

MINUTES  
**SENATE HEALTH & WELFARE COMMITTEE**

**DATE:** Thursday, February 12, 2026

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

**PLACE:** Room WW54

**MEMBERS PRESENT:** Chair VanOrden, Vice Chair Bjerke, Senators Zuiderveld, Lenney, Shippy, Blaylock, Wintrow, and Acting Senator Bjerke (Keyser)

**ABSENT/ EXCUSED:** Senator Harris

**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 3:02 p.m.

**MINUTES APPROVAL:** **Senator Shippy** moved to approve the Minutes of January 28, 2026. **Vice Chair Bjerke** seconded the motion. The motion carried by **voice vote**.

**MINUTES APPROVAL:** **Vice Chair Bjerke** moved to approve the Minutes of January 28, 2026. **Senator Zuiderveld** seconded the motion. The motion carried by **voice vote**.

**RS 33115C1** **Relating to Foster Parent Training.** **Senator Shippy** explained this legislation was to follow up 2025 S 1034 which moved foster care licensing requirements from administrative rule into statute. He stated existing statute required only limited foster parent training for prudent parent standards. During the interim, he worked with Idaho Department of Health and Welfare (IDHW) to establish clear and uniform expectations for foster parent licensing. This legislation set a statutory requirement for 10 hours of foster parent training, intended to be completed primarily through video modules. The required training included: orientation to foster care programs, understanding the impact of trauma in children, behavior management, working with birth parents, court processes, and physical safety for children in foster homes. The intent was to create consistent minimum expectations while reducing barriers to entry. Although individuals could be licensed without completing extensive training, IDHW prioritized placements with families who received appropriate training, particularly for children with complex needs. This legislation aimed to effectively equip foster parents while maintaining flexibility for additional or specialized training when necessary.

**MOTION:** **Senator Zuiderveld** moved to send **RS 33115C1** to print. **Vice Chair Bjerke** seconded the motion. The motion carried by **voice vote**.

**RS 33213** **Relating to Public Benefits.** **Senator Wintrow** explained that this legislation clarified that the verification of lawful presence did not apply to applications for crime victims compensation. The legislation intended to remedy an unintended problem caused by 2025 H 135. Crime victims compensation covered the collection of evidence during sexual assault forensic examinations. The program was essential as it encouraged victims to come forward and cooperate with law enforcement, thereby supporting public safety. She explained by restoring this well-established process, it ensured crime victims received essential services, compensation needed for healing, and continued to cooperate with law enforcement. **Senator Wintrow** explained that the Crime Victim Compensation Program (CVCP) was funded through the federal Victims of Crime Act (VOCA), enacted in 1984, which was financed by fines and fees paid by convicted offenders—not state tax dollars. The program was historically based

on whether the crime occurred in Idaho, regardless of the victim's residency or citizenship status.

**DISCUSSION:** **Senator Blaylock** asked for an example of a scenario when this legislation would be applied. **Senator Wintrow** explained after passage of 2025 H 135 some individuals interpreted crime victims compensation as a public benefit, which led to confusion about whether sexual assault forensic exams were considered a public benefit. There was concern that victims of sexual assault might be required to verify immigration status before receiving a forensic exam. She asserted that sexual assault forensic exams were not a public benefit but rather a criminal justice tool used to collect evidence and prosecute offenders.

**Vice Chair Bjerke** inquired about the status of VOCA funding as he heard the fund was substantially diminished. **Senator Wintrow** explained VOCA funds supported CVCP administered by the Idaho Industrial Commission, covering expenses for counseling, medical bills, and restitution. She noted that in 2017 the Legislature created a separate fund to pay for sexual assault forensic exams, ending the prior practice of billing victims' insurance. This process change removed financial and privacy barriers for victims. She answered that the fund had decreased from about \$300,000 to roughly \$270,000 or less and would likely need additional support.

**MOTION:** **Senator Blaylock** moved to send **RS 33213** to print. **Senator Shippy** seconded the motion.

**DISCUSSION:** **Senator Blaylock** indicated she had additional questions and a full hearing would be the appropriate time to address them.

