

MINUTES  
**SENATE HEALTH & WELFARE COMMITTEE**

**DATE:** Thursday, March 21, 2013

**TIME:** 3:30 P.M.

**PLACE:** Room WW54

**MEMBERS PRESENT:** Chairman Heider, Vice Chairman Nuxoll, Senators Lodge, Hagedorn, Guthrie, Martin, Lakey, Bock, 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** convened the meeting at 3:31 p.m.

**MINUTES:** **Senator Lakey** moved to approve the February 25, 2013 minutes as written. The motion was seconded by **Senator Martin**. The motion carried by **voice vote**.  
**Senator Lakey** moved to approve the March 7, 2013 minutes as written. The motion was seconded by **Senator Martin**. The motion carried by **voice vote**.  
**Senator Nuxoll** moved to approve the March 14, 2013 minutes as written. The motion was seconded by **Senator Martin**. The motion carried by **voice vote**.

**CONFIRMATION HEARING:** **Chairman Heider** invited Tom Stroschein up to introduce himself to the committee. **Chairman Heider** said Mr. Stroschein comes from Moscow and would be confirmed to the State Board of Health and Welfare, to serve a term commencing January 7, 2013 and expiring January 7, 2017.  
**Mr. Stroschein** thanked the committee, introduced his wife Ruby and said this would be his third time serving – the first term, part-time. **Mr. Stroschein** said he grew up in southeastern Idaho, went to the University of Idaho, came back to his hometown to farm and ranch with his father – who was a state representative in the 1960s. **Mr. Stroschein** said his sister also served as a legislator. **Mr. Stroschein** said he ranched for about 25 years, met his wife and moved to Moscow in order for her to go to college. They have been there for about twenty years now. **Mr. Stroschein** said he has served as a Latah County Commissioner for ten years and has had the opportunity to serve on a regional mental health board.  
**Senator Schmidt** asked about any challenges the State Board of Health and Welfare been met with. **Mr. Stroschein** said the financial aspect is the big challenge, including increasing health care costs, employee cuts and the closure of the Department of Health and Welfare's Orofino office. **Senator Lodge** thanked Mr. Stroschein for his work, said she has had the honor of serving with him for several years and added that he is really dedicated and brings the perspective of a county commissioner to the board.

**GUBERNATORIAL APPOINTMENT:** **Senator Lodge** moved to send the gubernatorial appointment of Tom Stroschein to the State Board of Health and Welfare to the floor with a recommendation that he be confirmed by the Senate. **Senator Hagedorn** seconded the motion. The motion carried by **voice vote**.

**Senator Schmidt** volunteered to carry the gubernatorial appointment to the floor.

**HCR 17** **Senator Guthrie** said the purpose of **HCR 17** is to reject Docket No. 16-0720-1201, section 009, subsection 01.

**MOTION:** **Senator Schmidt** moved that **HCR 17** be sent to the floor with a **do pass** recommendation. **Senator Martin** seconded the motion. The motion carried by **voice vote**.

**Senator Schmidt** volunteered to carry **HCR 17** to the floor of the Senate.

**H 98** **Chairman Heider** said Anthony "Tony" Poinelli, Deputy Director of the Idaho Association of Counties, would be presenting **H 98**.

**Mr. Poinelli** said his instructions were, at the last meeting, to try and find out what he could on responsibility for dependents as it relates to income tax purposes – this was because of the addition to the term "dependent" and because of the responsibility put on the parents in regard to medical care.

**Mr. Poinelli** said he has talked to the tax commission and the Catastrophic Health Care Cost (CAT) Board attorney and there is not a lot of resolve. **Mr. Poinelli** said he can say that the board attorney for the CAT fund said that when individuals are claimed on income tax for tax purposes, the parents (or the individual claiming them) assume at least fifty percent of the responsibility or the support. **Mr. Poinelli** said he thinks the real issue boils down to what does "responsibility" mean, that he does not have a clear definition of "responsibility" and there is not one anywhere to his knowledge. This piece of legislation does have a fiscal impact to it – it is about a \$1.8 million hit to the state. (See Attachments 6a, 6b, 6c and 6d.)

**Senator Bock** said he does not think liability can be posed on a parent for the expenses of an adult child unless the parent has expressly agreed to them.

**Senator Bock** said he does not think that filing a tax return is an agreement, with the assumption of any kind of liability. Something that Senator Lakey noticed was the definition "dependent" in **H 98** – and this is old language, this is not new language – which says that a dependent is anyone someone could claim as a dependent on your tax return. **Senator Bock** said he thinks the state is backing itself into a problem that cannot be gotten around without some changes. For example: a parent tells their 18-year-old to get out of their house and that they are not responsible for them anymore and they are not going to even claim them on their tax return. The 18-year-old does some dumb things and ends up in the hospital with medical bills of a million dollars. This bill, as now drafted, would impose liability on that parent even under those circumstances.

**Senator Bock** said that is a problem that needs to be fixed. **Mr. Poinelli** said there was some talk about that and there is a fix to make it absolutely black and white – a word change. **Mr. Poinelli** said he still is not sure if that would resolve Senator Bock's concern.

