

Idaho Academy of Family Physicians 2017 Legislative Update - Week 11

The Week Ending March 24, 2017

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Legislature misses target adjournment date:

Friday March 24 was supposed the target for final adjournment of the 2017 Idaho Legislative session, but it is not to be. Disagreement and lack of an agreeable solution on taxes and transportation funding means the session will go for a few more days.

On the whole, the final disposition of legislation of interest to the IAFP has been determined (or we can at least predict with a great deal of accuracy the final disposition).

Meager efforts at addressing “gap” population coverage fail:

Two separate legislative efforts to put \$10 million of Millennium Fund money toward providing some medical coverage and care to a small population of uninsured both failed this year. Rep. Fred Wood’s concept (**H160**) never received a hearing in his own House Health and Welfare Committee after he recognized it would likely fail.

Senator Marv Hagedorn then introduced a nearly identical proposal (**S1142**) in the Senate that did pass the Senate Health and Welfare Committee but died by a vote of 13-22 on the Senate floor.

Proponents of finding a solution to the “gap” population problem argued that these proposals were not sufficient to truly address the issue. Republican legislators claim they need to wait to see what if anything happens with the Federal Affordable Care Act before they do anything of significance to address the gap population challenge.

Rep. John VanderWoude introduced and got printed **H 310**, the “**Idaho Accountable Community Care Act**”. This bill never received a hearing in the Health and Welfare Committee and was introduced largely to establish a base of a solution that can be debated and refined through the summer to come back for action in 2018. The intention of this bill is to increase the number of family medicine residency slots; create a loan forgiveness program to help community health centers recruit doctors; and direct hospitals to help patients enroll in primary care instead of visiting emergency rooms. The program would be available to people in Idaho’s health coverage gap and also to some people already on Medicaid, and would provide some coordinated care including annual health screenings and diabetes management.

Legislation of interest this week:

S1182 “Faith Healing Bill” was introduced this week. It essentially would have removed the civil litigation prospects against parents whose children suffered injury or death due to lack of modern medical care by reason of religious beliefs. Criminal proceedings could still be pursued. This bill was rather controversial, and passed the Senate State Affairs committee by a single vote. **It then Failed on the Senate Floor 11-24.**

H250 “Abortion” This bill would repeal a law, passed in 2015 banning telemed abortions and chemical abortions. The 2015 law, sponsored by Idaho Chooses Life was legally

challenged by Planned Parenthood and a judge found it to be unconstitutional. This legislation would repeal that law. **Passed the Senate 27-7 and is to the Governor.**

SCR 113 "Medical residencies" Senator Chuck Winder introduced a concurrent Resolution encouraging Idaho hospitals to develop and support more medical residencies in the state, including not only primary care and psychiatry but sub-specialty residencies. This resolution **has been adopted by both Houses of the Legislature.**

H 195 "Chiropractic clinical nutrition" Would establish a set of standards and educational requirements for a chiropractic certification in clinical nutrition for those who wish to utilize vitamins and minerals, ***via intravenous or injectable routes of administration***, in the treatment of their patients. **Passed the Senate on Friday March 17 and is on the Governor's desk.**

H 191 "Pharmacist prescribing authority" This bill expands the types of drugs /situations in which a Pharmacist may "prescribe" a drug. This bill allows the Board of Pharmacy to promulgate rules under which a Pharmacist can prescribe "drugs, drug categories, or devices. **This bill passed the House unanimously, passed the Senate 33-1 and is to the Governor.**

H81 "Health Care J-1 Visa Waiver Program" This proposal amends the current Idaho Conrad J-1 Visa Waiver Program (J-1 Program) that allows qualifying Idaho healthcare organizations to apply for the placement of a foreign trained physician in federally-designated shortage areas as a recruitment option of last resort. **Passed the Senate last week 33-0 and is to the Governor.**

H 82 "Sales Tax Exemptions for Free Medical Clinics" This legislation would provide sales and use tax exemption for sales to or purchased by the ten designated free medical clinics in the state. This bill passed the House with only 3 NO votes and **has not received a hearing in the Senate Local Government and Taxation Committee, which at this point likely means it is dead for the year.**

H 115 "Interstate Medical Licensure Compact" This legislation adds language authorizing the Board of Medicine to obtain criminal background check information when qualifying physicians for the Interstate Medical Licensure Compact. The compact provides expedited licensure for physicians. **Passed Senate 33-0 this week and is to the Governor.**

