

MINUTES
HOUSE HEALTH & WELFARE COMMITTEE

DATE: Wednesday, January 20, 2016

TIME: 9:00 A.M.

PLACE: Room EW20

MEMBERS: Chairman Wood, Vice Chairman Packer, Representatives Hixon, Perry, Romrell, Vander Woude, Beyeler, Redman, Troy (Agidius), Rusche (Cuddy), Chew

**ABSENT/
EXCUSED:** Representative(s) Chew

GUESTS: Greg Dickerson, Idaho Assoc. of Community Providers; Bev Barr, DHW-Rules; Curtis Sandy, Idaho EMS PC; Fred Birnbaum, Idaho Freed Found.; Kelly Keele, Children's Supportive Services, Michelle Weir, Stephanie Miller, Miren Unsworth, Jake Silva, and Gary Moore, IDHW-FACS; Jamie Teeter and Rosie Andueza, IDHW-DBH.

Chairman Wood called the meeting to order at 9:01 a.m.

MOTION: **Rep. Hixon** made a motion to approve the January 15 and January 18, 2016 minutes. **Motion carried by voice vote.**

Chairman Wood welcomed **Rep. Agidius**, who is substituting for **Rep. Troy**.

Chairman Wood turned the gavel over to **Vice Chairman Packer**.

DOCKET NO. 16-0202-1501: **Dr. Curtis Sandy**, Emergency Medicine and EMS Physician, Portneuf Medical Center, Pocatello, Chair, Idaho Emergency Medical Services Physicians Commission (EMSPC), presented **Docket No. 16-0202-1501**, which updates the referenced Emergency Medical Services (EMS) Standards Manual to version 2016-1.

Chairman Packer put the committee at ease at 9:08 a.m. and brought the committee back to order at 9:12 a.m.

Answering questions by the committee, **Dr. Sandy** said the EMSPC membership has broad stakeholder representation. Discussion of the changes occurred at quarterly meetings and notices of intent and changes were sent to the EMS agencies.

For the record, no one indicated their desire to testify.

MOTION: **Rep. Beyeler** made a motion to approve **Docket No. 16-0202-1501**. **Motion carried by voice vote.**

DOCKET NO. 16-0601-1501: **Stephanie Miller**, Permanency Program Specialist, Department of Health and Welfare (DHW), Division of Family and Community Services, presented **Docket No. 16-0601-1501**. The Rule changes clarify and provide continuity of services in three areas: siblings, guardianship, and adoption. The new sibling definition is for use only within the DHW Child and Family Services program. The guardianship change for the death or disability of a relative guardian enables the continuation of guardianship assistance benefits in the home of a successor guardian. In alignment with the Social Security Act, adoption assistance benefits have been updated to remove reference to payment subject to the appropriation of state funds.

MOTION: **Rep. Hixon** made a motion to approve **Docket No. 16-0601-1501**.

For the record, no one indicated their desire to testify.

Responding to committee questions, **Ms. Miller** said the changes bring the Rule into compliance with both the Social Security Act and the Preventing Sex Trafficking and Strengthening Families Act. Guardianship Assistance Agreements, completed prior to guardianship finalization, identify a successor guardian, allowing an easy transition for the child and benefits. Other states attempting to withhold payments, in opposition to the Social Security Act, have lost law suits and been forced to pay back payments and some damages.

VOTE ON MOTION:

Chairman Packer called for a vote on the motion to approve **Docket No. 16-0601-1501**. **Motion carried by voice vote.**

DOCKET NO. 16-0602-1501:

Michelle Weir, Program Manager, DHW, Division of Family and Community Services, presented **Docket No. 16-0602-1501**, proposed Rule changes to define reasonable and prudent parent standard, caregiver, and age or developmentally appropriate, in accordance with federal requirements. Further changes outline the designation and application of the reasonable and prudent parent standard for all licensed child care facilities caring for children placed by the Child Welfare Program. The changes allow foster parents the daily ability to approve children and youth participation in activities such as field trips, athletic events, visits to friends houses, and going to the movies.