**MOTION:** **Senator Bock** said if **H 98** could be sent to the amending order, at a minimum, the Senate could make that change with the input of people who are interested here. In the meantime, there will hopefully be an opinion back from the Attorney General's Office in regard to the rest of the questions about **H 98**. **Senator Bock** moved that **H 98** be referred to the 14th Order for amendment. **Senator Lakey** seconded the motion for discussion.

**DISCUSSION:** **Senator Lakey** asked if Mr. Poinelli was good with **H 98** going to the amending order for the language change. **Mr. Poinelli** said if he is sure that will happen, he did not mind talking to the majority leader and then to the House. Depending on what ends up happening, the word "dependent" is specified in three different definitions.

**Senator Hagedorn** said the term "dependents" is used throughout the bill and if there is an issue about how the term is written, then maybe the committee should take a look at that, study it and see how it will impact the other uses of the same term throughout the rest of the bill. **Senator Hagedorn** said he is afraid, at this late date, if they tried to change the meaning of dependent, it might have unknown ramifications.

**SUBSTITUTE MOTION:** **Senator Hagedorn** moved that **H 98** be sent to the floor as amended with a **do pass** recommendation – and then focus, throughout the rest of this year, to maybe come in next year to take care of the "dependent" terminology. **Vice Chairman Nuxoll** seconded the motion.

**DISCUSSION:** **Senator Lakey** said willing to go along with the substitute motion, but it does still cause him concern that the code is written this way and he knows that is not the way they apply it. **Senator Lakey** suggested word changes in regard to the third party application from the hospital wanting to get paid and in regard to the definition of "dependent" – especially in referring to dependents on tax returns. **Senator Bock** said another thing to consider is that there are various adults out there who could become dependents, such as disabled children or aging parents. **Senator Schmidt** asked where the term "obligated persons" is used. **Chairman Heider** said line 42, on page three. **Mr. Poinelli** said another area is on page two, line 17. **Senator Hagedorn** said to support the substitute motion, one of the concerns he has is changing the definition of "dependent." It says, "could claim as a dependent under the income tax laws in the state of Idaho." **Senator Hagedorn** said his question is, at what time? When you submit your taxes? During the tax year you are submitting your taxes for? If your 17-year-old turns 18 on January 1? **Senator Hagedorn** said that is why he is hesitant to change that terminology because he thinks there are a lot more questions that need to be asked about the definition of "dependent" before changing it simply with a word. **Senator Schmidt** said there was a group of twenty people looking at the bill over the summer and that the group could not recommend revising the CAT fund in a way that could be functional for Idaho. **Senator Schmidt** said his understanding of this is that this is a temporary fix for a problem that is being dealt with right now. **Senator Schmidt** said the committee needs to try to deal with that problem and if **H 98** is going to need further correction year by year, it will have to be brought back. **Senator Schmidt** said this is an issue that the committee needs to give direction to our state and this does give some direction – although it is not perfect by any means.

The substitute motion carried by **voice vote**.

**Senator Schmidt** volunteered to carry the bill on the floor.

**H 291**

**Chairman Heider** said Ken McClure, representing the Idaho Medical Association, would be presenting **H 291**.

**Mr. McClure** said he has been fortunate enough to have had the opportunity to speak with each of the senators, individually, about **H 291**. **Mr. McClure** he would briefly go over **H 291** and would welcome any questions the senators might have. (See Attachment 7c.)

**Vice Chairman Nuxoll** asked how **H 291** would help in a situation in which the hospital wants help and protection from teenagers who could be bigger and stronger. **Mr. McClure** said there are people in hospitals who can help subdue a violent person because violent people do show up at hospitals. However, **H 291** allows that a policemen not be called to the hospital if it is not necessary. If it is necessary, then a policeman is called and will come to the hospital. **Vice Chairman Nuxoll** asked if a police officer is not at the hospital, can a parent take their child home? But, if an officer is there, a parent cannot? **Mr. McClure** said, under current law, the parents could take their child home. However, **H 291** allows for the hospital to retain a child until a police officer can get there.

**TESTIMONY:**

**Margaret Henbest**, Executive Director of Nurse Leaders of Idaho, said she wanted to testify in support of **H 291**. **Ms. Henbest** said she wanted to talk about Advanced Practice Nurses (APN) and what they do in the context of this legislation. Advanced practice nurses are licensed as Registered Nurses in Idaho but are also licensed as APNs. In order to be eligible for that additional licensure, they have to graduate from an accredited program which is at the Master's level and, increasingly now, at the Doctoral preparation level. APNs are educated and licensed in four areas of specialization: as nurse practitioners, clinical nurse specialists, certified nurse-midwives and nurse anesthetists. So, hospitals have looked at their education and their scope of practice ability and have approved them to practice within that scope within their institution. These APNs are very capable of – in their knowledge and education and their scope of practice – of performing the determination that this legislation addresses.