H128 "Medicaid, Agreements for Services" The purpose is to improve health care for Medicaid participants at a reduced cost to Idaho taxpayers. **Passed Senate this week 29-3 and is to the Governor.**

Defeated Legislation or those that will not be moving forward:

S1058 "Telehealth access, cost coverage" This legislation would allow for costs of telehealth services to be covered in the same manner and to the same extent as if the services were delivered in person. This bill is the idea of Dr. Scott Dunn of Sandpoint and Senator Shawn Keough is sponsoring it. **This bill was defeated on the Senate floor 10-24.**

H 91 "Immunization Registry" Requires all providers who immunize patients in Idaho to enter all immunizations, with the exception of adult influenza vaccines, into the Idaho Immunization Reminder Information System (IRIS). This bill is from the Idaho Medical Association. **The bill failed on the House floor 26-44-0.**

S1106 This bill would raise the legal age of use/possession/acquiring of **tobacco to 21**. Twenty people signed up to testify on this bill Friday morning. Among those about $\frac{2}{3}$ were in support and $\frac{1}{3}$ was in opposition. After a long hearing **the committee voted to hold the bill in committee, essentially killing the bill for the year.**

S1131 "Relating to Abortion" -- This bill would require the Department of Health and Welfare and providers to tell patients where they can get information on how to reverse a medication abortion. It would also require health care providers to provide patients with a list of locations and clinics that will provide ultrasounds prior to the abortion. The bill is being printed and is assigned to the Senate St Affairs Committee where it **is unlikely to get a hearing.**

H161 "Medical Lab Science Practitioners" Introduced on Monday, February 13th, the purpose of this bill is to provide licensure for the practice of Medical Laboratory Science. It ensures that those working in medical laboratories are qualified to perform laboratory testing and all activities related to the analysis of materials derived from the human body. **Still awaiting hearing** in House Health and Welfare and is unlikely to get a hearing.

Legislation Signed into Law:

S1060 "Health care/cytomegalovirus" The purpose of the bill is to provides funding for the Department of Health and Welfare to develop and disseminate educational material ensure the women of Idaho and their doctors have access to the most accurate and up-to-date information available regarding cytomegalovirus (CMV) prevention, infection, and treatment. Introduced in Senate Health and Welfare Committee on February 9. Passed the Senate 31-3, passed House 39-10 and has been signed by the Governor. **It is now Law.**

S1081: "Immunization Assessment Board" This bill resets the Sunset date for the Immunization Assessment Board from 2017 to July 1, 2019. Passed the Senate 29-6-0, passed the House 45-25 signed by the Governor. **It is now Law.**

H004 to add the **prescribing of tobacco cessation products** to the practice of pharmacy has now unanimously passed both houses and **has been signed into law by the governor.**

H005 to enhance the use of the "**Prescription Monitoring Program**" for controlled substances and allow greater access to the database by pharmacists. This bill also passed both houses unanimously and **has been signed into law by the governor.**

H006 "Controlled Substances" This bill aligns Idaho law with recent DEA changes, to provide conformance DEA schedules. Two additional products have been added to the schedule: eluxadoline and brivaracetam. **Was signed into law by the governor on February 13th.**

If you have questions regarding a piece of legislation or you would like the IAFP to monitor specific legislation that is not currently being monitored, please contact Neva Santos, IAFP Executive Director at Idahoafp@aol.com or (208) 323-1156.

Don't miss the 69th Annual Conference of the Idaho Academy of Family Physicians on May 19-21, 2017 and earn up to 13 CME Credits. Spring in McCall blends the perfect mix of winter and summer. Central Idaho is one of the best hiking and mountain biking destinations in the West. McCall is a year-round resort community in Idaho's west central mountains. It embraces the southern shore of the magnificent Payette Lake. The recreational activities abound. Take in the

amazing views, enjoy shopping, arts & culture, music & nightlife, hiking and biking, rafting, jet boating, fishing, or off-road riding and more... One look at the towering pines, flowing aspens, picturesque meadows and dramatic snow-capped mountains and you will realize you could only be in breathtaking Idaho.

Log on to the IAFP Web page: <http://idahofamilyphysicians.org/conference/> for more information about activities and events.

Cheers,