

2024 Legislative Session – Week 11 Report

Week 11 of the Idaho Legislature resulted in big wins for the Governor as well as those who want to see this session come to a close. On Thursday, the House took up the appropriations bill for the Idaho Launch Program, Governor Little's signature policy victory from the last legislative session. At the same time, across the rotunda, the Senate began debate on this year's big policy initiative, the roughly \$2 billion school facilities bonding proposal.

Both bills passed with relatively comfortable margins in a slightly anticlimactic fashion, though there was strong debate on both sides of the Capitol for and against each proposal. In practical terms, this removes the highest barriers to finishing the work this session. That said, a few items will have to clear the Legislature before they can adjourn.

A few weeks ago, we discussed the issues surrounding the Idaho Transportation Department's budget and the effort by JFAC to prevent the sale of its headquarters building on State St, just a few miles from the Capitol. Last week, the House narrowly passed this budget bill by one vote, setting the stage for the Senate to debate the bill this week, where it will likely face even more opposition. The budget bill contained language that revokes the sale of the headquarters building. The obvious problem for the Legislature is that even if they pass the budget, the Governor will likely veto this appropriations bill, sending it back to the House and Senate with likely veto-proof margins (It requires a two-thirds vote to override a veto).

Speaking of appropriations bills that may be killed this week, we will see more budgets for Health and Welfare, universities, and the Department of Education on the calendars as well. We suspect there will be one or two temporary casualties as legislators prepare to return home to campaign in a few weeks. It's not uncommon for the Legislature to kill an appropriations bill or two for political purposes before the budget ultimately passes with relatively minor changes.

Finally, and maybe the "going home" bill for the session, the Legislature will likely take action to limit the University of Idaho's ability to complete the University of Phoenix purchase. University of Phoenix's net profits are slightly over \$200 million, and U of I is proposing to pay \$685 million for the purpose. For context, Purdue University set up a similar online university (Purdue Global) and purchased Kaplan University. As a result, Purdue hasn't raised tuition in 13 years.

If all goes well, we expect the Legislature to wrap up their work by this Friday, March 29th. Next week, they will most likely come back for a day or so in case they need to attempt a veto override before adjourning sine die.

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."
H501a	Introduced 2/8; Referred to House Business; Sent to General Orders 2/19; Amended 2/27; Passed House 3/1; Referred to Senate Commerce; Out of Committee 3/19; Passed Senate 3/22.	Medical liens (Skaug, Gannon) Helps patients by making sure that those who have purchased private medical insurance receive the benefits they have purchased. It still protects medical providers allowing for liens in injury cases for the fair value of the services. It gives the providers an additional time period for filing a medical lien after a citizen's health insurance has processed the medical bills to ensure that medical providers get paid all of a fair negotiated value for their services. It prevents providers from overbilling and imposing inflated charges on the liability insurance companies when private health insurance is available to pay.
H383 DEAD	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.
H525	Introduced 2/8; Referred to House Health & Welfare; Out of Committee 2/20; Passed House 2/26; Referred to Senate Health & Welfare.	Health boards, 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. This change reinforces the focused use

<p>H392 DEAD</p>	<p>Introduced 1/15; Referred to House Health & Welfare</p>	<p>of authority and resources to ensure the boards operate within a specified framework.</p> <p>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.</p>
<p>H493</p> <p>H396 DEAD</p>	<p>Introduced 2/7; Referred to House State Affairs; Out of Committee 2/14; Passed House 2/16; Referred to Senate State Affairs.</p> <p>Introduced 1/16; Referred to House State Affairs.</p>	<p>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 to prevent or slow the spread of a contagious or infectious disease; it also provides relevant definitions.</p> <p>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.</p>
<p>H397</p> <p>Opposition Action Tool</p>	<p>Introduced 1/16; Referred to House Health & Welfare; Out of Committee 2/5; Passed House 2/9; Referred to Senate Health & Welfare.</p>	<p>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.</p>
<p>H398a</p>	<p>Introduced 1/16; Referred to House Health & Welfare; Out of Committee 2/19; Passed House 2/22; Referred to Senate Health & Welfare; Out of Committee 3/18 to 14th Order; Amended 3/21; Senate 3rd Reading.</p>	<p>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.</p>
<p>H399 LAW</p>	<p>Introduced 1/16; Referred to House Health & Welfare; Out of Committee 2/5; Passed House</p>	<p>Maternal mortality, board, report (Blanksma) This legislation amends Section 54-2806, Idaho Code, to authorize the Board of Medicine to collect and</p>

