

2024 Legislative Session – Week 3 Report

The third week of the legislative session was slower in pace compared to the first two weeks, but several storylines from the start of the session continue to play out. First, and most important, there is still no resolution to the various issues that JFAC has been grappling with, including the maintenance budgets passed by JFAC in the first week of the session. In a normal year, JFAC-passed budgets would have already received a bill number and been directed to either the House or Senate for a vote. As of Friday, no appropriations bills have moved forward.

Behind the scenes, many JFAC members have expressed concerns over the contents of the maintenance budgets versus what will be considered in the “line item” budgets. In an attempt to chart a path forward, House and Senate leadership have met over the past week, but a resolution has not yet been announced. JFAC cancelled their budget-setting meeting on Friday, and the stalemate has created some uncertainty with how budgets will be set this session.

The policy committee agendas were filled with administrative rules review and the occasional bill introduction. While rules review is typically one of the more mundane duties of the Legislature, changes to Idaho statute during the last legislative session are making the process more interesting. In one instance this week, the House Health and Welfare committee chose not to approve administrative rules pertaining to Skilled Nursing Facilities, which had been previously approved in the Senate. The legislation passed last session doesn’t speak to what the Legislature should do if one body approves a set of rules and one body does not. After some deliberation by the House Health & Welfare Chairman, the rules are back in front of the committee on Monday, likely for approval.

One of the more interesting hearings this week was a continuation from the previous Friday that dealt with the issue of mandatory minimums for fentanyl trafficking. The two-day hearing was a marathon of testimony from law enforcement, prosecutors, and civil liberty organizations, all trying to sway members of the House Judiciary Committee. In the end, the Committee voted 16-2 to send the legislation to the House floor without recommendation. The intensity of the lobbying effort was apparently elevated, causing the Secretary of State and the Attorney General to issue a letter to the lobbying corps warning lobbyists not to threaten nor attempt to bribe legislators ahead of a vote. It is the first time we have seen such a letter.

In terms of healthcare bills, H400 regarding “Preborn children” had a hearing on Monday during which the testimony was mostly opposed. After testimony and a lengthy question and answer session with a reproductive physician, the Chairman decided to hold the bill in Committee at the call of the Chair. This bill is likely not moving forward this session. Rep. Dori Healey introduced a second bill, H423, to reestablish the Maternal Mortality Review Committee under IDHW once again, but Rep. Blanksma continues to work on revising her own MMRC legislation. Finally, Rep. Redman introduced H419, legislation that would effectively repeal Medicaid expansion. Rep. Redman is receiving a great deal of feedback on this bill, and it’s likely that a new, pared-down version will emerge.

2024 Legislative Session Bill Tracking

Bill Number	Bill Introduction	Description
H400 DEAD	Introduced 1/16; Referred to House State Affairs; Held in Committee 1/22	Preborn children (Young, Skaug) Replaces the term 'fetus' or 'fetus and embryo' with the term 'preborn child' or 'child.'
H381 DEAD	Introduced 1/9; Referred to House State Affairs	Preborn children (Young, Skaug) Amends existing law to redesignate the terms "fetus" and "stillborn fetus" to "preborn child" and "stillborn child."
H383	Introduced 1/10; Referred to House Business	Medical liens (Skaug, Gannon) Extending the time for filing a medical lien until after a citizen's health insurance has had the chance to process the medical costs ensuring that medical providers get paid a fair value for their services. This also modernizes the 1941 medical lien statute to make it consistent with recent Idaho medical billing statutes. This helps patients by making sure that those who have purchased medical insurance receive the benefits they have purchased while still protecting medical providers.
H392	Introduced 1/15; Referred to House Health & Welfare	Health districts, powers, duties (Gallagher, Lenney) Limits the powers and duties of the district boards of health. It narrows their scope to administer and enforce only necessary and reasonable health laws and regulations, eliminating the broader mandate to do "all things" for the preservation and protection of public health, including preventative health measures. This change reinforces the focused use of authority and resources to ensure the boards operate within a specified framework.
H396	Introduced 1/16; Referred to House State Affairs	Mask mandates, prohibition (Gallagher, Lenney) Prevents the State of Idaho, its political subdivisions, or any state officers from mandating the use of face masks, face shields, or other face coverings as a means to prevent or slow the spread of a contagious or infectious disease.
H397	Introduced 1/16; Referred to House Health & Welfare	Immunization registry, opt in (Blanksma) This legislation amends Section 39-4803, Idaho Code, pertaining to the voluntary registry of the immunization status of Idaho children, which is kept by the Department of Health and Welfare, to be an opt-in, rather than an opt-out, registry.

