

MINUTES  
**SENATE HEALTH & WELFARE COMMITTEE**

- DATE:** Monday, January 21, 2013
- TIME:** 3:00 P.M.
- PLACE:** Room WW54
- MEMBERS PRESENT:** Chairman Heider, Vice Chairman Nuxoll, Senators Lodge, Guthrie, Martin, Lakey, Bock and Schmidt
- ABSENT/ EXCUSED:**
- NOTE:** The sign-in sheet, testimonies and other related materials will be retained with the minutes in the committee's office until the end of the session and will then be located on file with the minutes in the Legislative Services Library.
- CONVENED:** **Chairman Heider** called the Health and Welfare Committee to order at 3:10 p.m., and roll call was taken.
- PRESENTATION:** **Chairman Heider** welcomed **Dr. Loel Fenwick**, speaker, author, and consultant. After reviewing his educational and professional background, **Dr. Fenwick** spoke about the Patient Protection and Affordable Care Act (ObamaCare) and how Idaho and other states cant put an end to the largest tax increase and transfer of power in the history of the United States. He advised that Idaho must sustain its right to control our own health care by utilizing Patient Power. Patient Power eliminates Government, insurance control and overhead for most consumers. He furthered that reducing unnecessary healthcare consumption and costs were important, and that monitored personal savings accounts will provide Medicare and Medicaid recipients a chance to accrue personal savings through healthy behavior and sensible healthcare choices. A savings of billions of dollars can be achieved when patients become consumers, each protecting their savings from waste, fraud and abuse. Healthcare providers will have an opportunity to compete for customers and make prices commensurate with services provided. **Dr. Fenwick** encouraged legislators to reject a State and Federal exchange, and support a pilot plan that could be the benchmark for every state.
- PASSED THE GAVEL:** Chairman Heider passed the gavel to Vice Chairman Nuxoll for continuation of pending rule review.
- DOCKET NO: 16-0309-1203** **Relating to Medicaid Basic Plan Benefits. Matt Wimmer**, Program Manager at Idaho Medicaid, introduced **Docket No. 16-0309-1203. Mr. Wimmer** stated to the committee that recent changes to the federal laws and regulations direct all state Medicaid programs to cover tobacco cessation products for pregnant women and children under the age of 21. The rule change adjusts Idaho regulations to meet the federal requirements. Temporary rules for those changes were approved by the 2012 legislature and will be presented separately in **Docket 16-0309-1101** for final approval. **Mr. Wimmer** indicated this change is being implemented to keep these rules consistent.
- MOTION:** **Senator Lodge** moved to approve **16-0309-1203. Senator Martin** seconded the motion. The motion carried by **voice vote**.

**DOCKET NO: 16-0309-1205**      **Relating to Medicaid Basic Plan Benefits. Matt Wimmer** introduced **Docket No. 16-0309-1205**. He advised the committee that in 2010, there was an executive order established by the Idaho Medical Home Collaborative to realize a patient centered medical home model of care. This collaborative entails a coordinated effort between primary care providers and public and private payers to better patient health and control healthcare costs by providing improved coordinated care. Idaho Medicaid Health Home providers will be accountable for activities directed toward assisting patients with chronic conditions to gain better health, as well as take a direct role in managing their own healthcare. Home Health providers will join managing patient care with hospitals, nursing facilities, emergency rooms and specialist staff. Home Health will provide extended hours of access to primary care, report data on progress and performance to Idaho Medicaid, and meet requirements for the National Committee for Quality Assurance (NCQA) recognition as a patient-centered medical home. Medicaid will pay the health home provider \$15.50 per participant for every month they are enrolled with them. This program is anticipated to create a net cost savings to the State.

**MOTION:**      **Senator Schmidt** moved to approve **16-0309-1205**. **Chairman Heider** seconded the motion. The motion carried by **voice vote**.

**DOCKET NO: 16-0309-1206**      **Relating to Medicaid Basic Plan Benefits. David Simnett**, the Deputy Administrator in the Division of Medicaid, introduced **Docket No. 16-0309-1206**. **Mr. Simnett** explained to the committee that the federal Centers for Medicare and Medicaid Services (CMS) recently completed a review of Idaho's Early Periodic Screening Diagnosis and Treatment (EPSDT) program and discovered that the Medical Necessity definition is not in agreement with federal rules regarding Medicaid-eligible children. To rectify this, Idaho has closely worked with CMS to add an EPSDT services definition specific to children who are in need of services beyond the Medicaid State Plan limits. The definition included in the pending rule docket has been reviewed and approved by CMS and reflects the language contained in the Social Security Act. He continued that approval of this pending rule would permit the department to continue to ensure that children receive medically necessary services.

**MOTION:**      **Senator Schmidt** moved to approve **16-0309-1206**. **Senator Lodge** seconded the motion. The motion carried by **voice vote**.

**DOCKET NO: 16-0310-1204**      **Relating to Medicaid Basic Plan Benefits. David Simnett** stated to the committee that the 2011 legislature, through House Bill 260, imposed cuts to the Medicaid program in order to reduce health care costs in the Medicaid budget. In 2012, through House Bill 609, the legislature restored dental benefits for the Aged and Disabled and the Developmentally Disabled waivers. He indicated that House Bill 609 allowed for Medicaid participants who qualify for both developmental disability and mental health skill building services to receive these services concurrently, under limited circumstances. He furthered that the rules outlined in this docket detail which adults qualify for dental services, the specific dental benefits covered, and the requirements and processes for prior approval of concurrent skill building services.

**TESTIMONY:**      **Katherine Hansen**, the Executive Director of Community Partnerships of Idaho and also with the Idaho Developmental Disabilities Agencies (IADDA) stated she was here to testify not on the language of the rule, but the interpretation of the rule. She stated that there was confusion with the budget, which will need clarification at a later time, and she wanted to bring it to the committee's attention.

**MOTION:**      **Senator Martin** moved to approve **16-0310-1204**. **Chairman Heider** seconded the motion. The motion carried by **voice vote**.

**DOCKET NO:** **16-0310-1202** **Relating to Medicaid Enhanced Plan Benefits.** **Natalie Peterson**, the Bureau Chief for the Division of Medicaid Long-Term Care Program, presented **Docket No. 16-0310-1202** to the committee. She stated that these pending rules are being amended to be in harmony with the recently renewed and approved Home and Community Based waivers, and that the department asks the committee to adopt this pending rule as final.

**MOTION:** **Chairman Heider** moved to approve **16-0310-1202**. **Senator Lakey** seconded the motion. The motion carried by **voice vote**.

**PASSED THE GAVEL:** Having completed rules review for the day, Vice Chairman Nuxoll passed the gavel to Chairman Heider.

**ADJOURNED:** There being no more business before the committee, **Chairman Heider** adjourned the meeting at 4:45 p.m.

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Senator Heider  
Chairman

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Linda Hamlet  
Secretary