	2/12; Referred to Senate Health & Welfare; Out of Committee 2/21; Passed Senate 3/13; Signed by Governor 3/18.	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 DEAD	Introduced 1/16; Referred to Senate State Affairs; Held in Committee 2/23.	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 LAW	Introduced 1/16; Referred to Senate Commerce & Human Resources; Out of Committee 2/1; Passed Senate 2/8; Referred to House Business; Out of Committee Monday 2/19; Passed House 3/11; Delivered to Governor 3/14; Signed by Governor 3/18.	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 DEAD	Introduced 1/22; Referred to House Health & Welfare; Held in Committee 2/1.	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; Out of Committee 1/31; Passed House 2/7; Referred to Senate State Affairs.	Sex, gender, definitions, rules (Young) Provides a legal definition for male and female and related terms, and providing consistency across state statute.
H423 DEAD	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.
H435 LAW	Introduced 1/29; Referred to House Health & Welfare; Out of Committee 2/6; Passed House 2/12; Referred to Senate Health & Welfare; Out of Committee 2/20; Passed Senate 3/5; Signed by Governor 3/11.	Controlled substances, schedule I (IDOPL, Erickson) Updates Schedule I of the Idaho Controlled Substance Act with the addition of certain synthetic stimulants and depressants that are not approved for medical use and are not formulated or available for clinical use.
H436 LAW	Introduced 1/29; Referred to House Health & Welfare; Out of Committee 2/15; Passed House 2/20; Referred to Senate Health & Welfare; Out of Committee 2/28; Passed Senate 3/12;	Allied health professionals (IDOPL, Redman) The Idaho Board of Medicine currently governs the practice of dietetics, athletic training, respiratory therapy, and naturopathic medicine through separate advisory boards for each practice. This bill restructures those advisory boards into a single allied health

	Delivered to Governor 3/14; Signed by Governor 3/18.	advisory board to restrain costs and provide more efficient governance.
<u>H437</u> LAW	Introduced 1/29; Referred to House Health & Welfare; Out of Committee 2/15; Passed House 2/20; Referred to Senate Health & Welfare; Out of Committee 2/28; Passed Senate 3/12; Delivered to Governor 3/14; Signed by Governor 3/18.	Midwifery licensure (IDOPL, Healey) Consolidates the regulation of licensed midwives under the Board of Nursing for practical and financial reasons. The Board of Midwifery is operating at a deficit, and it is highly unlikely that it will ever be financially solvent. The Board of Nursing has sufficient resources to absorb the Board of Midwifery and will be able to effectively regulate the midwifery profession as it currently regulates certified nurse midwives. To account for the consolidation, we have altered the board's composition.
<u>H438</u>	Introduced 1/29; Referred to House Health & Welfare; Out of Committee 2/18; Passed House 2/22; Referred to Senate Health & Welfare.	Immunizations, exceptions (Healey) Currently, many school districts send notices to parents of school aged children regarding Idaho Code 39-4801. The purpose of this language is to require schools to send communication including Idaho Code 39-4804 any time they send Idaho Code 39-4801.
<u>H439</u> LAW	Introduced 1/29; Referred to House Health & Welfare; Out of Committee 2/15; Passed House 2/21; Referred to Senate Health & Welfare; Out of Committee 3/4; Passed Senate 3/13; Delivered to Governor 3/15; Signed by Governor 3/18.	Immunization assessment board (Healey) Resets the sunset date for the Board from July 1, 2024 to July 1, 2029.
<u>H440</u>	Introduced 1/30; Referred to House Jud & Rules.	Smoking products, minors, penalties (Raymond) Places selling vape products on par with selling other harmful products to minors.
<u>H458</u> LAW	Out of JFAC 2/1; Passed House 2/9; Passed Senate 2/27; Signed by Governor 3/5.	Approp, state edu bd, 2025 maint FY 2025 Maintenance Appropriation for the State Board of Education. Includes appropriations to Health Education Programs.
<u>H668</u>	Introduced 2/27; Referred to House Jud & Rules; Out of Committee 3/7; Passed House 3/11; Referred to Senate State Affairs; Out of Committee 3/14; Passed Senate 3/22.	No public funds, gender transition (Young, Skaug) Ensures taxpayer dollars are not used to provide medical treatment or surgeries for the purpose of changing the appearance of a person's sex in a way that is not consistent with their biological sex; that such expenditures are not tax deductible; that Idaho medicaid shall not reimburse or provide coverage for such expenditures; stipulating that physicians employed by tax-payer funded entities shall not provide such treatments or surgeries in the course and scope of their government service; stipulating that