H398	Introduced 1/16; Referred to House Health & Welfare	Medicaid, legislative approval (Blanksma) Requires legislative approval of waivers and state plan amendments. This prohibits the state Department of Health and Welfare from seeking or implementing a Medicaid State Plan or a waiver pursuant to Section 1115 or 1915 of the Social Security Act without legislative approval provided in statute. This legislation does not affect pre-existing state plan amendment or waiver programs implemented prior to this legislation taking effect.
H399	Introduced 1/16; Referred to House Health & Welfare; New bill coming.	Maternal mortality, board, report (Blanksma) This legislation amends Section 54-2806, Idaho Code, to authorize the Board of Medicine to collect and review data and information concerning maternal mortality in the state of Idaho. The Board of Medicine shall have the power throughout the state to require production of needed information and will provide an annual summary report to the Legislature by January 31st of each year.
S1227	Introduced 1/16; Referred to Senate State Affairs	Patient medical rights (Foreman) Establishes health rights under the law for medical patients, their family members, and legal guardians. This legislation will help ensure fairness of treatment, enhance patient awareness of medical treatment options, and install patient safeguards with respect to requirements for informed consent and the use of experimental drugs. This legislation will place necessary and expected restrictions on state and local government as to governmental authority with respect to the advertising of certain types of medicines or vaccines and the imposition of personal restrictions on Idahoans relating to widespread medical situations.
S1229	Introduced 1/16; Referred to Senate State Affairs	Abortion, exceptions (Foreman) Disallows the affirmative defense to the felony of criminal abortion in the case of incest or rape.
SCR110	Introduced 1/16; Referred to Senate State Affairs	COVID-19, study committee (Foreman) Authorizes the Legislative Council to appoint a committee consisting of Senate and House members to undertake a study of the State of Idaho's response to the Covid-19 pandemic.
S1234	Introduced 1/16; Referred to Senate Commerce & Human Resources; Hearing on 2/1.	Contraception, six months (Wintrow) Requires any health benefit plan issued or renewed on or after 1/1/25, which covers contraceptives approved by the FDA, to provide reimbursement for up to a six-

		month refill supply of prescribed contraceptives obtained at one time by the enrollee.
H418	Introduced 1/22; Referred to House Health & Welfare	Assistant physicians (Redman, Zuiderveld) Expands Idaho’s bridge physician licensure program by creating a direct pathway for bridge physicians to become a licensed general practitioner without entering a residency program. This is designed to alleviate the physician shortage by allowing smaller healthcare providers to train the physician workforce where they are needed. This legislation renames bridge physicians as “assistant physicians.” After completing a minimum of three years as an assistant physician and successfully passing the final step of the United States Medical Licensing Examination, a candidate may apply for an unrestricted license to practice as a general practitioner.
H419	Introduced 1/22; Referred to House Health & Welfare	Medicaid expansion, conditions (Redman, Bjerke) Requires that several program integrity and cost-saving measures be implemented in Medicaid as a condition for the continued expansion of eligibility to able-bodied adults under the Affordable Care Act for the purpose of prioritizing Medicaid resources for the truly needy, moving able-bodied Medicaid enrollees into affordable and private coverage with greater access to healthcare, and reducing overall program spending. These conditions include a work requirement and enrollment caps for able-bodied adults and a requirement that the improper payment rate in Medicaid be reduced to 5 percent or less.
H421	Introduced 1/22; Referred to House Jud & Rules	Sex, gender, definitions, rules (Young) Provides a legal definition for male and female and related terms, and providing consistency across state statute.
H423	Introduced 1/23; Referred to House Health & Welfare	Maternal mortality committee (Healey, Lee) Amends Idaho Code 39 by adding new Chapter 96, which will establish a Maternity Mortality Review Committee. This committee will collect and review data concerning maternal mortality in the state of Idaho and provide an annual report June 30th of each year. This legislation will sunset in July 1, 2030.

Tracked through 1/26/24
H434 / S1252