**Idaho Public Health Association**

Legislative Update – January 20, 2012

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| This week the Idaho Legislature began its work on specific agency budgets in the Joint Finance and Appropriation Committee (JFAC), reviewing agency rules in the committees of both the House and the Senate, and introducing legislation for printing. After JFAC hears all the agency budgets over the next month and the target revenue number is set, it will draft legislation that sets the budgets for each agency and department. The rules will go into effect unless the committees take action to stop them, and bills that are introduced and printed will begin the process of committee hearings and votes. One of the most significant political events of the week was the Supreme Court's decision to reject the redistricting plan created by the bi-partisan commission. The court ruled it unconstitutional because of the unnecessary division of counties and directed the commission to reconvene and come up with a new plan. Since legislators are now uncertain about what district they will be running in during this spring's primary election, the primary date may be postponed and the session itself may become longer. Also, the Office of Performance Evaluations released its report of a statewide survey which shows that 87% of Idahoans favor a ban while texting and driving. **JointFinanceJoint Finance and Appropriations** The Department of Health and Welfare's (H&W). JFAC spent the week hearing agency reports and proposed budgets for the Department of Health and Welfare. H&W is predicting that some 100,000 additional Idahoans, including childless adults who meet income qualifications, will be eligible for Medicaid as the PPACA goes into effect in 2014. Initially the Federal Government will pick up these costs. The state match for Medicaid will then be phased in over 5 years. However, the department anticipates that with increased attention to expanded eligibility, persons who are now eligible but have not signed up, will also start participating in Medicaid. The state would share in those costs, estimated to be almost $20 million dollars.  The committee heard testimony though that this cost could be offset by savings in the Catastrophic Health Care Cost Program (CAT), which now provides almost $35 million dollars in payments to providers for indigent health costs. This offset, as Director Armstrong points out, may provide a global reduction in cost. The CAT agency also presented their budget this week and the power point is available [HERE](http://r20.rs6.net/tn.jsp?llr=m7hzescab&et=1109123698939&s=434&e=001Q8afmeD1srye26uuq7AbSt__PNYoM1NhN3m_aL4hOrbUheJDTL_cxnHofdrZBrU2O8XDvZ4h0M-A8SnZ2z4B9r-pXfFWISKNBQ8j767iS4zNVcjPWUL_D8vrWiLEmB6Vkpk_MSzHhA1EjPcDf_hSaJfUQ_c1AyqHXJMYRb1DdlKBK8PIXGPzAU2D1NTa4IdF).  In order to sustain Medicaid, Armstrong said the state should look towards a managed care type model for Medicaid designed to improve outcomes, accessibility and coordination of care. This will require collaboration and cooperation from all stakeholders. Director Armstrong also informed the committee that unemployment and the slow economy had contributed to a 380% increase in food stamp enrollment.  JFAC committee members expressed concern about the cuts to mental health services that the Department has had to make over the last few years. The department reported that though it has cut staff, it is still seeing many or more patients and the severity of illness have increased.  **HealthInsuranceHealth Insurance Exchange** The debate continues around the potential Health Insurance Exchange. For a full scope of what the Exchange is and some of the issues involved, please refer to this Kaiser Family Foundation report, [Explaining Health Care Re form: What Are Health Insurance Exchanges?](http://kff.org/healthreform/upload/7908.pdf) The Health Insurance Exchange (Exchange) is a feature of the Patient Protection and Affordable Care Act (ACA), which offers consumers and small businesses a transparent market where they will be able to shop among affordable health insurance options.  Exchanges are internet based services that provide access to eligibility determination, plan enrollment, plan management, consumer assistance and financial management. The ACA requires Exchanges to inform consumers of Medicaid and CHIP eligibility requirements determine if they are eligible for those programs and then enroll them in those programs. Individuals who apply, but are not eligible for Medicaid or CHIP, are then automatically screened for eligibility in subsidized Qualified Health Plans offered through the Exchange. They are enrolled in such a plan if they qualify by income without having to submit additional information or a separate application. States have been given the option to have State Based Exchanges, Federally Facilitated Exchanges, or Partnership Exchanges.  Some states, including Idaho, have decided to create a State-based Exchange (SBE) by January 1, 2014. This requires certification from the US Department of Health and Human Services (HHS) and enacting state legislation. Opponents of the legislation in Idaho have debated that Idaho should wait until the Supreme Court decides the constitutionality of the ACA mandate. Supporters prefer that Idaho establish a State Based Exchange, rather than having to accept a Federally Facilitated Exchange.  Of note this week, Rep. McGeachin (R- Idaho Falls), Chairman of the House Health and Welfare Committee, began a series of "study sessions" about the ACA to be held on Tuesdays. Interested individuals participated in an informal discussion designed to explore the truths and misconceptions about the Act.  |

