

MINUTES
SENATE HEALTH & WELFARE COMMITTEE

DATE: Monday, March 09, 2026

TIME: 3:00 P.M.

PLACE: Room WW54

MEMBERS PRESENT: Chair VanOrden, Senators Harris, Bjerke (Bjerke), Zuiderveld, Coho (Lenney), Shippy, Blaylock, Keyser, and Wintrow

ABSENT/ EXCUSED: None

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.

H 777

UNIFORM CONTROLLED SUBSTANCES - Amends existing law to revise provisions regarding controlled substances. **Nicki Chopski**, PharmD, Executive Officer for Idaho Board of Pharmacy, Health Professions Bureau Chief, Division of Occupational and Professional Licenses (DOPL), explained the Idaho Board of Pharmacy (Board) administered the regulatory provisions of Idaho's Uniform Controlled Substance Act. This bill, in accordance with Idaho Code § 37-2702(a), updated the Idaho Controlled Substance Act and provided the Legislature with the opportunity to independently review substances for scheduling. Idaho was one of 12 states that did not incorporate by reference the US Drug Enforcement Administration scheduling decisions. **Dr. Chopski** explained there were 11 new substances added to Schedule I and 2 opioids added to Schedule II that were inadvertently admitted in previous drafts. She stated in alignment with 2025 H 014, Idaho Code Clean Up Act, the Board collaborated with the Idaho State Police to remove the chemical names and retain the common names of scheduled substances. These edits would not impact the State's enforcement ability. This bill also corrected spelling, numbering and drafting errors from previous versions of the Act; and proposed less substantive changes including adding known abbreviations, removing references to Board rule, and rewording subsections for clarity.

Dr. Chopski reviewed the following changes proposed by **H 777**:

- Section 1 added nine illicit fentanyl derivatives, one benzodiazepine derivative, and one stimulant to Schedule I, substances that had no accepted medical use and had not been approved by the FDA.
- Section 2 proposed two opiates be added to Schedule II.
- Sections 3, 4, 5 did not include additions to Schedule III, IV or V. The updates in these sections were clarifications.
- Sections 6 through 13 updated registration to biennial registration, addressed possession of controlled substances following suspension or revocation of registration, clarified the Order to Show Cause process, and provided limited access to the prescription drug monitoring program for federal investigators of US Veteran Affairs (VA) and tribal authorities.

MOTION: **Senator Harris** moved to send **H 777** to the floor with a **do pass** recommendation. **Senator Blaylock** seconded the motion. The motion carried by **voice vote**.

**MINUTES
APPROVAL:
PASSED THE
GAVEL:**

Senator Wintrow moved to approve the Minutes of February 11, 2026. **Acting Senator Coho (Lenney)** seconded the motion. The motion carried by **voice vote**.
Chair VanOrden passed the gavel to Senator Harris.

HCR 30

COMPREHENSIVE MEDICAID MANAGED CARE - States findings of the Legislature and directs the Medicaid Review Panel to study the implementation of comprehensive Medicaid managed care. **Chair VanOrden** explained several years ago, the Medicaid Review Panel (Panel) was set up to oversee contracts for Medicaid administered by the Idaho Department of Health and Welfare (IDHW). In 2025, the passage of H 345 began the process of transitioning Medicaid to comprehensive managed care. This legislation would allow the Panel to hire a consultant. The Panel submitted a request for information, and was creating a request for a proposal (RFP), which would shape the managed care contract that would be procured. She stated the Medicaid budget approved this year was \$5.5 billion. The RFP would look for managed care entities to help the Panel manage the money appropriated to the Medicaid program. The Medicaid Review Panel needed to make between 40 and 50 decisions and the RFP had to be finalized by October 31, 2026. The Panel was asking for a consultant to help decipher the large amount of information and to work with IDHW. She emphasized that everything in the managed care contract would hinge on the RFP the Panel created.

DISCUSSION:

Senator Wintrow asked how much had been spent on the transition to managed care. **Chair VanOrden** explained IDHW hired a consultant for that transition which cost \$1.3 million. The consultant that the Panel intended to hire would cost \$200,000. She added it was difficult to find an individual without a conflict of interest, but the Panel had identified a candidate who met the qualifications. **Senator Wintrow** asked if the position would require a bid. **Chair VanOrden** explained that because the funds originated from the legislative budget, they would not have to submit a bid.

Senator Blaylock asked whether IDHW or the Panel had to make the decisions required to complete the RFP. **Chair VanOrden** explained the Panel and IDHW made the decisions together. This allowed the Panel to have oversight over the contract and the creation of the RFP.

MOTION:

Senator Blaylock moved to send **HCR 30** to the floor with a **do pass** recommendation. **Senator Keyser** seconded the motion.

DISCUSSION:

Senator Blaylock stated the managed care contract was \$5.5 billion and it was wise for the legislative Panel to oversee that level of contract and have an independent consultant who was working on the RFP full time. She explained it was important for the Legislature to have someone they could get information from directly. She added the amount of money that would be spent on this would be well spent.

Senator Wintrow stated she struggled to support the motion because she was not sure what the Panel consultant would do differently than the IDHW consultant. She stated it would be an unnecessary duplication.

Senator Shippy acknowledged the importance of legislative oversight but expressed ongoing reservations about expanding Medicaid-related policies. He cited concerns that these policies would further entrench the State in an expanding system which he found problematic. He emphasized the need for more substantive discussions on the broader implications of socialized healthcare, particularly for able-bodied adults. He stated he would not support the motion although he appreciated the intent.

Senator Zuiderveld stated the Legislature always tried to fix situations, but instead ended up making them so complicated legislators could not figure how to address the problem. She explained this led to hiring somebody to explain and now the State was paying for these decisions. She state she would not support the motion.

Senator Harris state he was on the Medicaid Review Panel and the decisions that had to be made were daunting. 2025 H 345 put Idaho on a trajectory for managed care implementation. He explained there was a lot of information to review by the deadline of October 30, 2026. He acknowledged the benefit of having a consultant and stated he would support the motion.

**ROLL CALL
VOTE:**

Senator Harris requested a roll call vote on the to send **HCR 30** to the floor with a **do pass** recommendation. **Senators Harris, Blaylock, Keyser, Acting Senators Bjerke (Bjerke), Coho (Lenney) and Chair VanOrden** voted aye. **Senators Zuiderveld, Shippy, and Wintrow** voted nay. The motion carried.

ADJOURNED:

There being no further business at this time, **Chair VanOrden** adjourned the meeting at 3:25 p.m.

Senator VanOrden
Chair

Madyson Crea
Secretary