<p><u>H520</u> DEAD</p>	<p>Introduced 2/8; Referred to House Jud & Rules; Out of Committee 2/22; Returned to Committee 2/27</p>	<p>government facilities may not be used for the provision of such treatments or surgeries; These medical and surgical interventions can cause irreversible physical alterations; and some render the patient sterile or with lifelong sexual dysfunction, while others mutilate healthy body organs. This legislation also provides for exemptions for the funding of medically necessary uses of these drugs and procedures.</p> <p>Gender transition, public funds (Young, Skaug)</p>
<p><u>H603</u></p> <p><u>H463</u> DEAD</p>	<p>Introduced 2/20; Referred to House State Affairs; Out of Committee 3/6; Passed House 3/11; Referred to Senate State Affairs; Out of Committee 3/21 to 14th Order.</p> <p>Introduced 2/1; Referred to House State Affairs.</p>	<p>State agencies, donations (Monks) Prohibits state departments from donating to and or sponsoring non-governmental organizations unless specifically required by law or unless previously approved by the Governor. This legislation also requires DFM to report all donations and sponsorships to the legislature.</p> <p>State agencies, donations (Monks)</p>
<p><u>S1268</u> LAW</p>	<p>Introduced 2/1; Out of JFAC 2/5; Passed Senate 2/9; Passed House 2/15; Signed by Governor 2/27.</p>	<p>Approp, HHS, 2025 maint (Bjerke) FY 2025 Maintenance Appropriation for Health and Human Services. This bill includes appropriations to the Department of Health and Welfare and the State Independent Living Council. The appropriation includes standard adjustments for benefit costs, inflationary adjustments, statewide cost allocation, and change in employee compensation. Finally, this maintenance does not include a maintenance appropriation for the Indirect Support Services Division in the Department of Health and Welfare.</p>
<p><u>H666</u></p> <p><u>H476</u> DEAD</p>	<p>Introduced 2/27; Referred to House State Affairs; Out of Committee 3/5; Passed House 3/8; Referred to Senate State Affairs; Out of Committee 3/14; Passed Senate 3/20; To Governor.</p> <p>Introduced 2/5; Referred to House State Affairs.</p>	<p>Sex education, abortion (Skaug, Ripley) Prohibits any individual or organization, that is a provider of abortion, from furnishing any materials or instruction relating to sex education curricula.</p> <p>Abortion, sex ed curricula (Skaug)</p>

H489	Introduced 2/6; Referred to House Health & Welfare; Out of Committee 2/20; Passed House 2/26; Referred to Senate Health & Welfare; Out of Committee 3/18; Senate 3 rd Reading.	Essential caregivers, visitation (Young) Ensures that immediate family members are automatically considered essential caregivers; clarifies who may give or withdraw essential care giver status consistent with Idaho code regarding surrogate-decision makers; and resolves a conflict when an individual is in the custody of a peace officer or a state correctional facility.
H490 LAW	Introduced 2/6; Referred to House Health & Welfare; Out of Committee 2/20; Passed House 2/28; Referred to Senate Commerce; Out of Committee 3/7; Passed Senate 3/14; Delivered to Governor 3/19; Signed by Governor 3/14.	Criminal background checks (IDOPL, Redman) Allows the division administrator, unless otherwise prohibited by law or rule, to conduct fingerprint criminal background checks as a requirement for licensure and registration, revises language concerning fingerprinting to align the procedures employed by the various boards and commissions governed by the division of occupational and professional licenses, and simplifies the fingerprinting process for applicants.
H499 DEAD	Introduced 2/7; Referred to House Health & Welfare; Out of Committee 2/19; House 3 rd Reading; Returned to Committee 2/23.	Idaho dietary supplement act (Gallagher) Ensures that the Citizens of Idaho and health practitioners retain access to vitamins and supplements under current regulations.
S1287 DEAD	Introduced 2/7; Referred to Senate Health & Welfare; Held in Committee 2/21.	Health orgs, requirements (Nichols) Prohibits jurisdiction of the World Health Organization in the State of Idaho.
S1288 DEAD	Introduced 2/7; Referred to Senate Health & Welfare; Out of Committee 2/27; Passed Senate 3/1; Referred to House Health & Welfare; Held in Committee 3/13.	Youth athletes, chiropractic phys (Bjerke, Redman) Adds an Idaho licensed chiropractic physician to the list of qualified health professionals permitted to return a youth athlete to participation in a sport after healing from a diagnosed concussion.
H505 LAW	Introduced 2/8; Referred to House Business; Out of Committee 2/19; Passed House 2/26; Referred to Senate Commerce; Out of Committee 3/5; Passed Senate 3/13; Delivered to Governor 3/15; Signed by Governor 3/18.	Occupational license, renewal (Ehlers, IDOPL) Updates all licensure renewals under the Division of Occupational and Professional Licenses to a biennial renewal cycle, with an expiration date at the licensee's birth month. This will allow for consistency in renewal cycles throughout the Division.
H518	Introduced 2/8; Referred to House Jud & Rules; Out of Committee 2/16; Passed House 2/21; Referred to Senate Jud & Rules; Out of Committee 3/6;	Medicaid fraud, penalties (Cornilles) Sets the punishment for provider fraud at a maximum of 15 years, allow for the recovery of prosecution and investigation costs, authorize the Attorney General or his designee to sign subpoenas, permit the Medicaid Fraud Control Unit to investigate a wider range of

