency owning or operating such jail or confinement facilities. In the absence of such agreement or order fixing the cost as provided in section 20-606, Idaho Code, the charge for each person confined or detained shall be the sum of thirty-five dollars (\$35.00) per day, plus the cost of any medical or dental services paid at the rate of reimbursement as provided in chapter 35, title 31, Idaho Code subsection (2) of this section, unless a rate of reimbursement is otherwise established by contract or agreement; provided, however, that the county may determine whether the detained or confined person is eligible for any local, state, federal or private program that covers dental, medical and/or burial expenses. That person will be required to apply for those benefits, and any such benefits obtained may be applied to the detained or confined person's incurred expenses, and in the event of the death of such detained or confined person, the county wherein the court entered the order shall pay all actual burial costs. Release from an order pursuant to section 20-604, Idaho Code, for the purpose of a person receiving medical treatment shall not relieve the county of its obligation of paying the medical care expenses imposed in this section. In case a person confined or detained was initially arrested by a city police officer for violation of the motor vehicle laws of this state or for violation of a city ordinance, the cost of such confinement or detention shall be a charge against such city by the county wherein the order of confinement was entered. All payments under this section shall be acted upon for each calendar month by the second Monday of the month following the date of billing.

(2) Unless a rate of reimbursement is otherwise established by contract or agreement, the rate of reimbursement shall be ninety-five percent (95%) of the unadjusted medicaid rate of reimbursement for medical charges allowed

pursuant to title XIX of the social security act, as amended, that is in effect at the time service is rendered.

 SECTION 6. That Section 20-612, Idaho Code, be, and the same is hereby amended to read as follows:

20-612. RECEPTION AND BOARD OF PRISONERS. The sheriff must receive all persons committed to jail by competent authority except mentally ill persons not charged with a crime and juveniles. It shall be the duty of the board of county commissioners to furnish all persons committed to the county jail with necessary food, clothing, bedding, and medical care, and the board of county commissioners is authorized to pay therefor out of the county treasury under such rules and regulations as they may prescribe. The county's obligation herein shall not apply when the person is no longer committed to the county jail if the person has been released pursuant to a dismissal, bail, or any other court order of release, unless the release is a temporary release from the jail solely for the purpose of receiving medical care for an injury that occurred while committed in the county jail. Nothing in this chapter precludes a released person from access to coverage under chapter 35, title 31, Idaho Code.

SECTION 7. That Section 31-863, Idaho Code, be, and the same is hereby amended to read as follows:

31-863. LEVY FOR CHARITIES FUND. For the purpose of nonmedical indigent assistance pursuant to chapter 34, title 31, Idaho Code, for the purpose of involuntary mental health services pursuant to chapter 3, title 66, Idaho Code, and for the purpose of providing financial assistance on behalf of the medically indigent, pursuant to chapter 35, services authorized by chapter 46, title 31, Idaho Code, said boards are authorized to levy an ad valorem tax not to exceed ten hundredths of one percent (.10%) of the market value for assessment purposes of all taxable property in the county.

SECTION 8. That Section 31-3302, Idaho Code, be, and the same is hereby amended to read as follows:

- 31-3302. COUNTY CHARGES ENUMERATED. The following are county charges:
- (1) Charges incurred against the county by virtue of any provision of this title.
- (2) The compensation allowed by law to constables and sheriffs for executing process on persons charged with criminal offenses; for services and expenses in conveying criminals to jail; for the service of subpoenas issued by or at the request of the prosecuting attorneys, and for other services in relation to criminal proceedings.
- (3) The expenses necessarily incurred in the support of persons charged with or convicted of crime and committed therefor to the county jail. Provided that any mMedical expenses shall be paid at the rate of reimbursement as provided in chapter 35, title 31 section 20-605(2), Idaho Code, unless a rate of reimbursement is otherwise established by contract or agreement.

(4) The compensation allowed by law to county officers in criminal proceedings, when not otherwise collectible.

- (5) The sum required by law to be paid to grand jurors and indigent witnesses in criminal cases.
- (6) The accounts of the coroner of the county, for such services as are not provided to be paid otherwise.
- (7) The necessary expenses incurred in the support of county hospitals, and the indigent sick and nonmedical assistance for indigents, whose support is chargeable to the county.
- (8) The contingent expenses, necessarily incurred for the use and benefit of the county.
- (9) Every other sum directed by law to be raised for any county purpose, under the direction of the board of county commissioners, or declared to be a county charge.
- SECTION 9. That Section 31-3401, Idaho Code, be, and the same is hereby amended to read as follows:
- 31-3401. POWERS AND DUTIES OF THE BOARD OF COUNTY COMMISSIONERS. The boards of county commissioners in their respective counties shall, under such limitations and restrictions as are prescribed by law, evaluate the need and provide to indigent person(s) nonmedical assistance in a temporary situation only when no alternatives exist. Nothing in this chapter shall imply county assistance is to be provided on a continuing basis. Boards of county commissioners, by resolution, shall promulgate policies and procedures, may negotiate payment to providers, and may contract for nonmedical services, pursuant to this chapter. For the purpose of funding nonmedical services for indigent persons, boards of county commissioners are authorized to levy an ad valorem tax pursuant to section $\frac{31-3503}{31-863}$, Idaho Code.
- SECTION 10. That the Heading for Chapter 35, Title 31, Idaho Code, be, and the same is hereby amended to read as follows:

31 CHAPTER 35 32 COUNTY HOSPITALS FOR INDIGENT SICK

- SECTION 11. That Section 31-3501, Idaho Code, be, and the same is hereby repealed.
- SECTION 12. That Section 31-3502, Idaho Code, be, and the same is hereby repealed.
- 37 SECTION 13. That Section 31-3503, Idaho Code, be, and the same is hereby 38 amended to read as follows:
 - 31-3503. POWERS AND DUTIES OF COUNTY COMMISSIONERS. The county commissioners in their respective counties shall, under such limitations and restrictions as are prescribed by law:
 - (1) Pay for necessary medical services for the medically indigent residents of their counties as provided in this chapter and as approved by the

county commissioners at the reimbursement rate up to the total sum of eleven thousand dollars (\$11,000) in the aggregate per resident in any consecutive twelve (12) month period or contract for the provision of necessary medical services pursuant to sections 31-3520 and 31-3521, Idaho Code.

