

MINUTES
SENATE HEALTH & WELFARE COMMITTEE

DATE: Thursday, February 09, 2017

TIME: 3:00 P.M.

PLACE: Room WW54

MEMBERS PRESENT: Chairman Heider, Vice Chairman Souza, Senators Martin, Lee, Harris, Agenbroad, Foreman, and Jordan

ABSENT/ EXCUSED: Senator Anthon

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 3:00 p.m.

RS 25180 **Relating to Health Care. Senator Thayn** was recognized to present **RS 25180. Senator Thayne** informed the Committee the Health Care Alternatives for Citizens Below 100 Percent of Poverty Level Task Force (Task Force) met last year and recommended a State-funded program with a primary care component. The Task Force suggested using the Millennium Fund as a funding source. The legislation would provide funding for up to \$600 per year in primary health care costs for people in the coverage gap by establishing a Community Primary Care Program (CPCP), including a life coaching component to move people out of poverty as soon as possible.

Senator Thayn explained the new program would be under the auspices of the Catastrophic Health Care Cost Program (CAT Fund). The bill sets forth qualifications for the CPCP as well as the application process, the requirement for orientation, and a definition for "direct primary care." The bill also provides for additional compensation for working with a participant on a personal improvement plan (PIP) to assist participants with other kinds of needs in addition to health needs. A participant would be required to reapply every year with a three-year lifetime limit for participation and could stay in the CPCP if income increases up to 250 percent of the federal poverty limit. Criteria are established in the bill for terminating and enrolling participants, and funding. The bill establishes powers and duties for administration of the CPCP by the CAT Fund Board and contains a sunset clause.

Senator Jordan stated she is a member of the CAT Fund Board and the CAT Fund has a very small staff. She questioned what the CAT Fund Board would need to administer the new program and how it would work. **Senator Thayn** answered the CAT Fund would need more staff, and he estimated an additional \$600,000 for administrative costs in the fiscal note. **Senator Jordan** inquired whether the CAT Fund is aware of the proposal and if the CAT Fund has given input on this proposal. **Senator Thayn** replied he has spoken to the counties and Kathryn Mooney at the CAT Fund. Ms. Mooney has been providing ideas how the plan could work if the legislation passes.

Vice Chairman Souza asked if the \$600 per year limit would be limited to \$150 per quarter, or if the entire amount could be expended in the first quarter if a patient had a serious need. **Senator Thayn** answered the limit was \$150 per quarter.

Vice Chairman Souza referred to page 5, line 41 of the bill that provides a patient can remain in the CPCP for one year unless the participant refuses to adhere to prescribed or recommended treatment and asked who would make that determination. **Senator Thayn** confirmed it would be the primary care provider.

Senator Agenbroad inquired whether the use of the word "same" in the last line of the fiscal note was intentional as it could make a difference. **Senator Thayn** responded it was a typographical error and should be "some."

Senator Martin asked if Senator Thayn has been in contact with the co-chairs of the Millennium Fund about the legislation. **Senator Thayn** replied he has not specifically contacted the co-chairs but he has proceeded based on the recommendation of the Task Force. He believes the funding is available.

MOTION: **Senator Harris** moved to send **RS 25180** to print. **Senator Martin** seconded the motion.

DISCUSSION: **Senator Lee** commented all options to address expanded health care should be looked at, and she looks forward to reviewing this innovative proposal and any others that might come forward.

There being no more discussion, **Chairman Heider** called for the vote. The motion carried by **voice vote**.

PASSED THE GAVEL: Chairman Heider passed the gavel to Vice Chairman Souza to conduct the rules review.

DOCKET NO. 16-0202-1601 **Rules of the Idaho Emergency Medical Services (EMS) Physician Commission.** **Dr. Curtis Sandy**, introduced himself as an emergency medicine physician at Portneuf Medical Center in Pocatello, and he serves as the Commission Chair. **Dr. Sandy** informed the Committee the EMS Physician Commission (Commission) was formed by the passage of H 858 (2006). The Commission is composed of 11 voting members appointed by the Governor, representing a variety of stakeholder groups and geographic areas. The purpose of the Commission is to establish standards for the scope of practice and medical supervision for licensed EMS personnel and organizations.

Dr. Sandy pointed out the rule's "incorporation by reference" section updates the version of the Standards Manual, maintained by the Commission. The Standards Manual describes the skills, treatments, and procedures that licensed EMS personnel may perform, and the Commission refines the Standards Manual to reflect current best practices in EMS. **Dr. Sandy** provided a summary of the changes made to the 2017-1 Standards Manual (see Attachment 1). Most of the changes are merely housekeeping issues, but the Commission also added language regarding airway management practices, including mandatory use of continuous end tidal carbon dioxide monitors and a quality review by the agency medical director. The Commission added appendices for ventilator management and critical care transport guidelines. Other changes were made to align the Commission's Standards Manual with the EMS Bureau's rules.

Vice Chairman Souza remarked she did not see anything significant on the list of changes and inquired whether the change was on the order of an equipment list. **Dr. Sandy** responded the Commission has requirements for things like airway management and requires specific equipment to be used. The end tidal carbon dioxide monitor is now mandatory for all patients who are intubated in the pre-hospital environment. **Vice Chairman Souza** asked for confirmation that the list includes the most significant changes and there were no policy changes in the updates to the Standards Manual. **Dr. Sandy** confirmed that is the case.

