

MINUTES
JOINT FINANCE-APPROPRIATIONS COMMITTEE

DATE: Wednesday, February 17, 2016

TIME: 8:00 A.M.

PLACE: Room C310

MEMBERS: Senators Co-chairman Keough, Bair, Mortimer, Brackett, Nuxoll, Johnson, Thayn, Guthrie, Schmidt, Lacey
Representatives Co-chairman Bell, Gibbs, Miller, Youngblood, Burtenshaw, Horman, Malek, Monks, King,

**ABSENT/
EXCUSED:** Gannon

CONVENED: Chairman Keough convened the meeting at 8:00 A.M.

STAFF PRESENT: Headlee, Tatro, Bybee, Houston,

GERMANE COMMITTEE REPORTS

PRESENTATION: **Senate Health and Welfare Committee**

PRESENTER: **Senator Lee Heider, Chairman**

The three main health and welfare issues facing Idahoans during this legislative session are: 1) Primary Care Access, 2) Behavioral Health, and 3) Suicide Prevention. Medicaid expansion has not been palatable to the majority of the Legislature. Another option would be a primary care access program. Although the initial funding proposal was not approved this week by the House State Affairs Committee, alternative funding may yet be forthcoming. It is important to the people in the "GAP" population to have a program implemented to care for their needs. Should PCAP legislation proceed, hopefully, the Joint Finance-Appropriations Committee would find a way to fund the program. Currently, Community Health Centers (CHC) deliver coordinated medical, dental and behavioral health services focusing on wellness, prevention, and chronic disease management. There are 72 clinics across 47 communities in Idaho that serve 156,651 patients in 2014.

In December of 2014, Idaho was awarded about \$40 million in grant funding over a four-year period to implement the State Healthcare Innovation Plan (SHIP) which would reform the healthcare delivery system to focus on health outcomes while remaining patient-centered. SHIP promotes the delivery of services through clinics known as Patient-Centered Medical Homes (PCMH) that develop a partnership between the patient, the primary care physician, and the clinical team. Within this model, those without insurance or adequate funds would be able to obtain medical care and become active participants in their healthcare decisions. The Legislature should continue to promote and support CHC's and PCMH's. When people have primary care that focuses on prevention of chronic illnesses, it leads to more positive outcomes and reduces the burden on society for healthcare costs.

In 2014, the Legislature provided for the development and operation of Behavioral Health Community Crisis Centers to be developed as funding became available. Behavioral Health Centers are voluntary outpatient facilities operating 24/7 year round to provide evaluation, intervention and referral for individuals experiencing crises due to behavioral health conditions, including chronic and serious mental illnesses. The first two Crisis Centers have been established in Idaho Falls and Coeur d'Alene. The next Center should be located in southern Idaho; **Chairman Heider** would like it to be located in Magic Valley.

The next item discussed was Suicide Prevention which is the second leading cause of death of Idahoans between the ages of 15 and 34. Idaho has one of the highest suicide rates. In 2014 Idaho had the 9th highest suicide rate, 46% higher than the national average, with 320 suicides. Idaho should create a statewide suicide prevention coalition with public/private supporters focused on prevention, training, and education. The goal for the coalition would be to grow and become a funded 501(c)(3) non-profit that would advocate for mental health policies and programs.

PRESENTATION: House Health and Welfare Committee

PRESENTER: **Representative Fred Wood, Chairman**

The House and Senate Health and Welfare Committees held a public hearing last Friday, February 12, 2016, and two main themes were expressed. Everyone who testified about healthcare requested the expansion of Medicaid similar to the Healthy Idaho plan. People want healthcare benefits for the GAP population. Second, many citizens were very concerned about issues within the foster care program housed in the Department of Health and Welfare.

The child support enforcement IT system in the Division of Welfare needs to be funded and modernize in order to significantly reduce operating costs and increase efficiency. Suicide and suicide rates are cause for great concern. The Committee requested that JFAC fully fund the suicide hotline and fully fund the requests of the Health Quality Planning Commission's Idaho Suicide Prevention Plan.

Behavioral health boards need guidance regarding goals, mission, vision, and values; any funding should be tied to performance goals. Healthcare for the GAP population is a work in progress but the Committee agreed what is currently happening is unfair. It is important to find an equitable and effective solution to healthcare issues facing the GAP population.

Perhaps the most urgent need for all Idahoans in the healthcare arena is behavioral health services. The House Health and Welfare Committee recommends funding as many crisis centers as the funding will allow and also recommends full funding of Allumbaugh House in Boise to help alleviate the shortage of behavioral health services. Another recommendation was to increase the personal home care rate as the budget permits; an hourly rate of \$16.50 per hour was suggested.

PRESENTATION: Senate Resources and Environment Committee

PRESENTER: **Senator Steve Bair, Chairman**

Chairman Bair said the Senate Resources and Environment Committee is working continually on improving gas and oil leases and statutes. Regarding the Department of Lands, Lands and Waterways budget, Line Item 5 for Gas and Oil Support, the Governor has recommended that one administrative assistant position be funded. Water issues have also been discussed extensively in Senate Resources and Environment Committee. The recharge program needs to be accelerated. A number of recharge sites still need to be identified; preliminary engineering has been done. It will take about six years to get to the point of recharging the required 250,000 acre feet per year. He encouraged the Joint Finance-Appropriations Committee to fund the \$7.5 million (2.5 million one time and \$5.0 million ongoing) needed for water sustainability (recharge) projects within the budget for the Water Resources Board.