- (2) Have the right to contract with providers, transfer patients, negotiate provider agreements, conduct utilization management or any portion thereof, pay for authorized expenses directly, or indirectly through the use of alternative programs, that would assist in managing costs of providing health care for indigent persons, and all other powers incident to the county's duties created by this chapter.
- (3) Cooperate with the department, the board and contractors retained by the department or the board to provide services including, but not limited to, medicaid eligibility review and utilization management on behalf of the counties and the board.
- (4) Have , have the jurisdiction and power to provide county hospitals and public general hospitals for the county and others who are sick, injured, maimed, aged and infirm and to erect, enlarge, purchase, lease, or otherwise acquire, and to officer, maintain and improve hospitals, hospital grounds, nurses' homes, shelter care facilities and residential or assisted living facilities as defined in section 39-3301, Idaho Code, superintendent's quarters, medical clinics, as that term is defined in section 39-1319, Idaho Code, medical clinic grounds or any other necessary buildings, and to equip the same, and to replace equipment, and for this purpose said commissioners may levy an additional tax of not to exceed six hundredths percent (.06%) of the market value for assessment purposes on all taxable property within the county. The term "public general hospitals" as used in this subsection shall be construed to include nursing homes.
- SECTION 14. That Section 31-3503A, Idaho Code, be, and the same is hereby amended to read as follows:
- 31-3503A. POWERS AND DUTIES OF THE BOARD. The board shall, under such limitations and restrictions as are prescribed by law:
- (1) Pay for the cost of necessary medical services for a medically indigent resident, as provided in and approved pursuant to this chapter, where the cost of necessary medical services when paid at the reimbursement rate exceeds the total sum of eleven thousand dollars (\$11,000) in the aggregate per resident in any consecutive twelve (12) month period;
- (2) Have the right to negotiate provider agreements, contract for utilization management or any portion thereof, pay for authorized expenses directly, or indirectly through the use of alternative programs, that would assist in managing costs of providing health care for indigent persons, and all other powers incident to the board's duties created by this chapter;
- (3) Cooperate with the department, respective counties of the state and contractors retained by the department or county commissioners to provide services including, but not limited to, eligibility review and utilization management on behalf of the counties and the board;
- (4) Require, as the board deems necessary, annual reports from each county and each hospital including, but not limited to, the following:
 - (a) From each county and for each applicant:
 - (i) Case number and the date services began;

```
<del>(ii) Age;</del>
1
2
               (iii) Residence;
               (iv) Sex;
3
               (v) Diagnosis;
               (vi) Income;
               (vii) Family size;
6
               (viii) Amount of costs incurred including provider, legal and ad-
               ministrative charges;
8
               (ix) Approval or denial; and
9
10
               (x) Reasons for denial.
         (b) From each hospital:
11
               (i) 990 tax forms or comparable information;
12
               (ii) Cost of charges where charitable care was provided; and
13
               (iii) Administrative and legal costs incurred in processing
14
               claims under this chapter.
15
16
         (5) Authorize all disbursements from the catastrophic health care cost
    program in accordance with the provisions of this chapter;
17
18
         (6) Make and enter into contracts;
         (73) Develop and submit a proposed budget setting forth the amount nec-
19
20
    essary to perform its functions and prepare an annual report;
21
         (84) Perform such other duties as set forth in the laws of this state;
    and
22
         (95) Conduct examinations, investigations, audits and hear testimony
23
24
    and take proof, under oath or affirmation, at public or private hearings, on
    any matter necessary to fulfill its duties.
25
                       That Section 31-3503C, Idaho Code, be, and the same is
26
         SECTION 15.
27
    hereby repealed.
28
         SECTION 16.
                       That Section 31-3503E, Idaho Code, be, and the same is
    hereby repealed.
29
30
         SECTION 17.
                       That Section 31-3503F, Idaho Code, be, and the same is
31
    hereby repealed.
32
         SECTION 18. That Section 31-3504, Idaho Code, be, and the same is hereby
33
         SECTION 19. That Section 31-3505, Idaho Code, be, and the same is hereby
34
35
    repealed.
         SECTION 20.
                       That Section 31-3505A, Idaho Code, be, and the same is
36
    hereby repealed.
37
38
         SECTION 21.
                       That Section 31-3505B, Idaho Code, be, and the same is
    hereby repealed.
39
40
         SECTION 22.
                       That Section 31-3505C, Idaho Code, be, and the same is
    hereby repealed.
41
42
         SECTION 23.
                       That Section 31-3505D, Idaho Code, be, and the same is
43
    hereby repealed.
```

- SECTION 24. That Section 31-3505E, Idaho Code, be, and the same is hereby repealed.
- 3 SECTION 25. That Section 31-3505F, Idaho Code, be, and the same is hereby repealed.
- 5 SECTION 26. That Section 31-3505G, Idaho Code, be, and the same is hereby repealed.
- SECTION 27. That Section 31-3506, Idaho Code, be, and the same is hereby repealed.
- 9 SECTION 28. That Section 31-3507, Idaho Code, be, and the same is hereby repealed.
- SECTION 29. That Section 31-3508, Idaho Code, be, and the same is hereby repealed.
- SECTION 30. That Section 31-3508A, Idaho Code, be, and the same is hereby repealed.
- SECTION 31. That Section 31-3510, Idaho Code, be, and the same is hereby repealed.
- SECTION 32. That Section 31-3510A, Idaho Code, be, and the same is hereby amended to read as follows:

- 31-3510A. REIMBURSEMENT. (1) Receipt of financial assistance pursuant to this chapter shall obligate an applicant to reimburse the obligated county and the board for such reasonable portion of the financial assistance paid on behalf of the applicant as the county commissioners may determine that the applicant is able to pay from resources over a reasonable period of time. Cash amounts received shall be prorated between the county and the board in proportion to the amount each has paid.
- (2) A final determination shall not relieve the applicant's duty to make additional reimbursement from resources if the county commissioners subsequently find within a reasonable period of time that there has been a substantial change in circumstances such that the applicant is able to pay additional amounts up to the total claim paid on behalf of the applicant.
- (3) A final determination shall not prohibit the county commissioners from reviewing a petition from an applicant to reduce an order of reimbursement based on a substantial change in circumstances.
- (4) The automatic lien created pursuant to the this chapter may be filed and recorded in any county of this state wherein the applicant has resources and may be liquidated or unliquidated in amount. Nothing herein shall prohibit an applicant from executing a consensual lien in addition to the automatic lien created by filing an application pursuant to this chapter. In the event that resources can be located in another state, the clerk may file the lien with the district court and provide notice to the recipient. The recipient shall have twenty (20) days to object, following which the district court shall enter judgment against the recipient. The judgment entered may

thereafter be filed as provided for the filing of a foreign judgment in that jurisdiction.

- (5) The county shall have the same right of recovery as provided to the state of Idaho pursuant to sections 56-218 and 56-218A, Idaho Code.
- (6) The county commissioners may require the employment of such of the medically indigent as are capable and able to work and whose attending physician certifies they are capable of working.
- (7) That portion of the moneys received by a county as reimbursement that are not assigned to the catastrophic health care cost program shall be credited to the respective county medically indigent fund.
- (8) If, after a hearing, the final determination of the county commissioners is to require a reimbursement amount or rate the applicant believes excessive, the applicant may seek judicial review of the final determination of the county commissioners in the manner provided in section 31-1506, Idaho Code.
- SECTION 33. That Section 31-3511, Idaho Code, be, and the same is hereby repealed.
- SECTION 34. That Section 31-3514, Idaho Code, be, and the same is hereby amended to read as follows:
- 31-3514. INTERNAL MANAGEMENT -- ACCOUNTS AND REPORTS. Such facilities as referred to in section $31-3503\frac{(2)}{(2)}$, Idaho Code, may suitably provide for and accept other patients and must charge and accept payments from such other patients as are able to make payments for services rendered and care given. The county commissioners may make suitable rules and regulations for the management and operation of such property by a suitable board of control, or otherwise, or for carrying out such hospital uses and purposes under a lease of the same.

The boards or officers or lessees of such hospital property shall render accounts and reports to the county commissioners as may be required by the county commissioners; and shall render accounts and deliver over any and all moneys received by them for the county to the county treasurer to be credited to the operation expense of hospitals and indigent sick and otherwise dependent poor of the county in such manner as provided by law for the handling of funds of this kind.

Said board of control may permit persons from out of the county where such hospital is located to be admitted for hospitalization to such hospital. As to such cases, special rates for the use and service of such hospital may be provided, which rates shall apply equally to all such patients who do not pay taxes within the county where such hospital is located. The purpose of providing such special rates shall be to compel persons living out of the county where such hospital is located, and who receive hospitalization in such hospital, to bear a just burden of the cost of construction and maintenance of such hospital.

SECTION 35. That Section 31-3516, Idaho Code, be, and the same is hereby amended to read as follows:

31-3516. SEPARABILITY SEVERABILITY. If any provision of this chapter or the application thereof to any person or circumstance is held invalid, such invalidity shall not affect other provisions or applications of this chapter, which can be given effect without the invalid provisions or applications, and to this end the provisions of this chapter are declared to be severable.

 SECTION 36. That Section 31-3518, Idaho Code, be, and the same is hereby repealed.

SECTION 37. That Section 31-3519, Idaho Code, be, and the same is hereby amended to read as follows:

31-3519. APPROVAL AND PAYMENT BY THE BOARD. (1) Upon receipt of the clerk's statement, a final determination of the county commissioners and the completed application, the board shall approve an application for financial assistance under the catastrophic health care cost program if it determines that \div

(a) Nnecessary medical services have been provided for a medically indigent resident in accordance with this chapter;

- (b) The obligated county paid the first eleven thousand dollars (\$11,000) of necessary medical services; and
- (c) The cost of necessary medical services when paid at the reimbursement rate exceeds the total sum of eleven thousand dollars (\$11,000) in the aggregate per resident in any consecutive twelve (12) month period.
- (2) Payment to a hospital or provider pursuant to this chapter shall be payment of the debt in full, and the hospital or provider shall not seek additional funds from the applicant.
- (3) In no event shall the board be obligated to pay a claim, pursuant to this chapter, in excess of an amount based on the application of the appropriate reimbursement rate to those medical services determined to be necessary medical services. The board may use contractors to undertake utilization management review in any part of that analysis.
- (4) The board shall, within forty-five (45) days after approval by the board, submit the claim to the state controller for payment. Payment by the state controller shall be made pursuant to section 67-2302, Idaho Code.

