**Idaho Academy of Family Physicians**

**2020 Legislative Report**

**Week 3, January 20 – 24**

**Medical Education Program presentations to JFAC**

This week the state’s health education programs made presentations to the Joint Finance and Appropriations Committee (JFAC).  Drs. Jeff Seegmiller and Mary Barinaga on behalf of WWAMI; Dr. Ted Epperly on behalf of the Family Medicine Residency programs; Dr. Jaren Blake on behalf of the Eastern Idaho Medical Residencies; and Drs. Benjamin Chan and Beth Botts on behalf of the University of Utah Medical school.

Collectively they did a great job of illustrating the physician education “pipeline” from medical school through residencies, how one feeds into the other, and the resultant likelihood that a physician stays in Idaho.  The legislature needs constant reminders of how the system works, the impacts of the system in that regard, and the need to continue to grow and strengthen the pipeline.

The Governor’s budget request for these programs aligned closely to the request from each program – a total of $22.2 million for Health Education programs.   That request takes into account growth for year three of the 10-year plan for expansion of the GME programs and includes an additional 25 new residents.

Editorial Note:  My observation is that Governor Little and the Legislature has now bought into the 10-year GME plan and recognizes the importance of implementing the plan.  Credit to all those involved in crafting and pushing the plan.

Here’s a story posted in the Idaho Press about the JFAC presentations this week:

<https://www.idahopress.com/eyeonboise/progress-on-doctor-shortage-idaho-s-moved-up-from-th/article_1712db1b-70b9-54fd-883f-a120d3b246f9.html>

**New Legislation Introduced this week:**

[**H341: Medical Billing Prohibition**](https://legislature.idaho.gov/sessioninfo/2020/legislation/H0341/), by Rep. Blanksma

This bill prohibits “surprise” medical billing when a patient receives care from an in-network hospital facility and is unknowingly charged. This bill also allows out-of-network providers to be reimbursed at the same rate by contracted providers.

According to the sponsor, this legislation requires insurance companies to treat providers who are not contracted as if they were contracted by paying them at the higher contracted rates and providing the member in-network benefits.  The provider, in turn, must accept these payments as their total payment, and not bill the patient for any balances.

*Status:  introduced in House Health and Welfare on Monday Jan. 20, awaiting committee hearing.*

[**H342:  Telehealth Services**](https://legislature.idaho.gov/sessioninfo/2020/legislation/H0342/)**,**by Rep. Blanksma

This bill amends the current Telehealth Act to add to the definition of "Telehealth services" to include services such as consultations, assessments, remote monitoring, and transferring of medical data. This bill also adds a definition for "telehealth technologies" and removes the requirements for "two-way audio and visual" used for the first telehealth encounter in order to establish patient/provider relationship.

*Status:  introduced in House Health and Welfare on Monday Jan. 20, awaiting committee hearing.*

[**H339: Physical Therapy Dry Needling**](https://legislature.idaho.gov/sessioninfo/2020/legislation/H0339/)**,**by Idaho Physical Therapy Association

Makes a correction to Physical Therapy Practice Act related to dry needling provisions adopted in the last legislative session.  Previous legislation required the courses be approved by a national physical therapy accreditation board, however such organization does not exist.  This gives authority for such course approval to the Idaho Physical Therapy Licensure Board.

*Status:  introduced in House Health and Welfare on Monday Jan. 20, awaiting committee hearing.*

[**H351:  Medicaid Reimbursements**](https://legislature.idaho.gov/sessioninfo/2020/legislation/H0351/)**,**by Dept of Health and Welfare

Reduces net reimbursements to hospitals and nursing facilities in 2020 and 2021 to help achieve the general Medicaid general fund needs of a 1% overall reduction in FY 2020 and a 2% reduction in FY 2021.  (This in response to Governor Little’s edict to all state agencies for such reductions over the next two years).  Directs the Department to work collaboratively with hospitals and nursing facilities to update reimbursement methods.  Will facilitate a movement away from cost-based Medicaid payments to value-based.

*Status:  introduced in House Health and Welfare Wed, Jan 22, awaiting full committee hearing.*

[**S1240:  Advanced Practice Registered Nurse**](https://legislature.idaho.gov/sessioninfo/2020/legislation/S1240/)**,**by Sen. Souza

To provide signature authority to Advanced Practice Registered Nurses for such documents as signing disabled parking permits, jury exemptions, disabled hunter permits, athletic physicals, or mental health declarations (all of which by statute currently require a physician signature).

*Status:  introduced in Senate Health and Welfare Wed. Jan 22, awaiting full committee hearing.*

**Status of Previous Legislation**

[**H 315:  Controlled substances, Schedule I**](https://legislature.idaho.gov/sessioninfo/2020/legislation/H0315/), by Board of Pharmacy

This bill aligns Idaho Controlled Substances Act with decisions made in 2019 by the Federal DEA.  It places synthetic cannabinoids, synthetic cathinones, and synthetic fentanyls in Schedule I.

*Status:**currently on House 3rd Reading calendar for floor action.  Would still need to go through Senate process.*

[**H 316:  Pharmacy Act updates**,](https://legislature.idaho.gov/sessioninfo/2020/legislation/H0316/) by Board of Pharmacy

Updates Uniform Controlled Substances Act as it relates to Forfeitures and Discipline, updates and modernizes Pharmacy Act to be more consistent with recent legislative action.

*Status:  currently on House 3rd Reading calendar for floor action.  Would still need to go through Senate process.*

[**H 317:  Optometric physician licensing act**](https://legislature.idaho.gov/sessioninfo/2020/legislation/H0317/), by Bureau of Occupational Licensing

Cleans up and modernizes the optometric licensing act.  Among other things, includes expanded scope of practice to allow optometrists to perform certain laser surgical procedures once they’ve met certain examination and experience requirements.

*Status: Had a hearing in House Health and Welfare on Thursday with a packed room from both sides of the issue.  Hearing was continued into next week.*

**Key priorities**

Medicaid Expansion - Governor Little proposed in his State of the State address no new state general funds for Medicaid Expansion. Instead, to cover the first-year costs, the governor’s budget recommends using a combination of state budget offsets of $20 million, $12.5 from the Millennium Fund, and $8.5 million from the county budget savings.

Idaho Physician Shortage - The governor’s budget includes a request to use ongoing General Funds for 25 new medical residents and got a mention in his speech.

Opioid Abuse Prevention- The governor is recommending $30 million to go towards identifying opioid abuse problems. A portion of this money will be spent on enhancing the Board of Pharmacy’s Prescription Monitoring Program (PMP).

As always, we will continue to track activity of interest to the Academy of Family Physicians in the Legislature.  We stand ready to answer any questions you may have.

Thanks,

Ken Burgess, Partner

Veritas Advisors, LLP