	Passed Senate 3/20; To Governor.	provider fraud so long as it has a nexus to Medicaid, and clean up the statutory language as to the elements of the crime. This bring the provider fraud statute more in line with Idaho's insurance fraud statute and federal regulations and to enable Idaho's Medicaid Fraud Control Unit to operate more efficiently.
H684 DEAD	Introduced 2/29; Referred to House Education; Out of Committee 3/1; Passed House 3/5; Referred to Senate Education; Held in Committee 3/18.	Behavioral telehealth, schools (Healey) Provides increased access to behavioral health in public school or charter schools. This outlines the safety and security to provide mental health services in a secure and confidential manner via telehealth by mental health professionals authorized to provide these services in the state of Idaho.
H579 DEAD	Introduced 2/15; Referred to House Education.	Behavioral telehealth, schools (Healey)
H524 DEAD	Introduced 2/8; Referred to House Health & Welfare.	Telehealth, behavioral, schools (Healey)
H526	Introduced 2/8; Referred to House Health & Welfare; Out of Committee 2/27; Passed House 3/1; Referred to Senate Health & Welfare; Out of Committee 3/13; Passed Senate 3/18; Delivered to Governor 3/21.	Pelvic exams, unconscious patients (Green) Prohibits pelvic examination of anesthetized or unconscious patients with exceptions for specific occurrences.
H527 LAW	Introduced 2/8; Referred to House Health & Welfare; Out of Committee 2/19; Passed House 2/26; Referred to Senate Health & Welfare; Out of Committee 3/5; Passed Senate 3/13; Delivered to Governor 3/18; Signed by Governor 3/18.	Pharmacy, practice (Redman) Pertains to the Board of Pharmacy and will take the good work the Board has done over the last 10 years and will codify it in Statute. This will give stability to the changes that have helped to expand access in the Pharmacy industry in Idaho.
H542a	Introduced 2/12; Referred to House Health & Welfare; Out of Committee 2/21; Passed House 2/28; Referred to Senate Health & Welfare; Out of Committee 3/7; Senate 3 rd Reading; Referred to 14 th Order 3/14; Amended 3/19; Passed Senate 3/21; House Concurred 3/22.	International physicians (Wheeler) Expands Idaho's licensure program for internationally-trained physicians. It creates a pathway to licensure for high-quality, international physicians who have attended a recognized medical school and have already completed a residency or other post-graduate training. To qualify, physicians must have a job offer from an Idaho healthcare provider and must have practiced abroad or have experience in the U.S.

		<p>medical system. After three years of successful practice under a provisional license, an international physician will be eligible to apply for a full license.</p>
<p>S1329 LAW</p>	<p>Introduced 2/12; Referred to Senate Jud & Rules; Out of Committee 2/21; Passed Senate 2/27; Referred to House Jud & Rules; Out of Committee 3/6; Passed House 3/14; Delivered to Governor 3/15; Signed by Governor 3/21.</p>	<p>Parental rights, medical decisions (Anthon) The Parents' Rights in Medical Decision-making Act ensures that children, who often lack maturity and make choices without considering either immediate or long-term consequences, are protected by the informed decision-making of their parents, who possess the most knowledge and are in the best position to ensure that their children receive adequate medical attention. The rights secured by this Act flow out of the rights recognized by the Idaho Parental Rights Act, Idaho Code Ann. §§ 32-1010 through -1014, which are "rooted in the due process of law guaranteed pursuant to Section 13, Article I, of the constitution of the state of Idaho." This Act clarifies that consent for the furnishing of health care services to any person who is an unemancipated minor must be given or refused by the parent of such person. The Act further declares that a parent has a right to access health information relating to the parent's minor child.</p>
<p>S1351 DEAD</p>	<p>Introduced 2/12; Referred to Senate Health & Welfare; Out of Committee 2/20; Passed Senate 3/1; Referred to House Health & Welfare; Held in Committee 3/13.</p>	<p>Health records, research, stats (Carlson) Allows examination of Public Health Records, concentrating on death, health, and vaccine data for statistical analysis of vaccine-related outcomes. By promoting transparency and evidence-based decision making, the initiative aims to enhance public understanding of vaccine safety, contributing to a healthier society.</p>
<p>S1352 LAW</p>	<p>Introduced 2/12; Referred to Senate Health & Welfare; Out of Committee 2/20; Passed Senate 2/28; Referred to House Health & Welfare; Out of Committee 3/13; Passed House 3/18; Delivered to Governor 3/19; Signed by Governor 3/21.</p>	<p>Counselors, therapists, principles (Bjerke, Young) Protects counselors in their fundamental rights of conscience by allowing them to decline to provide services in support of objectives which violate their sincerely held principles without fear of loss of licensure or civil or criminal action. It also provides for declaratory or injunctive relief.</p>
<p>S1395a</p>	<p>Introduced 3/4; Referred to Senate Health & Welfare; Out of Committee 3/7; Senate 3rd Reading; Referred to 14th Order 3/13; Amended 3/21; Passed Senate 3/22; To House.</p>	<p>Medical records, costs (Ricks) Amends Title 39, Idaho Code, to establish provisions regarding the costs for requesting copies of medical records. It provides an exception for social security act benefits and defines a fulfillment timeline. This legislation is intended to prevent price gouging when a patient requests a copy of their medical records.</p>