SECTION 38. That Section 31-3520, Idaho Code, be, and the same is hereby repealed.

SECTION 39. That Section 31-3521, Idaho Code, be, and the same is hereby repealed.

38 SECTION 40. That Section 31-3550, Idaho Code, be, and the same is hereby 39 repealed.

SECTION 41. That Section 31-3551, Idaho Code, be, and the same is hereby repealed.

SECTION 42. That Section 31-3552, Idaho Code, be, and the same is hereby repealed.

SECTION 43. That Section 31-3553, Idaho Code, be, and the same is hereby repealed.

SECTION 44. That Section 31-3554, Idaho Code, be, and the same is hereby repealed.

SECTION 45. That Section 31-3555, Idaho Code, be, and the same is hereby repealed.

SECTION 46. That Section 31-3556, Idaho Code, be, and the same is hereby repealed.

9 SECTION 47. That Section 31-3557, Idaho Code, be, and the same is hereby repealed.

SECTION 48. That Section 31-3558, Idaho Code, be, and the same is hereby repealed.

SECTION 49. That Section 31-3607, Idaho Code, be, and the same is hereby amended to read as follows:

31-3607. DUTIES OF BOARD. (a1) Fiscal Affairs. — The county hospital board shall be charged with the care, custody, upkeep, management and operation of all property belonging to the county and devoted to the purposes provided in sections 31-3501 and 31-3503, Idaho Code, and shall be responsible for all moneys received by it, including all revenues from the operation of such property, all moneys received by tax levies for operation of such property, and all moneys received from whatever source, by contribution or otherwise, for such purposes: P; provided, that if any contribution of money or property be offered to the hospital board of the county for use for a specific purpose the hospital board may, if it deems it for the best interest of the hospital or other facility or property under its management, accept such contribution and use such contribution for such purpose.

- (b2) Funds -- Custody and Disbursement. -- The hospital board shall safely keep or cause to be kept all moneys coming into the care, custody or possession of the board in strict compliance with the public depository law of this state, and shall pay out such money for valid bills and obligations of the hospital, and shall keep or cause to be kept proper records in its minutes of all its proceedings and all business transactions and proper accounts of all moneys received by it, expended and on hand. The minutes of the board shall be open to inspection by any taxpayer or elector of the county during all regular office hours.
- $(e\underline{3})$ Reports. -- The county hospital board shall report to the board of county commissioners within thirty (30) days after the acceptance of the annual hospital audit after the close of the fiscal year and shall annually publish in one (1) issue of a newspaper having general circulation in the county a financial statement reflecting the financial operations of the hospital, together with such other information as the board of county commissioners may deem necessary for the information of the people of the county. The county hospital board shall also prepare in its regular course of business unaudited monthly financial reports reflecting the financial

operations of the hospital. The county hospital board shall provide a copy of those monthly reports to the member of the board of commissioners serving as an ex officio member of the county hospital board.

(e4) Limitations. -- The county hospital board subject to the budgetary limitations herein contained may acquire or build other property for the purposes provided in sections 31-3501 and 31-3503, Idaho Code, or improve, remodel, enlarge, reduce, or dispose of property being used for such purposes. The county hospital board shall not have power to create any indebtedness in excess of the amount of its annual budget as approved by the board of county commissioners: P; provided, that if the county hospital board be formed after the time fixed by law for adoption of the budget, it may then formulate and submit to the board of county commissioners a budget for the rest of the current year, which budget, however, shall not provide for expenditure or creation of indebtedness in an amount greater than the estimated income for that year, together with any receipts from taxes specially levied for hospital purposes in such year.

SECTION 50. That Section 49-673, Idaho Code, be, and the same is hereby amended to read as follows:

- 49-673. SAFETY RESTRAINT USE. (1) Except as provided in section 49-672, Idaho Code, and subsection (2) of this section, each occupant of a motor vehicle that has a gross vehicle weight of not more than eight thousand (8,000) pounds, and that was manufactured with safety restraints in compliance with federal motor vehicle safety standard no. 208, shall have a safety restraint properly fastened about the occupant's body at all times when the vehicle is in motion.
 - (2) The provisions of this section shall not apply to:
 - (a) An occupant of a motor vehicle who possesses a written statement from a licensed physician that the occupant is unable for medical reasons to wear a safety restraint;
 - (b) Occupants of motorcycles, implements of husbandry and emergency vehicles;
 - (c) Occupants of seats of a motor vehicle in which all safety restraints are then properly in use by other occupants of that vehicle; or
 - (d) Mail carriers only if all vehicle regulations and safety practices of the United States postal service are adhered to.
 - (3) (a) A citation may be issued to:

- (i) Any occupant of the motor vehicle who is age eighteen (18) years or older and fails to wear a safety restraint as required in this section; and
- (ii) The operator of the motor vehicle who is age eighteen (18) years or older if any occupant under eighteen (18) years of age fails to wear a safety restraint as required in this section. For purposes of this subparagraph, it shall be deemed a single violation regardless of the number of occupants not properly restrained.
- (b) A person issued a citation pursuant to this subsection shall be subject to a fine of ten dollars (\$10.00), with plus court costs. Through September 30, 2020, five dollars (\$5.00) of such fine to shall be apportioned to the catastrophic health care cost fund account, as set forth

 in section 57-813, Idaho Code. On or after October 1, 2020, five dollars (\$5.00) of such fine shall be apportioned to the medicaid expansion fund created in section 56-209b, Idaho Code. A conviction under this subsection shall not result in violation point counts as prescribed in section 49-326, Idaho Code, nor shall such a conviction be deemed to be a moving traffic violation for the purpose of establishing rates of motor vehicle insurance charged by a casualty insurer.

- (4) A citation may be issued to the operator of the motor vehicle if the operator is under eighteen (18) years of age and the operator or any other occupant who is under eighteen (18) years of age fails to wear a safety restraint as required in this section. For purposes of this subsection, it shall be deemed a single violation regardless of the number of occupants not properly restrained. A person issued a citation pursuant to this subsection shall be subject to a fine of ten dollars (\$10.00), plus court costs. Through September 30, 2020, five dollars (\$5.00) of such fine to shall be apportioned to the catastrophic health care cost fund account as set forth in section 57-813, Idaho Code, plus court costs. On and after October 1, 2020, five dollars (\$5.00) of such fine shall be apportioned to the medicaid expansion fund created in section 56-209b, Idaho Code. A conviction under this subsection shall not result in violation point counts as prescribed in section 49-326, Idaho Code. In addition, a conviction under this subsection shall not be deemed to be a moving traffic violation for the purpose of establishing rates of motor vehicle insurance charged by a casualty insurer.
- (5) Enforcement of this section by law enforcement officers may be accomplished only as a secondary action when the operator of the motor vehicle has been detained for a suspected violation of another law.
- (6) The department shall initiate and conduct an educational program, to the extent sufficient private donations or federal funds for this specific purpose are available to the department, to encourage compliance with the provisions of this section and to publicize the effectiveness of use of safety restraints and other restraint devices in reducing risk of harm to occupants of motor vehicles.
- (7) The department shall evaluate the effectiveness of the provisions of this section and shall include a report of its findings in its annual evaluation report on the Idaho highway safety plan which it submits to the national highway traffic safety administration and federal highway administration pursuant to 23 U.S.C. section 402.
- (8) The failure to use a safety restraint shall not be considered under any circumstances as evidence of contributory or comparative negligence, nor shall such failure be admissible as evidence in any civil action with regard to negligence.