OFFICE OF THE GOVERNOR

Commission on Aging

**MANAGEMENT
REVIEW:**

**Legislative Services Office
Audits Division**

PRESENTER:

April Renfro, Division Manager

To view the presentation, please click on the following link: [Management Review — Idaho Commission on Aging Audit Report](#)

A management review of the Idaho Commission on Aging (Commission) covered the fiscal years ended 2013, 2014, and 2015. The review covered general administrative procedures and accounting controls to determine that activities were properly recorded and reported. The review was also conducted to address specific legislative intent language included in House Bill 248 from the 2015 Legislative Session.

The following two findings related to the management review: 1) fuel and vehicle insurance purchases were not in compliance with state policies or Idaho Code, and 2) purchasing and travel requests lacked documentation of prior approval as required by Commission policy. The Audits Division recommended that the Commission comply with state fiscal policies and Idaho Code as policies relate to the purchase of fuel and insurance for state vehicles.

There were three findings related to the specific legislative intent language in House Bill 248. The three findings were: 1) evaluation and compliance with budget laws and proper accounting procedures, 2) evaluation of the funding distribution formula used by the Commission, along with the potential impact of changing the formula, and the steps necessary to change the formula, and 3) an analysis of revenues and expenditures associated with the operations and management of the local planning and service areas. These three findings did not include recommendations for improvement; therefore, no corrective action was required. The Commission has reviewed the report and provided responses to recommendations made by the audit team.

PRESENTATION: **Idaho Commission on Aging (Commission)**

PRESENTER: **Sam Haws, Administrator**

To view the presentation, please click on the following link: [Commission on Aging](#)

The Commission's mission and vision is to provide access to services and programs that contribute to seniors and persons with disabilities to remain independent for as long as possible. The Older Americans Act, enacted in 1965, celebrated its 50th anniversary in 2015. The Commission is committed to use its taxpayer dollars in the most efficient and effective way to provide essential services to clients. The Commission is staffed with 13 full-time and 3 temporary positions; there has been zero turnover for four years.

Core programs for the Commission include: 1) home-delivered meals for homebound persons, 2) congregate meals — generally served at senior centers, 3) disease prevention/health promotions (nutrition counseling/physical fitness), 4) National Family Caregiver Support Program (NFCSP), 5) Nutrition Services Incentive Program (NSIP) (a supplement to service providers based on the number of meals served), 6) Senior Community Services Employment Program (SCSEP) helps train low-income, unemployed seniors, 7) Supportive Services-Transportation, Legal Assistance, Information Assistance, Outreach, etc., 8) elder abuse prevention, 9) Adult Protection and 10) State Ombudsman — problem resolution for residents in long-term care facilities.

The Adult Protection program is State mandated and funded with state General Funds. The Commission is directed to investigate allegations of abuse, neglect, self-neglect and/or exploitation involving vulnerable adults. The Ombudsman Program is federally mandated to protect the health, safety, welfare, and rights of those persons receiving care in assisted living, skilled nursing and other long-term care facilities. All of the Area Agencies on Aging (AAA) have an Ombudsman program.

Commission support programs include: 1) Medicare Improvements for Patients and Providers Act (MIPPA), 2) Senior Medicare Patrol (SMP), 3) The Aging and Disability Resource Center (ADRC), 4) Idaho's Lifespan Respite Program, 5) The Idaho Model Approaches to Statewide Legal Services Delivery System — Phase II, 6) Commodity Supplemental Food Program (CSFP), and 7) The Idaho Model Approaches to Statewide Legal Services Delivery System (grant) involving the Senior Legal Hotline and the "Senior Legal Guidebook." While all services are important, it is often a combination of support programs that makes a difference.

The Commission's funding sources come from the Older Americans Act, state general funds, U. S. Department of Agriculture, and the U. S. Department of Labor. The Commission contracts with the AAA's to plan and implement coordinated delivery of services; the plan must mirror the Commission's four-year State Plan. (AAA's are not employed by the Commission.) Allocation of funds to the AAA's is determined by using a weighted Intra-State Funding Formula which is ultimately approved by the federal Administration for Community Living. Priorities are given to the percentage of elders based within that population, economic status, minorities, and rural locations. The six AAA's cover all 44 Idaho counties. The Commission has been operating Area III since July of 2014 and continues to work on designating a new AAA.

The Governor recommended an FY 2017 budget of \$12,570,600 with 13 FTP's. The remainder of the Administrator's remarks were in response to the Management Report (Audit) discussed above. The Commission welcomed the review and thanked the Legislative Services audit staff for their recommendations to help strengthen internal controls. Regarding Finding 1 (fuel and vehicle purchases), as of July, 2015, the Commission discontinued using P-cards for fuel purchases and began using the appropriate fuel cards. The Commission generally agrees with the finding concerning insurance for AAA vehicles and has implemented the audit recommendation. The finding regarding lack of documentation for purchasing and travel requests has been corrected and the recommendation has been implemented.

PRESENTATION: Senate Education Committee

PRESENTER: **Senator Dean Mortimer, Chairman**

The Senate Education Committee listed the following as the priorities for education funding, starting with the most important: 1) continue funding the Career Ladder, 2) restoration of Discretionary Spending bringing it to the 2009 level per support unit which conveys to trustees/superintendents the State trusts their expertise – support units from 2009 to 2016 are an extra 1067 units, 3) [tied with #4] College and Career Counseling is important and necessary because it is the means to provide career education and mentoring needed to encourage students to prepare for the future, 4) [tied with #3] Classroom Technology is equal in priority with #3, and 5) Literacy Proficiency and Professional Development.

ADJOURNED: There being no further business, Chairman Keough adjourned the meeting at 9:32 A.M.

Senator Keough
Chair

Peggy Moyer
Secretary