<p><u>S1353</u> DEAD</p>	<p>Introduced 2/12; Referred to Senate Health & Welfare.</p>	<p>Medical records, costs (Ricks)</p>
<p><u>S1354a</u> <i>Trailer bill coming</i></p>	<p>Introduced 2/12; Referred to Senate Health & Welfare; Out of Committee 2/19; Referred to 14th Order 2/27; Amended 3/7; Passed Senate 3/11; Referred to House Health & Welfare; Out of Committee 3/19; House 3rd Reading.</p>	<p>Electroconvulsive treatment, age (Lee) Idaho law currently allows for electroconvulsive therapy (ECT) for adults through informed consent to treatment and for children with a court order. ECT has been demonstrated to be effective in treating severe depression and other psychological disorders that are resistant to pharmaceutical treatment and other interventions. This legislation sets a minimum age of twelve (12) years old for ECT and provides parents with the ability to provide informed consent to treatment.</p>
<p><u>S1355</u> LAW</p>	<p>Introduced 2/12; Referred to Senate Health & Welfare; Out of Committee 2/19; Passed Senate 2/27; Referred to House Health & Welfare; Out of Committee 3/11; Passed House 3/14; Delivered to Governor 3/19; Signed by Governor 3/21.</p>	<p>Medicaid legislative review panel (Van Orden) Adds a new section to establish a Medicaid Legislative Review Panel. The panel will be responsible for reviewing contracts related to Medicaid and will be comprised of both House and Senate members.</p>
<p><u>H626</u></p>	<p>Introduced 2/22; Referred to House State Affairs; Out of Committee 3/6; Passed House 3/11; Referred to Senate State Affairs; Out of Committee 3/15; Senate 3rd Reading.</p>	<p>Admin procedure, scope of review (Moyle, Barbieri) Requires courts reviewing Administrative Rules to look to interpret the meaning and effect of the rule de novo (without consideration of previous judicial or agency interpretations). Further, reviewing courts must rule, where an interpretation is in relative doubt, to limit agency power in favor of individual liberty.</p>
<p><u>H562</u> DEAD</p>	<p>Introduced 2/13; Referred to House State Affairs.</p>	<p>Scope of review, agency rules (Moyle, Barbieri)</p>
<p><u>H563</u></p>	<p>Introduced 2/13; Referred to House State Affairs; Out of Committee 2/19; Passed House 2/26; Referred to Senate State Affairs; Out of Committee 3/18; Senate 3rd Reading.</p>	<p>Admin rules (Moyle, Barbieri) Makes three substantive changes to the Idaho Administrative Procedure Act. Firstly, it narrows the extremely broad language concerning Temporary Rules; Secondly, it addresses legislative oversight of material incorporated by reference in administrative rules, and thirdly, prior to the 8 year review, the schedule of which is to be established by the administrative rules coordinator, each agency is required to legitimize the reasoning and necessity of each rule chapter being reviewed.</p>

<p>H577</p>	<p>Introduced 2/15; Referred to House Health & Welfare; Out of Committee 2/27; Passed House 2/29; Referred to Senate Health & Welfare; Out of Committee 3/11; Passed Senate 3/19; To Governor.</p>	<p>Medicaid, directed payments (Petzke) Authorizes the Department of Health and Welfare to seek approval from the Centers for Medicare and Medicaid Services (CMS) to establish a program for state directed payments under Idaho's Managed Care statute. Directed payments are the mechanism that states with managed care plans use to provide supplemental payments to hospitals to offset losses associated with providing services to Medicaid patients. The Idaho Behavioral Health Plan is the first time that hospitals have been contracted through a managed care program.</p>
<p>HCR27 ADOPTED</p>	<p>Introduced 2/15; Referred to House Health & Welfare; Out of Committee 2/26; Adopted by House 3/1; Referred to Senate Health & Welfare; Out of Committee 3/14; Adopted by Senate 3/18; Delivered to Secretary of State 3/21.</p>	<p>PANDAS/PANS awareness (Mathias, Dixon) Some insurers in Idaho cover medically necessary IVIG treatment for children who suffer from PANDAS/PANS. Some, however, deny this coverage for potentially outdated reasons; this failure to cover this medically necessary treatment is leading to brain, behavioral and other health problems for some of the approximately 400 Idaho children who need and can benefit from IVIG treatment. Because some insurers cover IVIG treatment and some don't, market distortions are increasingly placing the coverage burden on a subset of providers. This is leading to market failure and one that is jeopardizing the health and safety of a few hundred Idaho children. This resolution does two things. First, it calls for the Department of Insurance to work with leaders of the private insurance industry to address this market failure by ensuring needed coverage throughout the market and reporting back to the legislature before next session. Second, it declares October 9 of this year to be PANDAS/PANS Awareness Day in Idaho.</p>
<p>H596a</p>	<p>Introduced 2/19; Referred to House Health & Welfare; Out of Committee 2/27; Passed House 3/6; Referred to Senate Health & Welfare; Out of Committee 3/14 to 14th Order; Amended 3/19; Passed Senate 3/19; To House; House Health & Welfare Committee Concurred 3/21; House Concurred 3/21; House 3rd Reading.</p>	<p>Pharmacy benefit managers (Redman, Cook) Pharmacy Benefit Managers (PBM) are third party administrators under contract by health/prescription plans, employers and government entities to manage prescription drug programs for health plan recipients. PBMs administer the prescription drug benefit for nearly every public and private health plan in the United States. PBMs decide which pharmacies are included in a prescription drug plan's network and how much the pharmacy will be paid for dispensing services. The purpose of this legislation is to establish parameters and standards for how Pharmacy Benefit Managers operate in Idaho, requiring fairness,</p>