SECTION 51. That Section 56-209b, Idaho Code, be, and the same is hereby amended to read as follows:

56-209b. MEDICAL ASSISTANCE -- MEDICAL ASSISTANCE ACCOUNT $\frac{-- \text{MEDICAID}}{200}$ EXPANSION FUND -- MEDICAID STABILIZATION FUND. (1) Medical assistance shall be awarded to persons as mandated by federal law; and medical assistance may be awarded to such other persons not required to be awarded medical assistance as mandated by federal law when such award is to the fiscal advantage of the state of Idaho.

(2) There is hereby created in the dedicated fund the medical assistance account. The medical assistance account shall be an entity primarily designed to receive moneys from the families and relatives of patients receiving medical assistance under the state plan for medicaid, and to provide a source of moneys to pay for the state's share of medical assistance expenses. Moneys in the medical assistance account may not be commingled with moneys in the cooperative welfare account $\underline{\text{fund}}$. Moneys in the medical assistance account must be appropriated in order to be expended to pay for the state's share of medical assistance expenses.

- (3) In all cases where the department of health and welfare through the medical assistance program has or will be required to pay medical expenses for a recipient and that recipient is entitled to recover any or all such medical expenses from any third party or entity, the department of health and welfare will be subrogated to the rights of the recipient to the extent of the amount of medical assistance benefits paid by the department as the result of the occurrence giving rise to the claim against the third party or entity.
- (4) If a recipient of medical assistance pursues a claim against a third party or entity through litigation or a settlement, the recipient will so notify the department. If a recipient fails to notify the department of such claim, the department may recover the amount of any public assistance obtained by the recipient while the recipient pursued such claim. In addition, if the recipient recovers funds, either by settlement or judgment, from such a third party or entity, the recipient shall reimburse the department to the extent of the funds received in settlement minus attorney's fees and costs, the amount of the medical assistance benefits paid by the department on his behalf as a result of the occurrence giving rise to the need for medical assistance. The department shall be entitled to all the legal rights and powers of a creditor against a debtor in enforcing the recipient's reimbursement obligation.
- (5) The department shall have priority to any amount received from a third party or entity which can reasonably be construed to compensate the recipient for the occurrence giving rise to the need for medical assistance, whether the settlement or judgment is obtained through the subrogation right of the department or through recovery by the recipient, and whether or not the recipient is made whole by the amount recovered. The department will be entitled to reimbursement of medical assistance benefits paid on behalf of the recipient arising from the incident or occurrence prior to any amount being distributed to the recipient. The department may notify such third party or entity of the department's entitlement to receive the reimbursement prior to any amount being distributed to the recipient. Furthermore, the department may instruct the third party or entity to make such payment directly to the department prior to any amount being distributed to the recipient. Any third party or entity who distributed funds in violation of such a notice shall be liable to the department for the amount of the reimbursement.
- (6) In the event a recipient of assistance through the medical assistance program incurs the obligation to pay attorney's fees and costs for the purpose of enforcing a monetary claim to which the department has a right under this section, the amount which that the department is entitled to recover, or any lesser amount which that the department may agree to accept in compromise of its claim, shall be reduced by an amount which that bears the

same relation to the total amount of attorney's fees and costs actually paid by the recipient as the amount actually recovered for medical expenses paid by the department, exclusive of the reduction for attorney's fees and costs, bears to the total amount paid by the third party or entity to the recipient. If a settlement or judgment is received by the recipient without delineating what portion of the settlement or judgment is in payment of medical expenses, it will be presumed that the settlement or judgment applies first to the medical expenses incurred by the recipient in an amount equal to the expenditure for medical assistance benefits paid by the department as a result of the occurrence giving rise to the payment or payments to the recipient.

- (7) There is hereby created in the state treasury the medicaid expansion fund. The medicaid expansion fund shall receive moneys from the general fund and other sources, including the medicaid stabilization fund, pursuant to chapter 8, title 31, Idaho Code, and shall be used by the department for the purposes of providing medical assistance to individuals described in section 56-267(1), Idaho Code. Moneys in the medicaid expansion fund may not be commingled with moneys in the cooperative welfare fund.
- (8) There is hereby created in the state treasury the medicaid stabilization fund. Moneys in the medicaid stabilization fund may be transferred only by appropriation to the medicaid expansion fund to pay for the state's share of medical assistance expenses, provided that any moneys transferred by appropriation shall revert to the medicaid stabilization fund if such moneys remain unused at the end of the fiscal year for which they were appropriated.

SECTION 52. That Section $\underline{56-209f}$, Idaho Code, be, and the same is hereby repealed.

SECTION 53. That Chapter 2, Title 56, Idaho Code, be, and the same is hereby amended by the addition thereto of a $\underline{\text{NEW SECTION}}$, to be known and designated as Section 56-268, Idaho Code, and to read as follows:

- 56-268. MEDICAID EXPANSION COST ALLOCATION. (1) Beginning on January 1, 2020, each county shall be responsible for a portion of the state costs of medicaid expansion authorized under section 56-267, Idaho Code. The department of health and welfare shall calculate the counties' quarterly assessment according to the provisions of this section.
- (2) By the end of each month following the end of a calendar quarter, the department of health and welfare shall tally the number of individuals enrolled statewide in medicaid pursuant to section 56-267(1), Idaho Code, for that calendar quarter.
- (3) The department of health and welfare shall calculate the quarterly cost for the counties by multiplying the state tally described in subsection (2) of this section by the projected annual per member cost of the program for the following state fiscal year, then multiplying the result by thirty percent (30%), and then dividing by four (4).
- (4) Starting in calendar year 2022, the annual per member cost of the program used in subsection (3) of this section shall increase by no more than three percent (3%) per year.

(5) The department of health and welfare shall notify the state tax commission of the total quarterly cost for all Idaho counties by April 30, 2020, and every three (3) months thereafter.

- (6) Quarterly assessments for the counties shall be deducted from sales tax revenue distribution sharing pursuant to section 63-3638(10), Idaho Code, nine (9) months following the conclusion of the period assessed. The assessments shall be collected for the first quarter of calendar year 2020 beginning on December 31, 2020, and for subsequent quarters shall be collected every three (3) months thereafter.
 - (7) (a) Beginning in 2022 and every three (3) years thereafter, the legislative services office shall review the funding formula set forth in this section and report to the joint finance-appropriations committee and the senate and house of representatives health and welfare committees no later than January 15 of the following legislative session:
 - (i) Whether the funding sources for medicaid expansion are sustainable; and
 - (ii) In the event that a gap exists between current identified funding sources and program demand, other funding options for consideration by the joint finance-appropriations committee and the legislature.
 - (b) In order to meet its obligations under paragraph (a) of this subsection, the legislative services office may request assistance from other agencies and may employ a consultant to assist with the review and production of the report. The legislative services office may include a budget request in the appropriate fiscal year when needed to comply with paragraph (a) of this subsection.
- SECTION 54. That Section 57-813, Idaho Code, be, and the same is hereby amended to read as follows:
- 57-813. CATASTROPHIC HEALTH CARE COST ACCOUNT. (1) There is hereby created in the state treasury an account to be designated the "Catastrophic Health Care Cost Account." The account shall be used solely for payment of insurance premiums, payment of eligible claims beyond the eleven thousand dollar (\$11,000) county deductible or payment of the expenses of administering the catastrophic health care cost account.
- (2) The administrator of the catastrophic health care cost program may retain counsel.
- (3) All moneys placed in the account are hereby perpetually appropriated to the administrator of the catastrophic health care cost program subject to appropriation for purposes of this program. All expenditures from the account shall be paid out in warrants drawn by the state controller upon presentation of proper vouchers from the administrator. Pending use, surplus moneys in the account shall be invested by the state treasurer in the same manner as prescribed in section 67-1210, Idaho Code, with respect to surplus or idle moneys in the state treasury. Interest earned on the investments shall be returned to the account.

