

MINUTES  
**SENATE HEALTH & WELFARE COMMITTEE**

**DATE:** Monday, February 15, 2016

**TIME:** 3:00 P.M.

**PLACE:** Room WW54

**MEMBERS PRESENT:** Chairman Heider, Vice Chairman Nuxoll, Senators Lodge, Hagedorn, Martin, Lee, Harris, Schmidt and Jordan

**ABSENT/ EXCUSED:** None

**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 meeting of the Senate Health and Welfare Committee (Committee) to order at 3:02 p.m.

**RS 24507** **Relating to Supplemental Nutrition Assistance Program (SNAP) Fraud Prevention. Teresa Molitor**, a Boise-based lobbyist representing the Foundation for Government Accountability, presented this RS.

**Ms. Molitor** stated that the proposed RS: (i) creates an optional program to affix photos to electronic benefit transfer (EBT) cards, (ii) requires the Department of Health and Welfare (Department) to cross-check SNAP benefit recipients with lottery winners; and provides a procedure for the Department to interview and investigate SNAP recipients who frequently request replacement EBT cards. **Ms. Molitor** stated that the total fiscal impact of this RS would be approximately \$200,000 to \$400,000.

**Chairman Heider** asked the Committee members if they had any questions.

**Senator Schmidt** asked if Ms. Molitor had cost estimates for the Department to conduct lottery cross-checks and EBT replacement card investigations. **Ms. Molitor** responded that Department staffing costs were not included in the fiscal note. The fiscal note only includes the costs of implementing the photo program for EBT cards. She indicated that additional costs to the Department would be minimal.

**Senator Martin** asked who could use a recipient's EBT card. **Ms. Molitor** said it is her understanding that cards may be transferred among family members. **Senator Martin** asked about the process of affixing photos to the EBT cards. **Ms. Molitor** stated that the process was not addressed in this bill; it could be addressed in rule. **Chairman Heider** asked why cards haven't had pictures in the past. **Ms. Molitor** noted that the federal government prohibits mandatory photo programs, and this is the first optional photo program to be considered in Idaho.

Questioning whether there was enough of a need for photos on the cards to justify spending between \$200,000 and \$400,000, **Senator Jordan** asked why this request came from the Foundation for Government Accountability and not from the Department. **Ms. Molitor** responded that she was hesitant to speak for the Department. Regarding enforcement, **Senator Jordan** asked, if the pictures are put on the cards, would there be a way to require that they be checked. **Ms. Molitor** replied it would probably be up to the retailers. **Senator Lodge** commented that she has discovered that there really isn't any benefit to having photos on the cards; there's an enormous cost to do it and anyone can still use the card. As for replacement cards, Idaho has a very low rate of replacement cards compared to some other states. Also, Idaho has a very stringent monitoring system in place to identify and refer the fraudulent activities. **Senator Lodge** concluded that, at this time, she couldn't support this RS.

**MOTION:** There being no more questions, **Senator Hagedorn** moved to send **RS 24507** to print. **Senator Harris** seconded the motion.

**Chairman Heider** asked if there was further discussion. **Senator Jordan** said this is the first time she is questioning whether to send something to print. She said she thought sending an RS to print would be a good way to advance the conversation on the topic, but that she found this RS very troubling and without a lot of data to back it up, so she would not be able to support the motion.

**ROLL CALL VOTE:** **Chairman Heider** called for a roll call vote. **Vice Chairman Nuxoll**, **Senator Hagedorn** and **Senator Harris** voted **aye**. **Senator Lodge**, **Senator Martin**, **Senator Schmidt**, **Senator Jordan** and **Chairman Heider** voted **nay**. **Senator Lee** was not present for the vote. The motion failed.

**RS 24513** **Relating to Residential Care Facilities Citations.** **Senator Martin** presented this RS.

**Senator Martin** stated that the purpose of this RS is to provide clarity and to assure that residential and assisted-living facilities are only cited for violations that are specified in an applicable law or rule.

