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March 9, 2017

Senator Lee Heider, Chairman
Senate Health and Welfare Committee
Statehouse
Boise, ID 83720

RE: Senate Bill 1142

Chairman Heider and Committee Members:

The Council on Developmental Disabilities is authorized by federal and state law to monitor systems and policies and to advocate for improved and enhanced services that enable Idahoans with developmental disabilities to live meaningful lives, included in their communities. The Council is comprised of 23 volunteers appointed by the Governor.

The Council applauds the efforts and commitment of Senator Hagedorn for working diligently to resolve the lack of health insurance coverage. The leadership of Chairman Wood and Senator Hagedorn on health care coverage for Idahoans is recognized and appreciated.

It is never a bad idea to provide funding to the primary care clinics. However, Senate Bill 1142 does not resolve the coverage gap crisis. There will be no significant impact on the issues faced by 12-13,000 Idahoans who experience serious and persistent mental illness in Idaho. This population is currently served through the Department of Health and Welfare, funded entirely by state general funds. The services available are limited to people in serious crisis who are deemed either a risk to themselves or others. The services do not provide for rehabilitative services or community based supports to maintain a person's mental health to prevent a relapse or crisis. However, passing legislation to close the coverage gap this session would drastically improve our state's inadequate and broken mental health system.

The funding made available through this legislation will fund primary care, which is not the same as comprehensive health care coverage. Primary care takes place on a first come first serve basis and only covers certain types of prescriptions, mainly antibiotics, but has limited ability to cover ongoing high cost prescriptions needed by individuals with severe and persistent mental illness and chronic health conditions. Many people require health care that includes frequent routine visits that may include specialized treatments and medications.

If comprehensive health care is not passed this year, we will continue to pay for emergency care for the uninsured in an inefficient and expensive way - through our property taxes, state funds, and higher health care premiums, since the cost of caring for the uninsured is often passed on to those that are insured. When we do not provide preventative health care and pay only for care when people are in crisis or at the end of their lives it costs the taxpayers of Idaho millions of dollars.

If you could do one thing to significantly improve the mental health system and the health of people with chronic health conditions in Idaho it would be to pass comprehensive health care coverage. 78,000 uninsured Idahoans should not have to wait another year.

Christine Pisani
Executive Director