		transparency and free market operations; things all other businesses in Idaho must operate under, but on which Idaho's law remains silent for PBMs. This legislation adds new definitions; lays out requirements that make contracts with pharmacies transparent and fair; requires PBMs to provide transparent pricing on drugs; and requires PBMs to report to the Department of Insurance in a transparent way. PBMs already operate under these provisions in other states; these additions will help protect Idahoans' health care dollars as well.
H597	Introduced 2/19; Referred to House Health & Welfare; Out of Committee 2/29; Passed House 3/4; Referred to Senate Health & Welfare; Out of Committee 3/18; Senate 3 rd Reading.	Immunizations, exceptions (Zuiderveld, Gallagher) This legislation is intended to address two issues. The first is the 12th grade immunization requirement for which there is no exemption when a student is age 18 during their 12th grade school year. The requirement can be found in IDAPA 16.02.15.100.06.c. The second is to prevent colleges and universities in the state of Idaho from infringing on the privacy rights of students by requiring vaccination status or the disclosure of confidential medical information as conditions of enrollment or attendance. The exemptions currently described in §39-4802, §39-1118, and IDAPA 16.02.15.110 apply only to minor children and require parent or legal guardian signature.
H616	Introduced 2/21; Referred to House Health & Welfare; Out of Committee 2/29; Passed House 3/4; Referred to Senate Health & Welfare.	Child, mental health, disclosures (Young) Ensures that the parent of a minor over 14 years of age is able to obtain mental health records under certain circumstances.
H617	Introduced 2/21; Referred to House Health & Welfare; Out of Committee 2/29; Passed House 3/4; Referred to Senate Health & Welfare; Out of Committee 3/14; Passed Senate 3/20; To Governor.	Syringe, needle exchange, repeal (Vander Woude) Protects Idahoans and their communities by repealing Chapter 34, Title 37, Idaho Code, relating to the Syringe and Needle Exchange Act. Needle exchanges have demonstrated little evidence they are conduits for substance abuse treatment. Furthermore, there is little evidence that needle exchanges have reduced the number of needle stick injuries in Idaho's communities. Given these were the key arguments for implementing the Syringe and Needle Exchange Act, this chapter is rightly repealed.
H632	Introduced 2/22; Referred to House Health & Welfare; Out of Committee 3/15; Passed House 3/18; Referred to Senate	Naturopathic doctors, licensure (Blanksma) Makes minor corrections to the voluntary naturopathic doctor dual licensure statute. It clarifies the post-doctorate training required to obtain

	Commerce; Out of Committee 3/20; Passed Senate 3/21.	voluntary licensure and prevents policy overlap with other naturopathic licensure statutes. The legislation requires that an individual must enroll in and complete a naturopathic doctor curriculum of at least 160 hours from an accredited university as well as show proof that an applicant has practiced naturopathic medicine in Idaho for a number of years. This legislation does not change the underlying doctorate licensure requirement or the requirement that the underlying license must remain active and in good standing.
H633	Introduced 2/22; Referred to House Health & Welfare; Out of Committee 3/4; Passed House 3/7; Referred to Senate Health & Welfare; Out of Committee 3/13; Passed Senate 3/19; To Governor.	Public assistance, pregnancy (Blanksma) Adds provisions regarding postpartum Medicaid coverage for women. by extending Medicaid eligibility for twelve (12) months for postpartum coverage to individuals who, while pregnant, are eligible for and receive Medicaid.
H705	Introduced 3/7; Referred to House Business; Out of Committee 3/14; Passed House 3/15; Referred to Senate Commerce; Out of Committee 3/21; Senate 3 rd Reading.	Occupational licensing reform (Crane, J.) This bill continues Idaho's work towards occupational licensure reform. The vast majority of licenses require licensees to take certain continuing education credits to renew their license. This legislation reforms, overhauls, and streamlines continuing education requirements, and directs licensing authorities to review their administrative rules to eliminate or modify any continuing education provisions that would conflict with the changes in this bill.
H647 DEAD	Introduced 2/23; Referred to House Business.	Occupational licensing, renewal (Crane)
S1375 DEAD	Introduced 2/23; Referred to Senate Commerce; Out of Committee 3/7; Senate 3 rd Reading; Referred to Senate 14 th Order 3/21.	Naturopath doc licensure, voluntary (Anthon) Makes minor corrections to the voluntary naturopathic doctor dual licensure statute. It clarifies the post-doctorate training required to obtain voluntary licensure and prevents policy overlap with other naturopathic licensure statutes. The bill expands the educational requirements to reflect actual training programs available to professionals seeking dual licensure in Idaho. This legislation does not change the underlying doctorate licensure requirement or the requirement that the underlying license must remain active and in good standing.
H658 DEAD	Introduced 2/26; Referred to House Rev & Tax.	Hospital property tax exemption (Vander Woude)

