

MINUTES  
**HOUSE HEALTH & WELFARE COMMITTEE**

**DATE:** Wednesday, January 18, 2017

**TIME:** 9:00 A.M.

**PLACE:** Room EW20

**MEMBERS:** Chairman Wood, Vice Chairman Packer, Representatives Hixon, Perry, Vander Woude, Redman, Gibbs, Blanksma, Hanks, Kingsley, Zollinger, Chew, Rubel

**ABSENT/  
EXCUSED:** None

**GUESTS:** Bruce Cheeseman, Wayne Denny, John Cramer, Bev Barr, and Joyce Broadsword, DHW; Pat Kelly, and Karla Haun, YHI; Greg Casey, Veritas Advisors; Mckinsey Lyon, citizen; Colby Cameron, Sullivan & Reberger

**Chairman Wood** called the meeting to order at 9:00 a.m.

**MOTION:** **Vice Chairman Packer** made a motion to approve the minutes of January 11, 2017 meeting. **Motion carried by voice vote.**

**Chairman Wood** turned the gavel over to **Vice Chairman Packer**.

**Pat Kelly**, Executive Director, Your Health Idaho (YHI), presented the YHI legislative update. YHI's mission is to maintain maximum control of Idaho's insurance marketplace at minimal cost to its citizens. The Department of Insurance, the DHW, and the YHI Board of Directors have worked together to establish YHI among the leading exchanges in the nation.

2016, their third year of operation, shows a steady enrollment growth to more than 95,000 Idahoans. Idaho is second in the nation in per capita enrollment and leads in per capita enrollment among state-based exchanges. Operations are now covered by the fee assessment revenue.

The customer call center transition from the DHW to YHI has been completed and already indicates a 75% improvement in customer wait times and a 50% drop in appeals. With the help of the Department of Insurance, YHI offers more plan choices than ever before. Local expertise has been improved with mandatory training for agents and brokers.

As a state-based exchange, our plans are managed by Idahoans, consumers use local agents or brokers, the governing board is comprised of Idahoans, the assessment fee is approved by the board, and federal intervention is mitigated. This is exemplified by the 1.99% Idaho assessment fee, lower than the federal 3.5%, and resulting three-year savings of \$15M and \$29M to Idahoans and the catastrophic fund, respectively.

More than 95,000 Idahoans enrolled in the exchange in 2016. A slight majority of enrollees were women, and close to 60% were younger than 45 years of age. Eighty-seven percent of the enrollees received a tax credit and 69% selected a silver plan.

YHI has the lowest investment of any full-functioning state-based marketplace in the country. Cash reserves cover six to nine months of operating expenses. The majority of their expenses have been in technology development.

The YHI is prepared for change, anticipating new ideas and recommendations as the Affordable Care Act (ACA) is addressed. Our exchange model can serve as a successful foundation for reform. Investments in technology, workforce, and processes can be leveraged to accommodate future changes. Knowing any changes will take time to understand and implement, YHI remains committed to ensuring Idahoans reliant on health coverage through the marketplace experience minimal disruption.

In response to questions, **Mr. Kelly** said as they work through the upcoming financial year budget process, a slight increase in operating costs is expected to support the center integration.

**Vice Chairman Packer** commented the exchange has offered a choice when the state had no say about the ACA. Keeping agents and brokers involved has added to the great success of the exchange. A key component not mentioned is the non-biased shopping experience which allows customer review of every option without any identifying information on the insurance companies.

**Mr. Kelly**, answering questions, said they continue to work with policy makers to determine the best way to assist consumers while awaiting more information on the ACA outcome. The YHI receives about \$220M in tax credits to offset monthly premium costs of citizens, which would be a financial impact upon repeal of the entire ACA. Of the current enrollees, 87% receive a subsidy. He agreed to provide a more detailed income breakdown. Repeal of the ACA would mean the 87% would no longer receive any assistance with their premiums.

**DOCKET NO. 16-0102-1601:** **Bruce Cheeseman**, Emergency Medical Services (EMS) Section Manager, Bureau of EMS and Preparedness, presented **Docket No. 16-0102-1601**, with definition changes for several data characters, including EMS response and the National Emergency Medical Services Information System (NEMSIS). Other definitions cover Air Medical Support, a seasonal declaration, and the Recognition of EMS Personnel Licensure Interstate Compact Act (REPLICA).

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

**MOTION:** **Rep. Gibbs** made a motion to approve **Docket No. 16-0102-1601**. **Motion carried by voice vote.**

**DOCKET NO. 16-0103-1601:** **Bruce Cheeseman**, Emergency Medical Services (EMS) Section Manager, Bureau of EMS and Preparedness, presented **Docket No. 16-0103-1601** to remove all reference to records, data collection, and submission, which will have their own new chapter.

**MOTION:** **Rep. Chew** made a motion to approve **Docket No. 16-0103-1601**.

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

**VOTE ON MOTION:** **Vice Chairman Packer** called for a vote on the motion to approve **Docket No. 16-0103-1601**. **Motion carried by voice vote.**

**DOCKET NO. 16-0103-1602:** **Bruce Cheeseman**, Emergency Medical Services (EMS) Section Manager, Bureau of EMS and Preparedness, presented **Docket No. 16-0103-1602**. Licensed personnel are required to have an affiliation with a licensed agency, which creates a problem for personnel working in emergency rooms at hospitals not providing EMS. The hospitals were added as a declaration option to address this issue. Air medical support was added to address Idaho National Guard medevac unit short term care while not belonging to a licensed EMS agency. The new seasonal agency licensure accommodates fire agencies or ski resorts. The air medical declarations were streamlined to only one license type.

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

**MOTION:** **Rep. Perry** made a motion to approve **Docket No. 16-0103-1602. Motion carried by voice vote.**

**DOCKET NO. 16-0107-1601:** **Bruce Cheeseman**, Emergency Medical Services (EMS) Section Manager, Bureau of EMS and Preparedness, presented **Docket No. 16-0107-1601**. He gave a brief history of REPLICA and its anticipated activation in 2017. The Rule changes address reciprocity for licensed providers wishing to affiliate with an Idaho licensed EMS agency. When coming from another REPLICA state, provided they have a current license in that state, they will have ninety days to apply and obtain Idaho licensure, which will allow them to start working immediately. Their expiration date will coincide with their original state's expiration. Idaho licensure will not be required if they maintain primary affiliation in another REPLICA state.

**Mr. Cheeseman**, responding to questions, stated there are seven initial REPLICA states, with eight more seeking legislation to join. We have a separate EMS compact with Utah which stipulates licensees can provide care with the same protection amount as in their home state.

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

**MOTION:** **Rep. Redman** made a motion to approve **Docket No. 16-0107-1601. Motion carried by voice vote.**

**DOCKET NO. 16-0106-1601:** **John Cramer**, Program Manager, Bureau of EMS, Division of Public Health, DHW, presented **Docket No. 16-0106-1601**, a new chapter for the complexity of EMS data collection and submission requirements while conforming to the current NEMSIS national data standards. The compliant tools and software are already in place and being used.

Answering a question, **Mr. Cramer** said the electronic tool can be used in a free-standing or on-line manner. Rural users can work on their chart while driving back from the service area and then upload chart information at another time.

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

**MOTION:** **Rep. Redman** made a motion to **approve Docket No. 16-0106-1601. Motion carried by voice vote.**

**ADJOURN:** There being no further business to come before the committee, the meeting was adjourned at 9:48 a.m.

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Representative Packer  
Chair

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Irene Moore  
Secretary