SECTION 55. That Section 63-3638, Idaho Code, be, and the same is hereby amended to read as follows:

63-3638. SALES TAX -- DISTRIBUTION. All moneys collected under this chapter, except as may otherwise be required in sections 63-3203, 63-3620F, and 63-3709, Idaho Code, and except as provided in subsection (16) of this section, shall be distributed by the state tax commission as follows:

- (1) An amount of money shall be distributed to the state refund account sufficient to pay current refund claims. All refunds authorized under this chapter by the state tax commission shall be paid through the state refund account, and those moneys are continuously appropriated.
- (2) Five million dollars (\$5,000,000) per year is continuously appropriated and shall be distributed to the permanent building fund, provided by section 57-1108, Idaho Code.
- (3) Four million eight hundred thousand dollars (\$4,800,000) per year is continuously appropriated and shall be distributed to the water pollution control fund established by section 39-3628, Idaho Code.
- (4) An amount equal to the sum required to be certified by the chairman of the Idaho housing and finance association to the state tax commission pursuant to section 67-6211, Idaho Code, in each year is continuously appropriated and shall be paid to any capital reserve fund established by the Idaho housing and finance association pursuant to section 67-6211, Idaho Code. Such amounts, if any, as may be appropriated hereunder to the capital reserve fund of the Idaho housing and finance association shall be repaid for distribution under the provisions of this section, subject to the provisions of section 67-6215, Idaho Code, by the Idaho housing and finance association, as soon as possible, from any moneys available therefor and in excess of the amounts the association determines will keep it self-supporting.
- (5) An amount equal to the sum required by the provisions of sections 63-709 and 63-717, Idaho Code, after allowance for the amount appropriated by section 63-718(3), Idaho Code, is continuously appropriated and shall be paid as provided by sections 63-709 and 63-717, Idaho Code.
- (6) An amount required by the provisions of chapter 53, title 33, Idaho Code.
- (7) An amount required by the provisions of chapter 87, title 67, Idaho Code.
- (8) For fiscal year 2011 and each fiscal year thereafter, four million one hundred thousand dollars (\$4,100,000), of which two million two hundred thousand dollars (\$2,200,000) shall be distributed to each of the forty-four (44) counties in equal amounts and one million nine hundred thousand dollars (\$1,900,000) shall be distributed to the forty-four (44) counties in the proportion that the population of the county bears to the population of the state. For fiscal year 2012 and for each fiscal year thereafter, the amount distributed pursuant to this subsection shall be adjusted annually by the state tax commission in accordance with the consumer price index for all urban consumers (CPI-U) as published by the U.S. department of labor, bureau of labor statistics, but in no fiscal year shall the total amount allocated for counties under this subsection be less than four million one hundred thousand dollars (\$4,100,000). Any increase resulting from the adjustment required in this section shall be distributed to each county in the proportion that the population of the county bears to the population of the state. Each county shall establish a special election fund to which shall be deposited all revenues received from the distribution pursuant to this

subsection. All such revenues shall be used exclusively to defray the costs associated with conducting elections as required of county clerks by the provisions of section 34-1401, Idaho Code.

- (9) One dollar (\$1.00) on each application for certificate of title or initial application for registration of a motor vehicle, snowmobile, all-terrain vehicle or other vehicle processed by the county assessor or the Idaho transportation department, excepting those applications in which any sales or use taxes due have been previously collected by a retailer, shall be a fee for the services of the assessor of the county or the Idaho transportation department in collecting such taxes and shall be paid into the current expense fund of the county or state highway account established in section 40-702, Idaho Code.
- (10) Eleven and five-tenths percent (11.5%) is continuously appropriated and shall be distributed to the revenue-sharing account, which is hereby created in the state treasury, and the moneys in the revenue-sharing account will be paid in installments each calendar quarter by the state tax commission as follows:
 - (a) Twenty-eight and two-tenths percent (28.2%) shall be paid to the various cities as follows:
 - (i) Fifty percent (50%) of such amount shall be paid to the various cities, and each city shall be entitled to an amount in the proportion that the population of that city bears to the population of all cities within the state; and
 - (ii) Fifty percent (50%) of such amount shall be paid to the various cities, and each city shall be entitled to an amount in the proportion that the preceding year's market value for assessment purposes for that city bears to the preceding year's market value for assessment purposes for all cities within the state.
 - (b) Twenty-eight and two-tenths percent (28.2%) shall be paid to the various counties as follows:
 - (i) An amount representing the various counties' share of medicaid expansion cost allocation as determined and reported to the state tax commission pursuant to section 56-268, Idaho Code, shall be distributed to the medicaid stabilization fund created in section 56-209b, Idaho Code. The distributions shall be made according to the schedule provided in section 56-268, Idaho Code;
 - (ii) One million three hundred twenty thousand dollars (\$1,320,000) annually shall be distributed one forty-fourth (1/44) to each of the various counties; and
 - $(ii\underline{i})$ The balance of such amount shall be paid to the various counties, and each county shall be entitled to an amount in the proportion that the population of that county bears to the population of the state;
 - (c) Thirty-five and nine-tenths percent (35.9%) of the amount appropriated in this subsection shall be paid to the several counties for distribution to the cities and counties as follows:
 - (i) Each city and county which that received a payment under the provisions of section 63-3638(e), Idaho Code, during the fourth quarter of calendar year 1999, shall be entitled to a like amount during succeeding calendar quarters.

- (ii) If the dollar amount of money available under this subsection (10)(c) in any quarter does not equal the amount paid in the fourth quarter of calendar year 1999, each city's and county's payment shall be reduced proportionately.
- (iii) If the dollar amount of money available under this subsection (10)(c) in any quarter exceeds the amount paid in the fourth quarter of calendar year 1999, each city and county shall be entitled to a proportionately increased payment, but such increase shall not exceed one hundred five percent (105%) of the total payment made in the fourth quarter of calendar year 1999.
- (iv) If the dollar amount of money available under this subsection (10) (c) in any quarter exceeds one hundred five percent (105%) of the total payment made in the fourth quarter of calendar year 1999, any amount over and above such one hundred five percent (105%) shall be paid fifty percent (50%) to the various cities in the proportion that the population of the city bears to the population of all cities within the state and fifty percent (50%) to the various counties in the proportion that the population of the county bears to the population of the state; and
- (d) Seven and seven-tenths percent (7.7%) of the amount appropriated in this subsection shall be paid to the several counties for distribution to special purpose taxing districts as follows:
 - (i) Each such district which that received a payment under the provisions of section 63-3638(e), Idaho Code, as such subsection existed immediately prior to July 1, 2000, during the fourth quarter of calendar year 1999, shall be entitled to a like amount during succeeding calendar quarters.
 - (ii) If the dollar amount of money available under this subsection (10)(d) in any quarter does not equal the amount paid in the fourth quarter of calendar year 1999, each special purpose taxing district's payment shall be reduced proportionately.
 - (iii) If the dollar amount of money available under this subsection (10)(d) in any quarter exceeds the amount distributed under paragraph (i) of this subsection (10)(d), each special purpose taxing district shall be entitled to a share of the excess based on the proportion each such district's current property tax budget bears to the sum of the current property tax budgets of all such districts in the state. The state tax commission shall calculate district current property tax budgets to include any unrecovered forgone amounts as determined under section 63-802(1)(e), Idaho Code. When a special purpose taxing district is situated in more than one (1) county, the state tax commission shall determine the portion attributable to the special purpose taxing district from each county in which it is situated.
 - (iv) If special purpose taxing districts are consolidated, the resulting district is entitled to a base amount equal to the sum of the base amounts received in the last calendar quarter by each district prior to the consolidation.
 - (v) If a special purpose taxing district is dissolved or disincorporated, the state tax commission shall continuously distrib-

3

4

5

6 7

8

9

10 11

12

13

14

15

16

17

18

19

20 21

22

23

24

25

26

27

28

29

30

31

32

33

34

35

36

37

38 39

40

41

42

43

44

45

46 47

48

49

ute to the board of county commissioners an amount equal to the last quarter's distribution prior to dissolution or disincorporation. The board of county commissioners shall determine any redistribution of moneys so received.

