

MINUTES  
**SENATE HEALTH & WELFARE COMMITTEE**

**DATE:** Thursday, January 22, 2026

**TIME:** 3:00 P.M.

**PLACE:** Room WW54

**MEMBERS PRESENT:** Chair VanOrden, Vice Chair Bjerke, Senators Harris, Zuiderveld, Shippy, Blaylock, Keyser, and Wintrow

**ABSENT/ EXCUSED:** Senator Lenney

**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:** **Chair VanOrden** called the meeting of the Senate Health and Welfare Committee (Committee) to order at 3:01 p.m.

**PASSED THE GAVEL:** Chair VanOrden passed the gavel to Vice Chair Bjerke.

**DOCKET NO. 16-0313-2501** **Consumer-Directed Services (Chapter Repeal) – Pending Rule.**  
**Jared Larsen**, Chief of Staff, Idaho Department of Health and Welfare (IDHW), stated 2025 H 345 repealed all Medicaid rules effective July 1, 2025. The bill missed the repeal of Chapter 16.03.13 Consumer-Directed Services. The IDHW codified this chapter into the consolidated Medicaid Plan Benefits Chapter 16.03.26 and therefore, he asked the Committee to approve this docket.

**MOTION:** **Senator Harris** moved to approve **Docket No. 16-0313-2501**. **Senator Blaylock** seconded the motion.

**DISCUSSION:** **Senator Wintrow** clarified the repealed chapter would be included in the new chapter with no substantive changes. **Mr. Larsen** confirmed she was correct.

**VOICE VOTE:** The motion to approve **Docket No. 16-0313-2501** carried by **voice vote**.

**DOCKET NO. 16-0326-2501** **Medicaid Plan Benefits (New Chapter) - Temporary and Pending Rule.**  
**Jared Larsen**, Chief of Staff, Idaho Department of Health and Welfare (IDHW), explained this Docket was a consolidation of all the Medicaid provisions into a single administrative rule chapter called Medicaid Plan Benefits. The proposed rules did not introduce any new policies, and removed outdated, unnecessary, or repetitive language. **Mr. Larsen** stated the following regulations were changed:

1. Case management was added for certain Home and Community Based Service waiver participants to align with annual appropriations authorizing the service.
2. The age requirement of 18 years for personal care service providers was removed with the exception of school-based services.
3. The definition of "Extraordinary Care" was aligned with federal guidelines.
4. Rules related to healthy connections and health connections value care were removed as regulation was outlined in the Idaho Medicaid Provider Handbook for the Idaho Medicaid State Plan.
5. Providers of speech, language, and pathology assistance were designated as providers in response to legislative direction to eliminate barriers.

**DISCUSSION:** **Senator Shippy** stated it would be helpful to have a presentation on this Docket to break down the large chapter and changes. **Mr. Larsen** answered he could expand on the changes made, however the Committee reviewed and approved all the rules in this Docket last session. The only new changes were already stated and the relocation of consumer-directed services to this consolidated chapter. He stated if needed, the IDHW would provide additional information.

**Senator Wintrow** stated stakeholders reported concerns about the accessibility and openness of the negotiated rulemaking process for this Docket. She asked the IDHW to be cognizant of this in the future. She added that stakeholders raised concerns regarding the timeline requirements for completing a psychological evaluation and asked how it could be resolved. **Mr. Larsen** stated the concerns raised by stakeholders were understandable, given the significant Medicaid related changes during the past two legislative sessions. He anticipated less change in the future as the proposed rule chapter was consolidated and removed any language duplicative of the Idaho Medicaid State Plan and federal law. Additionally, IDHW was aware of the stakeholders concerned with requirements for psychological evaluations. **Mr. Larsen** clarified the requirements in this docket were not changed from the previous requirements in administrative rule. The IDHW was happy to discuss addressing these concerns in the interim and working with stakeholders.

**TESTIMONY:** **Robert Vande Merwe**, Executive Director of the Idaho Health Care Association, testified in favor of the docket. He acknowledged the psychological evaluation timeline issue was not raised during negotiated rulemaking but the association wanted to address it in administrative rule. He noted unintended consequences of moving regulation to the Idaho Medicaid Provider Handbook, which was not reviewed annually by the Legislature.

**DISCUSSION:** **Senator Wintrow** clarified stakeholders were concerned with the accessibility of policy because it was located in the Medicaid Handbook, administrative rule, and state statute.

In response to Senator Wintrow's concerns regarding psychological evaluations **Bridger Fly**, Administrator at CommuniCare INC, stated the primary challenge was workload backlogs created by high demand and a shortage of psychologists who serve Medicaid patients. Psychological evaluations were required within the first 90 days, however scheduling often takes four to seven months, delaying eligibility and provider reimbursement.

**MOTION:** **Chair VanOrden** moved to approve the temporary and pending rules in **Docket No. 16-0326-2501**. **Senator Harris** seconded the motion.

**DISCUSSION:** **Chair VanOrden** acknowledged the docket was lengthy, however the Committee received the information in advance to allow time for review.

**VOICE VOTE:** The motion to approve **Docket No. 16-0326-250** carried by **voice vote**.

**ADJOURNED:** There being no further business at this time, **Chair VanOrden** adjourned the meeting at 3:24 p.m.

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Senator VanOrden  
Chair

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Madysen Crea  
Secretary