		Amends a definition of nonprofit hospital for the purpose of property tax exemptions and allows the discretion of the Board of Equalization for the county in which the property is located. The legislation set up a framework for the Board of Equalization to evaluate the community and charitable benefit of nonprofit hospitals and grant a property tax exemption in full, partial, or an exemption at all.
HCR30 ADOPTED	Introduced 2/26; Referred to House Health & Welfare; Out of Committee 3/4; Adopted by House 3/11; Referred to Senate Health & Welfare; Out of Committee 3/15 to 10 th Order; Adopted by Senate 3/18; Delivered to Secretary of State 3/21.	Medicaid waivers (Vander Woude, Van Orden) This resolution recognizes that Idahoans want to be self-reliant when it comes to receiving health care benefits. But circumstances sometimes have consequences that interfere with that resilience and individuals find themselves in need of medical assistance. Helping these people gain back the independence they desire is what the Idaho Legislature is proposing in conjunction with the Idaho Department of Health and Welfare.
H670	Introduced 2/27; Referred to House Health & Welfare; Out of Committee 3/8; Passed House 3/11; Referred to Senate Health & Welfare; Out of Committee 3/19; Senate 3 rd Reading.	Organ harvesting, genetic tech (Redman, Lenney) Prohibits health insurance providers in Idaho from issuing reimbursements for organ transplant operations performed in China or other countries known to have participated in forced organ harvesting from prisoners of conscience and other persecuted people. The bill also prohibits hospitals and medical research facilities from using genetic sequencing machines or software that come from foreign adversaries.
H671 DEAD	Introduced 2/27; Referred to House Health & Welfare; Held in Committee 3/7.	Prescription drugs, billing (Redman) The Affordable Prescription Drug Cost Act restores the integrity of the 340B Drug Discount Program by ensuring fair reimbursement to Idaho's 340B covered entities and contract pharmacies. This legislation prohibits Pharmacy Benefit Managers from placing any burdensome restrictions on a 340B covered entity or contract pharmacy that would not be placed equally on a non-340B covered entity or non-contract pharmacy. Additionally, this legislation safeguards Idahoans' choices for pharmacy selection, and preserves independent pharmacies, by prohibiting drug manufacturers from restricting which pharmacies can receive drugs purchased under the 340B program.
H672 DEAD	Introduced 2/29; Referred to House Health & Welfare.	Medical ethics defense act (Wisniewski, Bjerke) Recognize and protect the rights of conscience for health care professionals and health care entities

		when they are asked to provide medical services which go against their conscience. There are provisions to prevent discrimination or retaliation, and the legislation provides for a civil action for damages.
<u>H681</u> LAW	Out of JFAC 2/29; Passed House 3/4; Passed Senate 3/13; Delivered to Governor 3/18; Signed by Governor 3/18.	Approp, health education, trailer This appropriation to the Health Education Programs organized under the State Board of Education provides enhancements to the FY 2025 maintenance budget that includes funding for new residencies and the additional 2% CEC.
<u>H683</u> DEAD	Introduced 2/28; Referred to House Education; Out of Committee 2/29; House 3 rd Reading; Referred to General Orders 3/5.	Office of early childhood services (Raybould, Blanksma) Creates an Office of Early Childhood to oversee the state's early childhood services. It supports family choice by charging the Office with making it easier for families to find the early childhood services they need. It also supports the independent businesses operating in the early childhood field by streamlining oversight and accountability for their use of public funds.
<u>H636</u> DEAD	Introduced 2/22; Referred to House Education.	Office of early childhood (Blanksma, Raybould)
<u>S1380</u>	Introduced 2/28; Referred to Senate Health & Welfare; Out of Committee 3/5; Passed Senate 3/7; Referred to House Health & Welfare; Out of Committee 3/14; Passed House 3/18; Delivered to Governor 3/19.	Health, social svcs ombudsman (Lee) Establishes an office of the health and social services ombudsman to monitor and evaluate the compliance of public agencies and private entities in the provision of health and social services policy for children under the care of the state and vulnerable adults.
<u>H685</u> Support action tool	Introduced 2/29; Referred to House Health & Welfare; Out of Committee 3/4; Passed House 3/7; Referred to Senate Health & Welfare; Out of Committee 3/14; Passed Senate 3/25.	Medicaid budget stabilization fund (Vander Woude) Sets up a place for unobligated general fund moneys remaining in the cooperative welfare funds to be deposited after reconciliation and statute distributions. These funds shall be distributed by legislative appropriation.
<u>S1390</u>	Introduced 3/1; Referred to Senate Commerce; Out of Committee 3/7; Passed Senate 3/11; Referred to House Commerce.	Launch grant (Lent) Updates the definition of "in-demand careers" to establish additional criteria for weighing economic output and mobility. Factors include but are not limited to, the number of openings, rate of growth, skill transferability, length of program training, and wage potential. In addition, any in-demand careers that require more than a bachelor's degree are excluded from grant consideration.