- (vi) Taxing districts formed after January 1, 2001, are not entitled to a payment under the provisions of this subsection (10) (d). (vii) For purposes of this subsection (10) (d), a special purpose taxing district is any taxing district that is not a city, a county or a school district.
- (11) Amounts calculated in accordance with section 2, chapter 356, laws of 2001, for annual distribution to counties and other taxing districts beginning in October 2001 for replacement of property tax on farm machinery and equipment exempted pursuant to section 63-602EE, Idaho Code. For nonschool districts, the state tax commission shall distribute one-fourth (1/4) of this amount certified quarterly to each county. For school districts, the state tax commission shall distribute one-fourth (1/4) of the amount certified quarterly to each school district. For nonschool districts, the county auditor shall distribute to each district within thirty (30) calendar days from receipt of moneys from the state tax commission. Moneys received by each taxing district for replacement shall be utilized in the same manner and in the same proportions as revenues from property taxation. The moneys remitted to the county treasurer for replacement of property exempt from taxation pursuant to section 63-602EE, Idaho Code, may be considered by the counties and other taxing districts and budgeted at the same time, in the same manner and in the same year as revenues from taxation on personal property which these moneys replace. If taxing districts are consolidated, the resulting district is entitled to an amount equal to the sum of the amounts received in the last calendar quarter by each district pursuant to this subsection prior to the consolidation. If a taxing district is dissolved or disincorporated, the state tax commission shall continuously distribute to the board of county commissioners an amount equal to the last quarter's distribution prior to dissolution or disincorporation. The board of county commissioners shall determine any redistribution of moneys so received. If a taxing district annexes territory, the distribution of moneys received pursuant to this subsection shall be unaffected. Taxing districts formed after January 1, 2001, are not entitled to a payment under the provisions of this subsection. School districts shall receive an amount determined by multiplying the sum of the year 2000 school district levy minus .004 times the market value on December 31, 2000, in the district of the property exempt from taxation pursuant to section 63-602EE, Idaho Code, provided that the result of these calculations shall not be less than zero (0). The result of these school district calculations shall be further increased by six percent (6%). For purposes of the limitation provided by section 63-802, Idaho Code, moneys received pursuant to this section as property tax replacement for property exempt from taxation pursuant to section 63-602EE, Idaho Code, shall be treated as property tax revenues.
- (12) Amounts necessary to pay refunds as provided in section 63-3641, Idaho Code, to a developer of a retail complex shall be remitted to the demonstration pilot project fund created in section 63-3641, Idaho Code.

- (13) Amounts calculated in accordance with subsection (4) of section 63-602KK, Idaho Code, for annual distribution to counties and other taxing districts for replacement of property tax on personal property tax exemptions pursuant to subsection (2) of section 63-602KK, Idaho Code, which amounts are continuously appropriated unless the legislature enacts a different appropriation for a particular fiscal year. For purposes of the limitation provided by section 63-802, Idaho Code, moneys received pursuant to this section as property tax replacement for property exempt from taxation pursuant to section 63-602KK, Idaho Code, shall be treated as property tax revenues. If taxing districts are consolidated, the resulting district is entitled to an amount equal to the sum of the amounts that were received in the last calendar year by each district pursuant to this subsection prior to the consolidation. If a taxing district or revenue allocation area annexes territory, the distribution of moneys received pursuant to this subsection shall be unaffected. Taxing districts and revenue allocation areas formed after January 1, 2013, are not entitled to a payment under the provisions of this subsection.
- (14) Amounts collected from purchasers and paid to the state of Idaho by retailers that are not engaged in business in this state and which retailer would not have been required to collect the sales tax, less amounts otherwise distributed in subsections (1) and (10) of this section, shall be distributed to the tax relief fund created in section 57-811, Idaho Code. The state tax commission will determine the amounts to be distributed under this subsection.
- (15) Any moneys remaining over and above those necessary to meet and reserve for payments under other subsections of this section shall be distributed to the general fund.
- (16) One percent (1%), but not less than fifteen million dollars (\$15,000,000), is continuously appropriated and shall be distributed to the transportation expansion and congestion mitigation fund established in section 40-720, Idaho Code. The distribution provided for in this subsection must immediately follow the distribution provided for in subsection (10) of this section.

SECTION 56. That Section 66-327, Idaho Code, be, and the same is hereby amended to read as follows:

66-327. RESPONSIBILITY FOR COSTS OF COMMITMENT AND CARE OF PATIENTS. (a1) All costs associated with the commitment proceedings, including fees of designated examiners, transportation costs and all medical, psychiatric and hospital costs not included in subsection (e3) of this section, shall be the responsibility of the person subject to judicial proceedings authorized by this chapter or such person's spouse, adult children, or, if indigent unable to pay all or any of the costs, the county of such person's residence after all personal, family and third-party resources, including medical assistance provided under the state plan for medicaid as authorized by title XIX of the social security act, as amended, are considered. In proceedings authorized by this chapter, the court shall consider the indigency of persons subject to proceedings authorized by this chapter, in light of such person's income and resources, and if such person is able to pay all or part of such costs, the court shall order such person to pay all

or any part of such costs. If the court determines such person is unable to pay all or any part of such costs pursuant to section 66-327A, Idaho Code, the court shall fix responsibility, in accordance with the provisions of chapter 35, title 31, Idaho Code, for payment of such costs on the county of such person's residence to the extent not paid by such person or not covered by third-party resources, including medical assistance as aforesaid. The amount of payment by a county shall be the medicaid rate, or pursuant to the provisions of any contract between a provider and an obligated county, or if the facility providing the services is a freestanding mental health facility, then the reimbursement rate will be the medicaid rate, for a hospital as defined by section 39-1301(a), Idaho Code, that provides services within the nearest proximity of the mental health facility. Such costs fixed by the court shall be based upon the time services were provided.

- $(\frac{b2}{2})$ An order of commitment pursuant to the provisions of this section shall be sufficient to require the release of all pertinent information related to the committed person, to the court and obligated county, within the restrictions of all applicable federal and state laws.
- The department of health and welfare shall assume responsibility for costs after the involuntary patient is committed to the custody of the state of Idaho, beginning on the day after the director receives notice that a person has been committed into the custody of the department, until the involuntary patient is discharged and after all personal, family and third-party resources are considered in accordance with section 66-354, Idaho Code. The counties shall be responsible for mental health costs as defined in subsection (al) of this section if the individual is not transported within twenty-four (24) hours of receiving written notice of admission availability to a state facility. For purposes of this section, "costs" shall include routine board, room and support services rendered at a facility of the department of health and welfare; routine physical, medical, psychological and psychiatric examination and testing; group and individual therapy, psychiatric treatment, medication and medical care which that can be provided at a facility of the department of health and welfare. The term "costs" shall not include neurological evaluation, CAT scan, surgery, medical treatment, any other item or service not provided at a facility of the department of health and welfare, or witness fees and expenses for court appearances. For the purposes of this section, the notice to the department may be faxed or mailed.
- (4) Following approval by the centers for medicare and medicaid services of any waivers to the state plan that allow Idaho to access federal medicaid funding for institutions for mental diseases for individuals eligible for medicaid under section 56-267, Idaho Code, no county shall be responsible for costs incurred under this chapter for persons whose modified adjusted gross income is at or below one hundred thirty-three percent (133%) of the federal poverty level as described in section 56-267, Idaho Code.

