

MINUTES
HOUSE HEALTH & WELFARE COMMITTEE

DATE: Tuesday, February 08, 2022

TIME: 9:00 A.M.

PLACE: Room EW20

MEMBERS: Chairman Wood (Critchfield), Vice Chairman Vander Woude, Representatives Gibbs, Blanksma, Kingsley, Christensen, Lickley (Schutte), Erickson, Ferch, Mitchell, Chew, Rubel, Burns

**ABSENT/
EXCUSED:** Representative(s) Christensen

GUESTS: The sign-in sheet will be retained in the committee secretary's office; following the end of the session the sign-in sheet will be filed with the minutes in the Legislative Library.

Chairman Vander Woude called the meeting to order at 9:00 a.m. He welcomed **Rep. Debbie Critchfield** and **Rep. Amy Schutte** to the committee.

RS 29355C2: **Michael McGrane**, representing himself and other Idaho Emergency Medical Services (EMS) providers, presented **RS 29355C2** to expand the allowable use of EMS Grant Funds. This replaces **RS 29355C1** which was presented to the committee on February 3, 2022, and reinserts the statement "which include highway safety and emergency response to motor vehicle accidents," as agreed.

MOTION: **Rep. Rubel** made a motion to introduce **RS 29355C2**. **Motion carried by voice vote.**

RS 29347: **Rep. Marco Erickson**, District 33, presented **RS 29347**. Consistent with the Licensing Freedom Act, this proposed legislation consolidates the drug outlet registration process for resident and non-resident drug outlets.

MOTION: **Rep. Blanksma** made a motion to introduce **RS 29347**. **Motion carried by voice vote.**

Alex Adams, Administrator, Division of Financial Management, presented an overview of the Governor's American Rescue Plan Act (ARPA) recommendations. The majority of the funds went to Idaho citizens through stimulus checks. Other direct funds were part of the Paycheck Protection Program and business loans.

Direct state agency funding had specific program designations, with no latitude. The ARPA \$1.89B discretionary funds have a limited use menu, as reflected in the Governor's recommendations.

Although other states have immediately used their discretionary funds, Idaho's approach is to appropriate a small portion for hospital and crisis supports. Then, with an eye to the future, other fund investments can be made with a primary concern for water and sewer projects.

Based on the Idaho Behavioral Health Council (IBHC) recommendations, \$4.4M will be used to implement a mental health 988 crisis line with the suicide prevention hotline. This improvement will dispatch mobile response teams for mental health crisis calls. The base funding for the suicide prevention line is expected to sustain this additional crisis line.

Grants from the \$12M allocation for Community Behavioral Health Clinics will increase integrated care and treatment. Once established, the clinics will bill insurers and be self sustaining through claims adjudication.

The Substance Use Disorder (SUD) recovery centers support of \$1.8M will allow the centers to stabilize over the next three years, with possible use of the opioid settlement cash influx over the next decade.

Other recommendations include annual payouts of \$1M for three years to both the Home Visiting and Head Start programs, for a total of \$6M. Adding ARPA funds allows Idaho to serve more families and improve the nutrition and health of all participants.

The final recommendation is \$1M to Veterans Homes for COVID-19 expenses. This provides a resource to help with staffing issues and other direct COVID-19 related expenses without using General Funds.

Answering questions, **Mr. Adams** said Idaho could receive \$120M over a seventeen-year period from the opioid settlement. The crisis line is expected to be up and running by July, 2022. Behavioral Health Clinic grants will be prioritized by geographic locations. As with other budget recommendations, the Legislature determines the final appropriations. Idaho must allocate all of the funds by December, 2024, or they revert to the federal government. Another deadline is December, 2026, when any capital improvement projects funded by ARPA must be completed.

Dave Jeppesen, Director, Department of Health and Welfare (DHW) was invited to answer questions. He said the Behavioral Health Clinics' capitated model is designed to help patients become responsible and manage their care.

Responding to additional questions, **Mr. Adams** explained the extensive ARPA funds reporting requirement to the Treasury Department. Because the required information from each agency will also be extensive, use of a specific firm will be recommended to help them report accurately and on time.

A fourth Veteran Home is opening later this year and will assure all areas of Idaho are covered. Although legislative resolutions are being introduced to express support for the longitudinal projects over multiple fiscal years, future legislatures could change the current priorities.

Invited to answer more questions, **Director Jeppesen** stated the crisis line funds are one time costs for a larger software facility, set up of the mobile response teams, and operations until a long-term provider is selected. Director Jeppesen will provide the suicide prevention calls information to the committee for the meeting on February 9, 2022. Currently, law enforcement becomes the mental health first responders. The new crisis line will provide other resources to accompany law enforcement or go in their stead. To advertise the 988 number, the DHW will use media attention, extensive social media, law enforcement, and provider outreach. The crisis line will also be programed into the statewide 911 system. The Director will provide a breakdown of the \$4.4M mental health expenditures.

ADJOURN: There being no further business to come before the committee, the meeting adjourned at 9:41 a.m.

Representative Vander Woude
Chair

Irene Moore
Secretary