<p><u>S1389</u></p>	<p>Introduced 3/1; Referred to Senate Health & Welfare; Out of Committee 3/7; Senate 3rd Reading.</p>	<p>Pharmacy benefit managers (Cook, Lee) Establishes parameters and standards for how Pharmacy Benefit Managers operate in Idaho, requiring fairness, transparency and free market operations; things all other businesses in Idaho must operate under, but on which Idaho's law remains silent for PBMs. This legislation adds new definitions; prohibits spread pricing; requires drug rebates to be passed on to the plans; lays out requirements that make contracts with pharmacies transparent and fair; allows patients to choose which in-network pharmacy best meets their needs; and gives the Department of Insurance authority to ask for information to ensure the law is being followed. PBMs already operate under these provisions in other states; these additions will help protect access to pharmacies and Idahoans' health care dollars as well.</p>
<p><u>S1416</u></p>	<p>Introduced 3/8; Referred to Senate Health & Welfare; Out of Committee 3/14; Passed Senate 3/19; Referred to House State Affairs.</p>	<p>Emergency medical services (Harris) Moves the Emergency Medical Services (EMS) Bureau out of the Idaho Department of Health and Welfare and relocates it into the Office of Emergency Management. All existing EMS programs except the Public Health Preparedness and Response Program will be moved effective July 1, 2025. The directors of the Idaho Department of Health & Welfare and the Office of Emergency Management will work together to coordinate the transfer of the EMS Bureau. The Office of Emergency Management will also be responsible for preparing a budget request for EMS functions for fiscal year 2026.</p>
<p><u>S1429</u></p>	<p>Introduced 3/18; Referred to Senate Commerce & HR; Out of Committee 3/21; Passed Senate 3/22; To House.</p>	<p>Licensing requirements, waivers (Den Hartog) Creates a process for licensed professionals to request a variance from their licensing authority for a waiver of a licensing requirement under certain circumstances. It establishes a process where the licensing authority can either approve or deny the petition request.</p>
<p><u>H721</u> DEAD</p>	<p>Introduced 3/19; Filed Office Chief Clerk.</p>	<p>Abortion (Rubel) Repeals the various abortion bans that have been passed by the Idaho Legislature since 2019 assigning criminal liability to medical professionals and others, including the 2020 abortion trigger ban, the 2021 6-week abortion ban, the 2022 bounty law and the 2023 abortion travel restrictions. It protects health professionals from facing prison time or monetary penalties for providing responsible reproductive</p>

		healthcare, protects access to safe abortion prior to fetal viability, and allows women facing health crises or otherwise carrying a non-viable fetus to obtain medically necessary or recommended abortions. No public funds would be allocated for any form of abortion care in the state of Idaho.
H722	Introduced 3/19; Referred to House Ways & Means; Out of Committee 3/21 for re-referral; Passed House 3/21; Referred to Senate Finance.	Approp, WDC, trailer Appropriation to the Workforce Development Council provides enhancements to the FY 2025 maintenance budget that includes funding for the Launch Grants from the In-Demand Careers Fund, 3.00 FTP and grant manager funding, and the additional 2% CEC.
H724 DEAD	Introduced 3/20; Filed Office Chief Clerk.	Occupational licensing (Redman) Limits fund balances for boards and commissions within the Division of Occupational and Professional Licenses (DOPL) to 150% of the five-year average of annual expenditures. This legislation is necessary to ensure licensees are not overcharged. Additionally, the bill narrows the rulemaking authority of the Division Administrator to ensure transparency and consistency with the Occupational Licensing Reform Act. The bill consolidates all definitions into one definition section. The bill requires a one-time report to the Idaho Legislature on board and commission compliance with the Occupational Licensing Reform Act.
H730	Introduced 3/21; Referred to House Appropriations; Out of Committee 3/22; House 2 nd Reading.	Budget requests and reports (Horman, Grow) Directs state agencies receiving federal funds, anticipating receipts of federal funds or administering programs supported by federal funds to add, or adjust reporting requirements. It requires reporting if federal funds are capped, or are open-ended, or if the state is required to match federal dollars. It also requires agencies to develop a plan to reduce or eliminate services if notified of a reduction in federal funding within a specific federal grant of 10% or more. This also adds language which requires reporting to legislative services office.
H737 DEAD	Introduced 3/22; Filed Office Chief Clerk.	In vitro fertilization (Green, McCann) Adds new definitions to Chapter 54 regarding In Vitro Fertilization. Chapter definitions include definitions regarding embryo, assisted reproduction, and gamete. Adds new language in section Chapter 54 regarding a patient's right to the possession of their embryos that are created using assisted reproductive technology

		and stipulates that embryos that are created using assisted reproductive technology are not considered a diagnosable pregnancy until successfully transferred into the uterus of a woman. Further, the legislation stipulates that embryos fertilized using IVF shall not be used for research purposes.
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Tracked through 3/22/24
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