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| **LegislationLegislation of Interest** Listed below is a list of some of the legislation we will be following throughout the 2012 session. To see a full text version of each bill, click on the bill's title. The Idaho Legislature home page also offers a free bill tracking service that provides email alerts regarding any status changes. To sign up, click [HERE](http://legislature.idaho.gov/MyBillTracker/Login_input.do;jsessionid=63C9C8FE6EDC71BDCB79A2EB23AD4D2D)          [H0370 MEDICAL MARIJUANA](http://r20.rs6.net/tn.jsp?llr=m7hzescab&et=1109123698939&s=434&e=001Q8afmeD1srw7cuqDr1RDiXAvTVccNws8BzVSwNefxJFn_wlzhwh4032iJxu7ANoMEDT7B7wWFQf9Z6D3SXih67N0oC3GkYeu04ZOMu6-rmNvh4vvU5zJggJVEOujkXQI4-MyaMFmocRwSzE5RqCZQyvN9nHMauMhOIjWgcwCT7TqQCu2gteYsDFXpeTHoKNX) sponsored by Rep. Trail. This bill the "Idaho Compassionate Medical Marijuana Act" establishes the circumstances under which a qualified patient may legally be prescribed by a physician a specified amount of marijuana which would be dispensed at an authorized treatment center. It directs the Department of Health and Welfare to define rules to enact the legislation.           [H0368 MILITARY DIVISION](http://r20.rs6.net/tn.jsp?llr=m7hzescab&et=1109123698939&s=434&e=001Q8afmeD1sry11GG7kOVDq1k_BFjFD_1YStyjlBFgsukkVEOsfzl3VHuGESB_XE7rcsidZ26U79aHi1M2pgx11ClGkR4pBJugKuqP8QSGiHWg8SkMVKPcgFKuKsupFal_ZQ6pi6Ko9UVC1GM0lA9l1egDWoB1eCQavPr-zn6MAK2zcRnWPcYnA0j3qI3g1vVT) by the Idaho Military Division Bureau of Homeland Security updates and extends the responsibility of the Statewide Communications Interoperability Executive Council which develops and maintains the statewide plan for public safety wireless interoperable communications.            [S1220 STUDENT HARASSMENT](http://r20.rs6.net/tn.jsp?llr=m7hzescab&et=1109123698939&s=434&e=001Q8afmeD1srzrmprz0ZFt8DYA_Qo-V5V8SoKSAKBVnbxLRzDA4HIrMt1b51TqCWWqT1Bvyh05eXzpG4uTPiOSlDhdxWA4d5bgFCOFJkPCaTawYTacCNk3wec_pRLuNsObQfytNpDstSD0HoMk8YWn5K3OM2eRPaR-XmWrJpsvNGNWQLy7ZByxlwu5V3J8V5WN) - is co-sponsored by Sen. Keough, Sen. Geodde, Rep. Shirley, Rep. Cronin and Rep. Perry. The bill amends and adds to existing law relating to harassment, intimidation or bullying of a student to provide what is included within the term "harassment, intimidation or bullying," to revise who may be found guilty of the offense, to replace discretionary language with mandatory language, to provide an infraction penalty; and to provide requirements for harassment, intimidation and bullying information and professional development.           [SCR 110 ALZHEIMER'S PLANNING GROUP](http://r20.rs6.net/tn.jsp?llr=m7hzescab&et=1109123698939&s=434&e=001Q8afmeD1srwzEHJiRTLFIBIzOQL7OlP-IuOveCF1m2fnYQjIXAu2VmezjR3YevtaC--uBNCkNBQkAJw4-1Cljh50mKLNK_FDXmnUuR7saF_S3bI7hp6c1LoryaepFF9LrwXFXputFFF_SuUKiyGjWnuTF9we6lyI-lSLn1YXt1czVTX1KtaRTH8FjnGxfstC) - is co-sponsored by Sen. Broadsword, Sen. Schmidt, Rep. Bilbao, Rep. Wood and Rep. Rusche. The bill acknowledges the seriousness of Alzheimer's disease and other dementias in Idaho by endorsing the Idaho Alzheimer's Planning Group and supporting its comprehensive approach to the development of a statewide plan to address the needs of people with Alzheimer's disease and other dementias, their family members and caregivers. |

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| **Join Us! New Policy Committee Members Always Welcome** We encourage you to visit the IPHA Policy Committee pages for helpful advocacy links and updates. And if you are interested in joining the Policy Committee, please contact committee chair Katie Quinn, MHS at krq@hotmail.com. The committee meets the second Wednesday of each month at 6:00 in the Health Sciences Building at BSU. |

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***Kimberly Gallagher****, a student in the Master of Health Science Program/Public Policy Emphasis at Boise State University, is the IPHA legislative intern for 2012. She will be monitoring health related policy activities and providing weekly updates throughout the session.*

*Our goal is to provide you with nonpartisan, objective insight that will both inform and serve as a catalyst for involvement in the policy making process.   Kimberly looks forward to your input and comments, her contact information is* ***kimberlygallagher@u.boisestate.edu****.*