**VOICE VOTE:** The motion to send **RS 33213** to print carried by **voice vote**.

**RS 33314** **Relating to Hearing Loss Screening.** **Senator Galloway** explained that recent volatility in federal policy had caused disruptions in newborn hearing screenings in Idaho. In response, this legislation established the importance of voluntary newborn hearing screenings in Idaho statute, independent of federal direction.

**DISCUSSION:** **Senator Shippy** asked for clarification on the voluntary nature of the screening and if parents could presently request the screenings. **Senator Galloway** explained this legislation added the screenings to a statute which allowed parents to opt-out of any screening or test listed in the chapter. Nothing in the proposal made the screenings mandatory. Parents were able to take their child to an audiologist independently at any time for formal testing. She noted newborn hearing screenings were being conducted in Idaho hospitals. However, recent federal actions created uncertainty. The legislation aimed to provide stability at the state level while maintaining parental choice.

**MOTION:** **Senator Lenney** moved to send **RS 33314** to print. **Senator Zuiderveld** seconded the motion. The motion carried by **voice vote**.

**S 1266** **FOSTER CARE - Amends and adds to existing law to establish provisions regarding foster care placement.** **Senator Galloway** explained this legislation was designed to strengthen Idaho's foster care system by expanding expedited placement eligibility to trusted kin while maintaining licensing and safety standards. "Kin" was defined as extended family members or individuals with a significant family-like relationship with the child. The legislation made technical corrections to improve statutory consistency and court efficiency. Currently, expedited placement applied only to relatives; this legislation extended that process to kin. The legislation allowed children removed from their homes to be placed more quickly in familiar, supportive environments. She emphasized the legislation aimed to provide stability during traumatic transitions without compromising safety.

**TESTIMONY:** **Talienna Nichols**, a foster and kinship mother from north Idaho testified in support of **S 1266**. She shared her family's experience caring for a newborn relative. She described the two-and-a-half-year kinship care journey navigating court, medical and developmental challenges, and working closely with IDHW to support both the child and biological family. The case ended in adoption, allowing the child to remain in her family. Over the past eight years, they continued as foster parents, caring for over 20 children. She stated she had served as a peer mentor and supported other kinship families. She emphasized the opportunity to say "yes" had allowed her family to provide stability, support, and guidance to vulnerable children and their relatives.

**MOTION:** **Senator Blaylock** moved to send **S 1266** to the floor with a **do pass** recommendation. **Senator Shippy** seconded the motion. The motion carried by **voice vote**.

**S 1267** **MEDICAID - Adds to existing law to direct the Department of Health and Welfare to conduct a study of options regarding certain Medicaid programs.** **Senator Wintrow** explained the Medicaid for Workers with Disabilities (MWD) program, Idaho Code §56-209n, was health insurance for people who worked and had a disability. This program was intended to help people with disabilities work and maintain health insurance, to support independent living. After age 65, many people who wanted to continue working were kicked off the program and faced significantly higher insurance cost sharing requirements that sometimes quadruple. In order to keep people living independently in their homes, and avoid the high costs of institutionalization, this legislation directed the Idaho Department of Health and Welfare (IDHW) to identify and evaluate options, no later than December 1, 2026, within existing federal Medicaid authority that prioritized continuity for individuals enrolled in or transitioning from the Medicaid for Workers with Disabilities program.

**DISCUSSION:** **Vice Chair Bjerke** asked if there was a way to provide a review of the intricacies related to Medicaid for the disabled population at age 65, how they navigated the program, and how the federal law signed by President Donald Trump would affect implementation in 2028. **Senator Wintrow** explained that the federal law signed by President Trump had just been enacted the previous week. She noted that IDHW could provide more detail on the program's intricacies. She emphasized that Medicare did not cover long-term care, whereas Medicaid did, including home and community based services (HCBS) such as assistance with toileting and daily living activities. She suggested that Dana Grover who was present to testify, could provide further answers and clarification about the law's impact.

**TESTIMONY:** **Nicholas Wyatt** testified that he and his wife both lived with significant disabilities and resided independently with HCBS support. He explained this legislation would benefit both himself and his wife. He stated that the bill would make the program more accountable and provide important assistance to people with significant disabilities on Medicaid.