SECTION 57. That Chapter 3, Title 66, Idaho Code, be, and the same is hereby amended by the addition thereto of a $\underline{\text{NEW SECTION}}$, to be known and designated as Section 66-327A, Idaho Code, and to read as follows:

66-327A. COSTS OF OBLIGATED COUNTY. The following criteria shall be used by the court in determining if a person is unable to pay all or any part of costs and the county that is responsible for such costs:

- (1) A person is unable to pay all or part of costs if the person who, if an adult, together with the person's spouse, or guardian if a dependent, does not have income and other resources available to him. For purposes of this section, "resources" means all property for which a person, if an adult, together with the person's spouse, or guardian if a dependent, may be eligible or in which the person may have an interest, whether tangible or intangible, real or personal, liquid or nonliquid, or pending, including but not limited to all forms of public assistance, crime victims compensation, worker's compensation, veterans benefits, medicaid, medicare, supplemental security income (SSI), third-party insurance, other insurance, or under section 1011 of the medicare modernization act of 2003, if applicable, and any other property from any source. "Resources" shall include the ability of a person, if an adult, together with the person's spouse, or guardian if a dependent, to pay costs, excluding any interest charges, over a period of up to five (5) years starting on the date services are first provided.
 - (2) The county obligated for payment shall be determined as follows:
 - (a) The last county in which the person or head of the person's household has maintained a residence for six (6) consecutive months or longer within the past five (5) years preceding incurrence shall be obligated. If the person or head of household maintains another residence in a different county or state for purposes of employment, the county where the family residence is maintained shall be deemed the person's or head of household's place of residence;
 - (b) If an individual has not resided in any county for a period of six (6) months within the five (5) years preceding incurrence of medical costs for which counties have a responsibility in whole or in part, then the county where the applicant maintained a residence for at least thirty (30) days immediately preceding such incurrence shall be the obligated county;
 - (c) Active duty in the United States armed forces or admission as a patient in a hospital, nursing home, or other medical facility or institution shall not change the obligated county. The obligated county shall remain the same county that would have been obligated prior to active duty or admission;
 - (d) For full-time students at public institutions of higher education, the obligated county shall be the county of residence of the person, unless an obligated person for whom the applicant is claimed as a dependent resides in another county or state; and
 - (e) If an individual has not resided in any county for a consecutive period of thirty (30) days but has resided in the state of Idaho for a consecutive period of thirty (30) days, then the county where the individual last resided prior to receiving medical services shall be the obligated county.

SECTION 58. That Section 67-2302, Idaho Code, be, and the same is hereby amended to read as follows:

67-2302. PROMPT PAYMENT FOR GOODS AND SERVICES. (1) It is the policy of this state that all bills owed by the state of Idaho or any taxing district within the state shall be paid promptly. No state agency or taxing district supported in whole or in part by tax revenues shall be exempt from the provisions of this section, except as provided in subsection (20).

- (2) All bills shall be accepted, certified for payment, and paid within sixty (60) calendar days of receipt of billing, unless the buyer and the vendor have agreed by a contract in place at the time the order was placed that a longer period of time is acceptable to the vendor. An invoice is a written account or itemized statement of merchandise shipped, sent or delivered to the purchaser with quantity, value or price, and charges set forth, and is a demand for payment of the charges set forth.
- (3) Unless specifically provided by the terms of a contract that details payment requirements, including penalties for late payments, interest penalties shall be due automatically when bills become overdue. It shall be up to each vendor to calculate and invoice interest at the time payment is due on the principal.
- (4) Partial payment shall be made on partial deliveries, if an invoice is submitted for a partial delivery, and the goods delivered are a usable unit. Each complete item or service must be paid for within forty-five (45) calendar days.
- (5) All proper deliveries and completed services shall be received or accepted promptly, and proper receiving and acceptance reports shall be forwarded to payment offices within five (5) working days of delivery of goods or completion of service.
- (6) Payment shall be due on the date on which the agency officially receives the invoice or actually receives the goods or services, whichever is later.
- (7) The rate of interest to be paid by the state or any taxing district shall be the rate provided in section 63-3045, Idaho Code.
- (8) Unpaid interest penalties owed to a vendor shall compound each month.
- (9) The provisions of this section shall apply to all purchases, leases, rentals, contracts for services, construction, repairs and remodeling.
- (10) No discount offered by a vendor shall be taken by the state or a taxing district or by a project manager administering a state—or taxing district—supported project, unless full payment is made within the discount period. In the event a discount is taken later, interest shall accrue on the unpaid balance from the day the discount offer expired.
- (11) Interest shall be paid from funds already appropriated or budgeted to the offending agency or taxing district or project for that fiscal year. If more than one (1) department, institution or agency has caused a late payment, each shall bear a proportionate share of the interest penalty.
- (12) In instances where an invoice is filled out incorrectly, or where there is any defect or impropriety in an invoice submitted, the state agency, taxing district, or project, shall contact the vendor in writing within ten (10) days of receiving the invoice. An error on the vendor's invoice, if corrected by the vendor within five (5) working days of being contacted by the agency or taxing district, shall not result in the vendor being paid late.

(13) Checks or warrants shall be mailed or transmitted within a reasonable time after approval.

- (14) No new appropriation or budget is authorized under the provisions of this section to cover interest penalties. No state agency, taxing district, or project shall seek to increase appropriations or budgets for the purpose of obtaining funds to pay interest penalties.
- (15) Payment of interest penalties may be postponed when payment on the principal is delayed because of a disagreement between the state or taxing district and the vendor. At the resolution of any dispute, vendors shall be entitled to receive interest on all proper invoices not paid for as provided in subsection (2) of this section.
- (16) The provisions of this section shall in no way be construed to prohibit the state or any taxing district from making advanced payments, progress payments, or from prepaying where circumstances make such payments appropriate. All such payments shall be made promptly and are subject to interest penalties when payment is late. Where construction, repair and remodeling payments are subject to retainage, interest penalties shall accrue on retained amounts beginning thirty (30) calendar days after work is completed by the contractor(s) unless otherwise provided by contract.
- (17) Each state department, institution and agency head shall be responsible for prompt payments. In all instances where an interest payment has been made by a state agency because of a late payment, the responsible state agency head shall submit to the joint senate finance-house appropriations committee of the legislature at the time of that agency's budget request hearing an explanation of why the bill is paid late and what is being done to solve the late payment problem.
- (18) Whenever a vendor brings formal administrative action or judicial action to collect interest due under this section, should the vendor prevail, the state or taxing district is required to pay any reasonable attorney's fees awarded.
- (19) Where the date of payment to vendors is contingent on the receipt of federal funds or federal approval, the solicitation of bids for contracts and any contracts awarded shall clearly state that payment is contingent on such conditions.
- (20) The provisions of this section shall not apply to claims against a county for services rendered to any medically indigent, sick or otherwise indigent person, nor to judgment obligations.
- SECTION 59. That Section 67-7903, Idaho Code, be, and the same is hereby amended to read as follows:
- 67-7903. VERIFICATION OF LAWFUL PRESENCE -- EXCEPTIONS -- REPORTING. (1) Except as otherwise provided in subsection (3) of this section or where exempted by federal law, each agency or political subdivision of this state shall verify the lawful presence in the United States of each natural person eighteen (18) years of age or older who applies for state or local public benefits or for federal public benefits for the applicant.
- (2) This section shall be enforced without regard to race, religion, gender, ethnicity or national origin.
- (3) Verification of lawful presence in the United States shall not be required:

- (a) For any purpose for which lawful presence in the United States is not required by law, ordinance or rule;
- (b) For obtaining health care items and services that are necessary for the treatment of an emergency medical condition of the person involved and are not related to an organ transplant procedure;
- (c) For short-term, noncash, in-kind emergency disaster relief;
- (d) For public health assistance for immunizations with respect to immunizable diseases and testing and treatment of symptoms of communicable diseases whether or not such symptoms are caused by a communicable disease;
- (e) For programs, services or assistance, such as soup kitchens, crisis counseling and intervention and short-term shelter specified by federal law or regulation that:
 - (i) Deliver in-kind services at the community level, including services through public or private nonprofit agencies;
 - (ii) Do not condition the provision of assistance, the amount of assistance provided or the cost of assistance provided on the individual recipient's income or resources; and
 - (iii) Are necessary for the protection of life or public safety;
- (f) For prenatal care;

- (g) For postnatal care not to exceed twelve (12) months; or
- (h) For food assistance for a dependent child under eighteen (18) years of age.

Notwithstanding the provisions of this subsection (3), for the county indigent program, the limitations contained in section 31-3502(18)B., Idaho Code, shall apply.