MOTION: **Senator Foreman** moved to approve **Docket 16-0202-1601**. **Chairman Heider** seconded the motion. The motion carried by **voice vote**.

**PASSED THE
GAVEL:**

Vice Chairman Souza passed the gavel back to Chairman Heider.

RS 24921

Relating to the Immunization Assessment Board. **Senator Martin** introduced himself to present **RS 24921**. **Senator Martin** explained the legislation changes the sunset date of the Idaho Immunization Assessment Program from 2017 to 2019. **Senator Martin** said he is a member of the Idaho Immunization Assessment Board (Board), and the legislation is co-sponsored by Representative Thompson, who also serves on the Board. The Board was established by H 432 (2010) and became effective February 1, 2010 to decrease the cost, availability, and maintenance of prescriptive items. The Board's immunization program is administered by the Idaho Department of Health and Welfare (Department), and the Department purchases childhood vaccines from the Centers for Disease Control and Prevention at a significant discount. The vaccines are then made available to Idaho professional caregivers through the Department. In the past, vaccines had to be purchased from multiple sources. Health care providers had to keep track of what source a vaccine was bought from and maintain different inventory controls for various items. Costs of vaccines are passed on to the insurers who in turn pass on the costs to insurance providers and then to Idaho citizens. The immunization program has reduced costs.

Senator Foreman moved to send **RS 24921** to print. **Senator Lee** seconded the motion. The motion carried by **voice vote**.

RS 25106

Relating to Tobacco.

MOTION:

Senator Martin asked for unanimous consent to return **RS 25106** to the sponsor. There were no objections.

H 10

Relating to Chiropractors. **Mitch Toryanski** introduced himself to the Committee as legal counsel to the Idaho Board of Occupational Licenses on behalf of the State Board of Chiropractic Physicians (BCP). **Mr. Toryanski** introduced Dr. Herbert Oliver, a chiropractor and BCP member who was also present, and mentioned the BCP public member is former Senator Chuck Coiner from Hansen. **Mr. Toryanski** explained **H 10** is a clean-up bill to consolidate fee provisions into one section. The bill also raises fee caps and modernizes language governing the deposit and expenditure of fees. The legislation clarifies the process for granting and reactivating inactive licenses and deletes archaic language concerning the review of license applications and personal interviews. There is no impact to the General Fund or the BCP dedicated fund.

Mr. Toryanski informed the Committee the changes contained in the bill were approved by the BCP in an open meeting noticed to the public. The BCP mailed 722 notices to licensed chiropractors and received no comments.

Senator Foreman asked how much the fee caps were raised on average. **Mr. Toryanski** answered the caps are currently set at \$150. The fees will be bumping up against the caps and without the increase in the caps, the BCP would be required to undertake a two-step process to request a future fee increase.

Senator Martin referred to page 2 of the bill and stated he was confused about the strike-outs through the fee amounts when there is subsequent language stating the applicant must submit a fee set by board rules. Similar language appears for another license type. **Senator Martin** asked whether the bill would authorize the BCP to set fees of its choice. **Mr. Toryanski** explained the fee amounts are set in rule. The fee caps were reorganized in the bill to be consolidated in Idaho Code § 54-707(a). The fee caps would be stricken from page 2 and moved to page 1. In addition, the fee caps would be raised from \$150 to \$250.

Senator Lee referred to page 2, line 35, where language is proposed to be deleted, and inquired whether there is some other provision for notification to let an applicant know of a license denial and the reason. **Mr. Toryanski** answered the BCP typically provides notices by U.S. Mail. This change will allow the BCP to save money by eliminating the requirement for certified mail. Almost none of the boards use certified mail any longer, and the bill brings the chiropractors in line with the other boards. **Senator Lee** further inquired why the paragraph was not simply changed to say regular mail and commented she would like the legislation to provide for notice to an applicant about a license denial. **Mr. Toryanski** responded that he is unaware of language requiring any of the boards to notify the applicant in a specific manner. He assured Senator Lee notice of denial is given by the BCP.

Senator Lee asked about the appeal process for an applicant who was denied a license and who feels the action was arbitrary and capricious. **Mr. Toryanski** replied the BCP's actions are controlled by the Administrative Procedures Act (APA), which affords anyone who is the subject of a negative action the right to appeal that action first to the BCP and then to district court.

Senator Martin commented it appears all fees have been raised and asked when the fees were originally set and how long it has been since they have been changed. **Mr. Toryanski** answered most of the fees were last raised in 1993 and many of the caps were raised in 2003.

Vice Chairman Souza asked for clarification about the dates as they relate to Mr. Toryanski's earlier statement that fees were pushing up against the fee caps. She inquired how the fees could be pushing up against the caps if the caps were just raised in 2003. **Mr. Toryanski** replied the BCP presented a rule change this year to increase fees, and the fees will be raised at the conclusion of the legislative session. That forthcoming increase will put the fees up against the current caps.

MOTION: **Senator Lee** moved to send **H 10** to the floor with a **do pass** recommendation. **Senator Jordan** seconded the motion. The motion carried by **voice vote**.

ADJOURNED: There being no further business at this time, **Chairman Heider** adjourned the meeting at 3:33 p.m.

Senator Heider
Chair

Jeanne Jackson-Heim
Secretary