**Idaho Academy of Family Physicians**

**2019 Legislative Report**

**Week 6, February 11-15**

**Draft legislation coming fast and furious this week:**

This week contained some legislative deadlines for introduction of proposals in so-called non-privileged committees.  This means numerous draft proposals were introduced, many of which will be assigned a bill number and never advance any further in the process.

We did see the first -- of what will likely be many – Medicaid expansion-related bills introduced in Senate Health and Welfare this week.

**New Legislation introduced this week:**

[**S1100 – Medicaid Expansion “sideboards”**](https://legislature.idaho.gov/sessioninfo/2019/legislation/S1100/)– by Senator Souza

*Status:  this proposal was introduced in Senate Health and Welfare on Monday on a 5-4 vote, awaiting full committee hearing.*

Authorizes an optional workforce development training program for population covered by expansion; Allows the state to apply for Federal waiver for those over 100% of Federal Poverty Level to seek subsidized insurance on the health Insurance exchange; allows application of Federal waiver to provide mental health treatment; Requires a legislative review of Medicaid expansion in 2023; voids Medicaid expansion if federal funding ratios change.

[**S1098 – Bone Marrow Donation**](https://legislature.idaho.gov/sessioninfo/2019/legislation/S1098/) – by Senator Heider

*Status: Passed Senate Health and Welfare Committee, awaiting action by full Senate.*

Allows Primary Care Providers and Urgent Care Physicians to inquire of patients age 18-45 whether they are a bone marrow donor and provide educational material to those patients on the subject.  Directs Idaho Department of Health and Welfare to develop materials and information regarding bone marrow registry.

[**S1095 – Employment, Health Assistance**](https://legislature.idaho.gov/sessioninfo/2019/legislation/S1195/) – by Senator Thayn

*Status: Introduced in Senate Health and Welfare Committee on Monday, awaiting full hearing.*

To help those transitioning off SNAP and Medicaid by providing $500 for medical and/or job training costs to be used over a six-month period if participant coordinates with a qualifying non-profit organization and follows a plan to get out of poverty.

[**H152 – Naturopathic Medicine**](https://legislature.idaho.gov/sessioninfo/2019/legislation/H0152/) – by Idaho Chapter of Association of Naturopathic Physicians

*Status:  Introduced in House Health and Welfare Committee on Thursday this week, awaiting full hearing.*

Would add a Naturopathic Licensure Advisory Board to Idaho Board of Medicine, the powers and duties to include licensing naturopathic physicians in Idaho.

[**H133 – Immunization exemption**](https://legislature.idaho.gov/sessioninfo/2019/legislation/H0133/) – by Representative Giddings

*Status: Introduced Tuesday in House Health and Welfare Committee, awaiting full committee hearing.*

Would require daycares and schools, when informing parents about immunizations, to also provide information regarding the exemption provision allowed by Idaho law.

**Status of previous legislation:**

[**HB109 – Maternal Mortality Review Commission**](https://legislature.idaho.gov/sessioninfo/2019/legislation/H0109/) – by the Idaho Medical Association:

*Status:  scheduled for hearing in House Health and Welfare Committee Monday, February 18.*

The IMA introduced a maternal mortality review bill in House Health and Welfare this week.  The bill would create a Maternal Mortality Review Committee, which is a multi-disciplinary peer-review committee to collect information, determine whether a death was preventable and, if so, plot a strategy for educating health care workers to address the issue.  The United States has a higher maternal mortality rate than other countries such as the UK, Germany, France, and Canada.

[**SB1049 – Partial-birth Abortion**](https://legislature.idaho.gov/sessioninfo/2019/legislation/S1049/) – by Senator Den Hartog:

*Status:  Passed the full Senate Friday 29-6.  Now to House Health and Welfare Committee for action.*

Amends Idaho’s partial-birth abortion law to align with federal law and in response to US Supreme Court decision on the issue.

[**HB 9 – Medical Practice Act**](https://legislature.idaho.gov/sessioninfo/2019/legislation/H0009/) – by State Board of Medicine:

*Status:**Passed the Senate unanimously on Thursday and now goes to the Governor for action.*

This is a 28-page bill being billed as a housekeeping or cleanup bill by the Board of Medicine.  It updates and modernizes provisions of the Medical Practice Act.  Among other provisions, it also would add a Physician Assistant to the Board of Medicine and adds a physician assistant and a public member to the Physician Assistant Advisory Committee.  It also removes the requirement that medical students be registered with the Board.

[**HB 10 – Pharmacy Practice Act**](https://legislature.idaho.gov/sessioninfo/2019/legislation/H0010/) – by State Board of Pharmacy

*Status: Passed the Senate unanimously on Monday.  To governor for action.*

This is an 18-page bill updating and modernizing the Pharmacy Practice Act.  It also establishes a multistate pharmacy license to increase portability and mobility of practice across state lines.

[**HB11 – Uniform Controlled Substances Act**](https://legislature.idaho.gov/sessioninfo/2019/legislation/H0011/) – by Board of Pharmacy

*Status: Passed the Senate unanimously on Monday, to the Governor for action.*

Aligns DEA scheduling decisions by including synthetic opioids in Schedule I.

[**HB64 (formerly HB29) – Abortion Complications Reporting**](https://legislature.idaho.gov/sessioninfo/2019/legislation/H0029/) – by Representative Greg Chaney

*Status:  Passed out of Senate State Affairs Committee on Friday, now to the full Senate for action.  It has already passed the House.*

This bill makes some wording and technical changes to sections of this law passed last year.  It appears that the law is not substantially changed from current.

We will continue to track and report legislation of interest to the IAFP.

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