**MOTION:** There being no questions, **Senator Hagedorn** moved to send **RS 24513** to print. **Vice Chairman Nuxoll** seconded the motion. The motion passed by **voice vote**.

**S 1250** **Relating to the Advanced Practice Registered Nurse Compact.** **Sandra Evans**, Executive Director Idaho Board of Nursing, presented this bill.

**Ms. Evans** stated that this bill adopts the Advanced Practice Registered Nurse (APRN) Compact, an interstate compact providing for multistate APRN licensure, which facilitates cross-border practice (APRN Compact). An APRN is a registered nurse (RN) with graduate or post-graduate education in nursing, who is prepared with advanced knowledge and skills to practice in the roles of certified nurse midwife, clinical nurse specialist, nurse practitioner or registered nurse anesthetist. Discussing the model of mutual recognition, **Ms. Evans** stated that Idaho previously adopted the Nurse Licensure Compact for RNs and licensed practical nurses (LPNs); this compact has proven to be an effective way of reducing unnecessary regulatory barriers to health care delivery. APRNs are not included in the Nurse Licensure Compact. **Ms. Evans** stated that the APRN Compact would allow an APRN to have one multistate license that permits practice in other APRN Compact member states. She noted, however, that each member state would retain regulatory autonomy through its standards of conduct for practice within its borders. The APRN Compact supports patient safety by creating and maintaining a comprehensive national database to facilitate information sharing between states, including information about licensure, investigations, discipline and alternatives to discipline. She discussed the features of the database.

**Ms. Evans** reviewed the 11 articles of the APRN Compact, including (i) the purpose, (ii) the definitions, (iii) the uniform provisions, (iv) applications for licensure, (v) the authorities invested in licensing boards, (vi) the licensure information system, (vii) the establishment of interstate commission, (viii) rulemaking, (ix) oversight, dispute resolution and enforcement, (x) the effective date, withdrawal and amendment and (xi) construction and severability.

**Ms. Evans** stated that the APRN Compact provides an effective nationwide solution to interstate APRN practice in response to concerns raised by Congress related to regulatory barriers that interfere with the practice of telehealth. **Ms. Evans** stated this APRN Compact will have minimal fiscal impact on the dedicated fund maintained by the Board of Nursing.

**Chairman Heider** asked the Committee members if they had any questions.

**Senator Harris** asked if it would be difficult for a nurse from a state not in the APRN Compact to be hired in a state within the APRN Compact. **Ms. Evans** indicated the unlikelihood of that scenario. **Ms. Evans** added that it is possible that an organization with more than one corporate campus might prefer nurses coming from APRN Compact states, if that's where the corporate campuses are located.

**Senator Hagedorn** asked where disputes with the interstate compact commission (Commission) would be adjudicated. **Ms. Evans** said the logical venue for the Commission would be in Chicago, which is the home base for the National Council of State Boards of Nursing. She referred the question to the Idaho Board of Nursing's attorney, Roger Gabel. Referring to article IX of the APRN Compact, **Mr. Gabel**, an attorney with the Attorney General's office, stated that there would first be an attempt to resolve the issue through the Commission. If these discussions did not resolve the issue, the parties would pursue arbitration. Then, if the issue was not resolved through arbitration, and as a final resort, a party may initiate legal action in the U.S. District Court of the District of Columbia.

Noting that the Commission is authorized to collect annual assessments from member states, **Senator Hagedorn** asked if there was a limitation on that assessment and inquired how it would be controlled. **Ms. Evans** said the Commission is made up of the administrator of the Board of Nursing from each member state, and she indicated that protections are inherent in the membership of the Commission.

Noting that nurses registered in member states would be automatically recognized and authorized to practice in Idaho, **Senator Schmidt** asked if there is much difference among the states' licensure requirements and processes. **Ms. Evans** said states are more alike than they are different. However, there are some nuances for licensure, such as continuing education requirements or some very specific educational preparation requirements.