**Chairman Heider** asked if most nurses have the ability to subdue a young teenage boy who may be acting out or exerting his strength. **Ms. Henbest** said this legislation refers to the ability to make the determination to place a hold on a person, not actually to physically subdue a person themselves. Hospitals have practices, policies and procedures for managing an unruly patient. **Senator Hagedorn** asked what the current practice is today, without this legislation. **Ms. Henbest** said, today, only a police officer can be called to make the determination to hold a child. **H 291** allows a health professional to make the determination themselves. **Senator Hagedorn** asked how a police officer makes the determination to keep a child at a hospital. **Ms. Henbest** said she does not practice in the emergency room, but currently a hospital will call a law enforcement person – who will have to arrive in a timely manner, make that determination and then transport the client to a secure setting either by patrol car, ambulance or another secure manner. **Senator Guthrie** asked how retaining people until police arrive will be billed out. **Ms. Henbest** said she would not be the best person to answer that question but, usually, a service in a hospital is coded as a unit of service and not necessarily the time that it takes.

**Chairman Heider** asked if Mr. McClure wanted to add anything. **Mr. McClure** said he would be happy to answer Senator Hagedorn's previous question in regard to how a police officer makes the determination to retain a child at a hospital. **Mr. McClure** said according to Representative Wood's testimony in the House, an officer typically follows the advice of the doctor in order to air on the side of caution.

**MOTION:** **Senator Martin** moved that **H 291** be sent to the floor with a **do pass** recommendation. **Senator Bock** seconded the motion. The motion carried by **voice vote**.

**Vice Chairman Nuxoll** wanted to be recorded as voting nay.

**Senator Martin** volunteered to carry **H 291** on the floor of the Senate.

**PRESENTATION:** **Chairman Heider** introduced Dr. Troy Rohn, co-founder of the Idaho Alzheimer's Planning Group, to talk about state plan for Alzheimer's Disease and **RS 22323**.

**Dr. Rohn** said he held a presentation for the Senate Health and Welfare Committee last year and the outcome of that was SCR 112, a concurrent resolution unanimously approved by legislature and endorsed by the governor. SCR 112 gave the green light to proceed with the development of a statewide plan. **Dr. Rohn** said he would be giving the committee an update on the progress made by the planning group, including its recommendations, as well as request approval of the state plan endorsement. (See Attachments 8a, 8b, 8c, 8d and 8e.) **Dr. Rohn** said the resolution before the committee, **RS 22323**, is identical to the one that passed last year. The only difference is, instead of giving the green light to write the plan, this endorses the plan. It is critical that the Idaho Alzheimer's Planning Group has the endorsement from the legislature to give the group – and the plan – the credibility and legitimacy needed to go get grants and funds in order to actually implement the initiatives. **Dr. Rohn** said the group already presented to the House Health and Welfare Committee and its chairman, Representative Woods, said that although this is not a controversial issue, he was concerned of the timing – with it being at the end of the legislative session. **Dr. Rohn** said that Representative Woods recommended starting the process with the Senate Health and Welfare Committee, see if the resolution could pass out of the Senate committee and then the House could pick it up on Monday.

**Vice Chairman Nuxoll** asked if there was a board appointed by the governor. **Dr. Rohn** said the idea is that the planning group will be turned into some sort of task force, making it responsible for helping implement the initiatives that are in the state plan. **Vice Chairman Nuxoll** asked if the group will eventually try to get state funding. **Dr. Rohn** said the intention is not to come to the legislature and ask for line items and there is nothing in the state plan that states that. **Dr. Rohn** said the goal is to use existing resources and fill in the gaps with grants and funds the group would be responsible for. **Senator Lodge** asked the sources of the grants the group expected to apply for. **Dr. Rohn** said there are a number of different regional, local and federal levels of dollars, such as through AARP-Idaho – which gave the group \$10,000 to help facilitate ongoing studies, collect data, etc. **Senator Lodge** asked about the competition for the grants due to the sequestration. **Dr. Rohn** said although it is super competitive out there, the funding the group is going after is much smaller and more manageable. These types of grants that are much smaller and there are a lot more foundational grant opportunities – local and regional. **Senator Hagedorn** asked if the group would be competing for grants with the Idaho Department of Health and Welfare. **Dr. Rohn** referred the question to Mike Berlin, another co-founder of the Idaho Alzheimer's Planning Group. **Mr. Berlin** said he did not believe anything the group would be applying for is competitive with any dollars that the Department of Health and Welfare is looking at.

**Senator Lodge** suggested **RS 22323** be taken back to the House, have it printed there, have the House run it through their calendar, let it come back to the Senate Health and Welfare Committee and have then buckslip is straight to the Senate floor – since testimony was already heard on it – so it gets to the floor on time. **Chairman Heider** said Senator Lodge’s suggestion will be the avenue the committee will try to take. **Chairman Heider** thanked Dr. Rohn and said, although it is very late in the session, the committee will see what it can do to pass the resolution.

**ADJOURNED:** There being no further business before the committee, **Chairman Heider** adjourned the meeting at 5:05 p.m.

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Senator Heider  
Chairman

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Linda Hamlet  
Secretary