**Dana Grover** stated she was quadriplegic and explained her experience with the MWD program, which she had participated in since age 18 after a car accident. She stated the program allowed her to work, save, and cover daily expenses. However, when she turned 65, she transitioned to standard Medicaid, which limited earnings and resources to \$2,000. She described having to reduce her work hours and noted that the Achieving a Better Life Experience (ABLE) program did not preserve her higher income eligibility, as income and savings were still counted toward eligibility. Her monthly cost share had risen to nearly \$1,400 on an income of approximately \$2,800, consuming about 40% of her earnings. She emphasized her desire to continue contributing to society while living independently in the community. She expressed appreciation for MWD and urged support for the legislation, noting that the recent federal law signed by President Trump addressed the age cap.

**DISCUSSION:** **Vice Chair Bjerke** asked where Ms. Grover currently worked. **Ms. Grover** stated she helped businesses, government entities, and individuals understand their obligations and rights under the Americans with Disabilities Act (ADA).

**Senator Zuiderveld** asked how determinations would be made regarding whether participants would live independently in the community or be placed in institutional settings. She inquired what standards and criteria would guide these decisions and whether the legislation could unintentionally allow the Committee or IDHW to determine institutionalization versus community living. **Senator Wintrow** explained that the bill did not create a committee or process to institutionalize participants. She noted that the first page of the bill contained legislative findings affirming Idaho's interest in encouraging work and supporting individuals with disabilities to maintain coverage, save, and live independently. She clarified that the bill's purpose was to direct IDHW to study how to allow people over 65 to remain on the MWD program at manageable premiums, addressing cost-sharing concerns and preventing financial hardship, without any role in deciding institutionalization.

**Vice Chair Bjerke** asked how many people would choose to continue working after age 65 under the program and sought context on how the decision to institutionalize an individual against their will was made. He noted placements often occurred when a health care professional determined an individual was unable to care for themselves. **Senator Wintrow** summarized that Section 2 of the legislation directed the IDHW to identify and evaluate policies for MWD, consider fiscal impact, administrative feasibility, individual independence, and quality of life.

**Senator Blaylock** inquired how many participants were enrolled in the MWD program. **Senator Wintrow** replied the estimate was 2000 people. **Senator Blaylock** asked why the word institutionalized appeared so frequently in the legislation. She clarified the problems the bill intended to address were currently occurring and asked how many people had been forced into a care setting they had not chosen due to financial hardship. **Senator Wintrow** explained when drafting the legislation she collaborated with the disability community and IDHW. She found there was substantial fear in the community of being institutionalized against their will.

**Senator Lenney** asked what was meant by "institutionalized" in the context of the hearing and the bill, noting that the term could be interpreted in different ways by different people. He inquired why the bill was necessary if IDHW already needed to conduct research to implement the recent federal policy changes. **Senator Wintrow** explained that institutionalized included assisted living, skilled nursing facilities, homelessness, and being confined to a hospital, noting that many people did not want to be placed in those situations. She stated the disability community was worried and wanted to ensure the research was conducted in a timely manner.

**Chair VanOrden** commented that in her community, the State Hospital South had a nursing home–style wing where some individuals with high needs might be placed. She noted that the bill was primarily requesting a study or report to be conducted.

**Senator Wintrow** stated that the bill was important for the disability community, as putting the plan in writing would provide reassurance and direction to IDHW. She explained that the IDHW was willing to conduct the study to align with the federal law passed last week. She noted that if the study indicated the fiscal note and program changes were viable, the plan could potentially be implemented earlier than December 1, helping individuals concerned about their budgets and independent living. She emphasized that the approach intended to ensure momentum on research and planning.

**Senator Shippy** commented that the bill asked the IDHW to conduct a study, but he questioned the proper role of government in caring for those who cannot fully care for themselves. He emphasized that the first responsibility for well-being belonged to the individual, then family, church, and non-profits, with government as a last resort. He noted that over-reliance on government programs had reduce voluntary generosity and individuals seeking compassion from families and churches. He argued that personal giving reflected true Christian compassion and government intervention was unintentionally eroding the societal role of family, church, and community in supporting vulnerable individuals.

**Chair VanOrden** indicated **S 1267** would be held in Committee for lack of a motion.

**ADJOURNED:** There being no further business at this time, **Chair VanOrden** adjourned the meeting at 4:12 p.m.

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Senator VanOrden  
Chair

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Madyson Crea  
Secretary

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Melissa Price  
Secretary