**MOTION:**

There being no more questions, **Senator Martin** moved to send **S 1250** to the floor with a **do pass** recommendation. **Senator Harris** seconded the motion. The motion carried by **voice vote**. Senator Hagedorn will carry the bill on the floor of the Senate.

**S 1251**

**Relating to the Nurse Licensure Compact.** **Sandra Evans**, Executive Director Idaho Board of Nursing, presented this bill.

**Ms. Evans** stated that the purpose of this bill is to adopt the enhanced Nurse Licensure Compact (Nurse Compact) to replace the current compact. She said the enhanced compact is an amended version of the existing compact, of which Idaho has been a member of since 2001. **Ms. Evans** stated that an interstate compact is a statutory agreement between two or more states intended to remedy a particular problem of multistate concern; the concern for the existing compact was the emerging practice of telehealth. **Ms. Evans** stated that the Nurse Compact creates a regulatory process that permits nurses to practice freely among participating states on the license issued by their primary state of residence without the need to hold additional licenses in those other states.

**Ms. Evans** discussed the successes of the current Nurse Compact, but noted that membership had stalled at 25 states. Enhancements were made to the current compact to encourage adoption by more states and thereby increase access to quality nursing care nationwide. **Ms. Evans** reviewed eight significant policy changes included in the enhancements of the Nurse Compact: (i) incorporation of uniform licensure requirements, including grandfathering nurses who hold a multi-state license at the time of transition to the enhanced compact, (ii) authority for states to obtain and submit fingerprints for national criminal background checks, (iii) requirements for prompt reporting of investigative or disciplinary actions, (iv) establishment of the interstate commission, (v) clarification of the rulemaking processes based on provisions of the Model Administrative Procedures Act, (vi) improved oversight and enforcement of the compact, (vii) revised threshold for effectiveness and (viii) provisions for withdrawal from the existing compact. Reviewing the benefits of the existing compact, **Ms. Evans** stated that adoption of this bill would have no negative impact on these existing benefits.

**Ms. Evans** stated that this enhanced Nurse Compact will have minimal fiscal impact on the dedicated fund of the Board of Nursing.

**Chairman Heider** asked the Committee members if they had any questions.

**Senator Hagedorn** asked why the new Nurse Compact would be better. **Ms. Evans** responded that key elements were identified that needed to be implemented in order to make this Nurse Compact more attractive to states that previously would not or could not join the current one.

**Senator Schmidt** said his understanding of the value of the Nurse Compact for Idaho was that it may encourage nurses to practice in Idaho. He asked if this was the outcome of the current compact and inquired why some states did not want to join the current one. **Ms. Evans** said some states were not interested in joining the current compact and other states tried to join but were unsuccessful in getting legislation passed in their states. Much of the opposition came from collective bargaining units in those states that were fearful the current compact would enhance strikebreaking. **Ms. Evans** stated that the enhanced Nurse Compact is more attractive because the uniform requirements are set forth in statute instead of in administrative rules that may be modified more easily. As for whether or not Idaho has experienced a greater workforce as a result of the compact, **Ms. Evans** stated that the number of practitioners has grown, but she could not say that the current compact was the reason for that growth.

**MOTION:** There being no more questions, **Senator Martin** moved to send **S 1251** to the floor with a **do pass** recommendation. **Senator Schmidt** seconded the motion. The motion carried by **voice vote**. Senator Martin will carry the bill on the floor of the Senate.

**S 1252:** **Chairman Heider** said that due to time constraints, the Committee would hear **S 1252** on a future date.

**ADJOURNED:** There being no further business, **Chairman Heider** adjourned the meeting at 3:56 p.m.

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Senator Heider  
Chair

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Karen R. Westbrook  
Secretary

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Kara Machado  
Assistant