

MINUTES  
**HOUSE HEALTH & WELFARE COMMITTEE**

- DATE:** Thursday, January 16, 2014
- TIME:** 9:00 A.M.
- PLACE:** Room EW20
- MEMBERS:** Chairman Wood(27), Vice Chairman Perry, Representatives Hancey, Henderson (Chambers), Hixon, Malek, Morse, Romrell, Vander Woude, Rusche, Chew
- ABSENT/  
EXCUSED:** Representative Chew
- GUESTS:** Matt Wimmer and David Simnitt, Medicaid; Tamara Prisock and Heidi Graham, Health & Welfare; Teri Woychick, Self - Observer; Elli Brown and Stacey Satterlee, ACS CAN; Paul Leary and Frank Powell, DHW; Luann Dettman, Anne Chatfield, Sally Alvarado, Council on DV; Ed Hawley, Admin Rules; Elizabeth Criner, ISDA
- Chairman Wood(27)** called the meeting to order at 9:00 a.m.
- Chairman Wood(27)** turned the gavel over to **Vice Chairman Perry**
- DOCKET NO. 16-0309-1302:** **Matt Wimmer**, Bureau Chief, Medical Care, Division of Medicaid, presented **Docket No. 16-0309-1302**, which increases their ability to manage Medicaid providers who do not meet enrolling requirements and comply with federal regulation changes. Medicaid providers must complete an information verification at least once every five years and meet the same enrollment site visit requirements as Medicare providers. Those prescribing drugs or services covered by the Medicaid program must be enrolled with the program, preventing any provider not meeting credentialing requirements from continuing to order services. Procedures for managing, denying, and terminating providers not meeting Medicaid enrollment requirements are clarified, along with Rules to conform with or refer to relevant federal requirement.
- Upon questioning, **Mr. Wimmer** said there is no flexibility in the requirements. Analysis indicates there are few groups who would be impacted by this change. Providers have to enroll with Medicare and go through those requirements, but they don't have to submit claims or accept Medicare patients. Federal requirements do not allow any appointment billing non-payment sliding scale and the provider cannot charge for missed appointments.
- For the record, no one indicated their desire to testify.
- MOTION:** **Rep. Hancey** made a motion to approve **Docket No. 16-0309-1302**. **Motion carried by voice vote.** **Rep. Vander Woude** requested that he be recorded as voting **NAY**.
- DOCKET NO. 16-0309-1303:** **Matt Wimmer**, presented **Docket No. 16-0309-1303**, Rule changes that comply with federal laws and regulations for tobacco cessation products and drugs as part of the Medicaid programs. This Rule change completes transitioning coverage from the existing voucher system to direct pharmacy coverage for all participants.
- Stacey Satterlee**, American Cancer Society, Cancer Action Network, testified in **support of Docket No. 16-0309-1303**, stating that since Medicaid participants are among the highest smoking rates, these tools and treatments will save lives and reduce hospital costs.
- MOTION:** **Rep. Romrell** made a motion to approve **Docket No. 16-0309-1303**.
- For the record, no one else indicated their desire to testify.

Responding to Committee questions, **Mr. Wimmer** said the change in terminology to "tobacco" from "smoking" broadened the definition by recognizing that people can be addicted to other forms of tobacco and nicotine. Funding is through Medicaid at a standard 70/30 split.

**VOTE ON MOTION:**

**Motion carried by voice vote.**

**DOCKET NO. 16-0501-1301:**

**Heidi Graham**, DHW, Civil Rights Manager/Privacy Officer, Division of Operational Services, Human Resources, presented **Docket No. 16-0501-1301**. This Rule change brings the Department's Use and Disclosure Rules into compliance with the recently modified Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule and provides more latitude to release decedent records.

**MOTION:**

**Rep. Hixon** made a motion to approve **Docket No. 16-0501-1301**.

In answer to Committee questions, **Ms. Graham** stated that documentation request responses could be based on existing documentation or an acknowledged relationship that existed prior to the decedent's death. A case-by-case review would disclose whether the requesting individual was involved with the decedent prior to their passing. She gave examples of relationships established in writing or disclosed verbally. Included in the review would be use and disclosure Rules, and applicable state and fed regulations.

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

**VOTE ON MOTION:**

**Motion carried by voice vote. Representatives Morse and Chambers** requested that they be recorded as voting **NAY**.

**DOCKET NO. 16-0504-1301:**

**Anne Chatfield**, Grant Contract Officer, Idaho Council on Domestic Violence and Victim Assistance, presented **Docket No. 06-0504-1301**. The Rule changes update language to support program and system innovation and insure programs serving victims are high quality and sustainable. She described the variety of programs available in our state that demonstrate progress in crime victim services.

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

**MOTION:**

**Rep. Hixon** made a motion to approve **Docket No. 16-0504-1301. Motion carried by voice vote.**

**DOCKET NO. 16-0315-1301:**

**Tamara Prisock**, Administrator Division of Licensing and Certification, DHW, presented **Docket No. 16-0315-1301**, which repeals the entire obsolete Rule Chapter that outlines semi-independent facilities for the mentally ill. Facility surveys were discontinued several years ago and the Department has no statutory ability or responsibility to license them. There are six private residential facilities of this nature operating in Idaho. Their funding is through private pay and donations.

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

**MOTION:**

**Rep. Morse** made a motion to approve **Docket No. 16-0315-1301. Motion carried by voice vote.**

**ADJOURN:**

There being no further business to come before the committee, the meeting was adjourned at 9:43 a.m.

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Representative Perry  
Chair

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Irene Moore  
Secretary