- (4) An agency or a political subdivision shall verify the lawful presence in the United States of each applicant eighteen (18) years of age or older for federal public benefits or state or local public benefits by:
 - (a) Employing electronic means to verify an applicant is legally present in the United States; or
 - (b) Requiring the applicant to provide:
 - (i) An Idaho driver's license or an Idaho identification card issued pursuant to section 49-2444, Idaho Code;
 - (ii) A valid driver's license or similar document issued for the purpose of identification by another state or territory of the United States, if such license or document contains a photograph of the individual or such other personal identifying information relating to the individual that the director of the department of health and welfare or, with regard to unemployment compensation benefits, the director of the department of labor finds, by rule, sufficient for purposes of this section;
 - (iii) A United States military card or a military dependent's
 identification card;
 - (iv) A United States coast guard merchant mariner card;
 - (v) A native American tribal document;
 - (vi) A copy of an executive office of immigration review, immigration judge or board of immigration appeals decision, granting asylee status;

- (vii) A copy of an executive office of immigration review, immigration judge or board of immigration appeals decision, indicating that the individual may lawfully remain in the United States; (viii) Any United States citizenship and immigration service—issued document showing refugee or asylee status or that the individual may lawfully remain in the United States;
- (ix) Any department of state or customs and border protection—issued document showing the individual has been permitted entry into the United States on the basis of refugee or asylee status, or on any other basis that permits the individual to lawfully enter and remain in the United States; or
- (x) A valid United States passport; and

- (c) Requiring the applicant to provide a valid social security number that has been assigned to the applicant; and
- (d) Requiring the applicant to attest, under penalty of perjury and on a form designated or established by the agency or the political subdivision, that:
 - (i) The applicant is a United States citizen or legal permanent resident; or
 - (ii) The applicant is otherwise lawfully present in the United States pursuant to federal law.
- (5) Notwithstanding the requirements of subsection (4) (b) of this section, the agency or political subdivision may establish by appropriate legal procedure such rules or regulations to ensure that certain individuals lawfully present in the United States receive authorized benefits including, but not limited to, homeless state citizens.
- (6) For an applicant who has attested pursuant to subsection (4) (d) of this section stating that the applicant is an alien lawfully present in the United States, verification of lawful presence for federal public benefits or state or local public benefits shall be made through the federal systematic alien verification of entitlement program, which may be referred to as the "SAVE" program, operated by the United States department of homeland security or a successor program designated by the United States department of homeland security. Until such verification of lawful presence is made, the attestation may be presumed to be proof of lawful presence for purposes of this section.
 - (a) Errors and significant delays by the SAVE program shall be reported to the United States department of homeland security to ensure that the application of the SAVE program is not wrongfully denying benefits to legal residents of this state.
 - (b) Agencies or political subdivisions may adopt variations of the requirements of subsection (4)(d) of this section to improve efficiency or reduce delay in the verification process or to provide for adjudication of unique individual circumstances in which the verification procedures in this section would impose unusual hardship on a legal resident of this state; except that the variations shall be no less stringent than the requirements of subsection (4)(d) of this section.
 - (c) A person who knowingly makes a false, fictitious or fraudulent statement or representation in an attestation executed pursuant to subsection (4) (d) or (6) paragraph (b) of this subsection or who knowingly

provides a social security number that has not been assigned to him pursuant to subsection (4)(c) of this section shall be:

- (i) Guilty of a misdemeanor for the first and second offense; and
- (ii) Guilty of a felony for each subsequent offense.
- (7) An agency or political subdivision may accept as prima facie evidence of an applicant's lawful presence in the United States the information required in subsection (4) of this section, as may be modified by subsection (5) of this section, when issuing a professional license or a commercial license.

SECTION 60. That Section 72-1003, Idaho Code, be, and the same is hereby amended to read as follows:

72-1003. DEFINITIONS. As used in this chapter:

- (1) "Claimant" means any of the following claiming compensation under this chapter:
 - (a) A victim;

- (b) A dependent of a deceased victim; or
- (c) An authorized person acting on behalf of any of them, including parent(s), legal guardian(s), and sibling(s), of a victim who is a minor.
- (2) "Collateral source" means a source of benefits, other than welfare benefits, or advantages for economic loss otherwise compensable under this chapter $\frac{1}{2}$ that the claimant has received or $\frac{1}{2}$ that is readily available to him from:
 - (a) The offender;
 - (b) The government of the United States or any agency thereof, a state or any of its political subdivisions, or an instrumentality of two (2) or more states, unless the law providing for the benefits or advantages makes them excess or secondary to benefits under this chapter;
 - (c) Social security, medicare, and medicaid;
 - (d) Worker's compensation;
 - (e) Wage continuation programs of any employer;
 - (f) Proceeds of a contract of insurance payable to the claimant for loss $\frac{\text{which}}{\text{that}}$ was sustained because of the criminally injurious conduct; or
 - (g) A contract, including an insurance contract, providing hospital and other health care services or benefits for disability. Any such contract in this state may not provide that benefits under this chapter shall be a substitute for benefits under the contract or that the contract is a secondary source of benefits and benefits under this chapter are a primary source.
 - (3) "Commission" means the industrial commission.
- (4) "Criminally injurious conduct" means intentional, knowing, or reckless conduct that:
 - (a) Occurs or is attempted in this state or occurs outside the state of Idaho against a resident of the state of Idaho and $\frac{1}{2}$ which $\frac{1}{2}$ does not have a crime victims compensation program for which the victim is eligible as eligibility is set forth in this statute;
 - (b) Constitutes an act of terrorism, as defined by 18 U.S.C. 2331, committed outside the United States against a resident of this state;

(c) Results in injury or death; and

- (d) Is punishable by fine, imprisonment, or death or would be so punishable but for the fact that the person engaging in the conduct lacked capacity to commit the crime under the laws of this state. Criminally injurious conduct does not include conduct arising out of the ownership, maintenance, or use of a motor vehicle except when intended to cause personal injury or death; provided that criminally injurious conduct shall include violations of the provisions of section 18-4006 3(b), 18-8004, 18-8006, 18-8007, 67-7027, 67-7034 or 67-7035, Idaho Code.
- (5) "Dependent" means a natural person who is recognized under the law of this state to be wholly or partially dependent upon the victim for care or support and includes a child if under the age of eighteen (18) years or incapable of self-support and unmarried and includes a child of the victim conceived before the victim's death but born after the victim's death, including a child that is conceived as a result of the criminally injurious conduct.
- (6) "Extenuating circumstances" means that a victim requires further mental health treatment due to trauma arising out of covered criminal conduct in order to perform major life functions or the activities of daily living.
- (7) "Injury" means actual bodily harm or disfigurement and, with respect to a victim, includes pregnancy, venereal disease, mental or nervous shock, or extreme mental distress. For the purposes of this chapter, "extreme mental distress" means a substantial personal disorder of emotional processes, thought or cognition which that impairs judgment, behavior or ability to cope with the ordinary demands of life.
 - (8) "Victim" means a person who suffers injury or death as a result of:
 - (a) Criminally injurious conduct;
 - (b) His good faith effort to prevent criminally injurious conduct; or
 - (c) His good faith effort to apprehend a person reasonably suspected of engaging in criminally injurious conduct.
- (9) "Welfare benefits" as used in subsection (2) of this section, shall include sums payable to or on behalf of an indigent person under chapter 35, title 31, Idaho Code.
- SECTION 61. That Section 31-3503B, Idaho Code, be, and the same is hereby amended to read as follows:
- 31-3503B. RECIPROCAL AGREEMENTS -- OUT-OF-STATE TREATMENT. (1) The governor of the state of Idaho or his or her designee is empowered to negotiate reciprocal agreements with other states for the provision of necessary medical services for residents of this and other states.
- (2) No payment shall be made for necessary medical services to an out-of-state provider unless a reciprocal agreement has been entered into by the governor of this state, or unless contracted for pursuant to sections $\frac{31-3520 \text{ and }}{31-3522}$, Idaho Code.
- SECTION 62. An emergency existing therefor, which emergency is hereby declared to exist, Sections 1, 3 through 5, 8, 50, 51, 53, 55, 56, and 57 of this act shall be in full force and effect on and after passage and approval.

- SECTION 63. Section 16 of this act shall be in full force and effect on and after July 1, 2020.
- 3 SECTION 64. Sections 2, 6, 7, 9 through 15, 17 through 49, 52, 54, and 58 4 through 61 of this act shall be in full force and effect on and after July 1, 5 2021.