Upon questioning by the committee, **Michelle Weir** stated training will be included in the general foster parent training, the spring resource parent conferences, and the monthly foster parent support groups. Although the children are currently allowed activities, there can be a delay in the approval process because the agency must be contacted. The Division actively seeks relatives for placement, so this population has increased. Of the 875 currently licensed foster parents, 596 are general licensed foster homes.

For the record, no one indicated their desire to testify.

MOTION:

Rep. Vander Woude made a motion to approve **Docket No 16-0602-1501**. **Motion carried by voice vote.**

DOCKET NO. 16-0701-1501:

Jamie Teeter, Bureau Chief, DHW, Division of Behavioral Health, presented **Docket No. 16-0701-1501**, a Pending Rule combining the fee schedules for children's MH, adult MH, and SUD services. It also updates references. There is no anticipated fiscal impact on the State General Funds.

For the record, no one indicated their desire to testify.

MOTION:

Rep. Hixon made a motion to approve **Docket No. 16-0701-1501**. **Motion carried by voice vote.**

DOCKET NO. 16-0717-1501:

Jamie Teeter, Bureau Chief, DHW, Division of Behavioral Health, presented **Docket No. 16-0717-1501**. The Pending Rule is a rewrite of the existing alcohol and substance use disorders services. The changes meet the Idaho Alcoholism and Intoxication Treatment Act directives for standards for SUD providers and establishes requirements for the quality of substance use disorders treatment, care, and services provided by BH providers. There is no fiscal impact to the State General Funds.

Answering committee questions, **Ms. Teeter** said background checks were deleted because they do not pertain to the program specific treatment criteria of this Rule and are covered elsewhere. Program funding is split between federal fund grant access as the primary funding source and State General Funds for the rest. Changes to written interpretations cover technical provider assistance which could be considered interpretation of the Rule.

For the record, no one indicated their desire to testify.

MOTION: Rep. Redman made a motion to approve **Docket No. 16-0717-1501**. Motion carried by voice vote.

DOCKET NO. 16-0715-1501: **Jamie Teeter**, Bureau Chief, DHW, Division of Behavioral Health, presented **Docket No. 16-0715-1501**. This is a new chapter to move toward an integrated behavioral health (BH) system of care to include both mental health (MH) and substance use disorder (SUD) providers. By establishing a behavioral health certification, the split credentialing process is streamlined into one program maintained by the Division of Behavioral Health. Also met are directives of the Alcohol and Intoxication Treatment Act to establish program approval standards or minimum certification standards for providers. Some MH providers asked for a return to state certification to assist with insurance company and federal grant funding requirements. State certification is voluntary. A deeming review process allows audit findings from other entities, including national certification bodies such as the Commission on Accreditation of Rehabilitation Facilities (CARF). The program-specific criminal history background check requirements include a waiver process to allow someone who has failed the background check the ability to provide services. The DHW can grant compliance variances as necessary, although the Rules are based heavily on national accreditation guidelines. The fiscal impact is expected to be cost neutral for all funds. The new fee structure will be a flat fee of \$100 for each BH program location.

Ross Edmunds, Division of Administration, Division of Behavioral Health, was invited to answer committee questions. The option of a state certification allows providers to meet the required national accreditation standards at a reduced cost.

Responding to committee questions, **Jamie Teeter** said a variance would not be allowed for anything impacting client safety. Allowed variances could cover a difference between national accreditation standards and Rules. There are no incentives provided to encourage national accreditation. The state accreditation, although in line with national accreditation standards, does not meet **H 260** requirements. The existing staff is sufficient to provide visits beyond those already required of providers.

Greg Dickerson, Mental Health Director, Treasurer, Idaho Association of Community Providers (IACP), testified **in opposition to Docket No. 16-0715-1501**, stating this is not in alignment with statute and will result in additional state costs. He requested the guidelines of **H 260** be followed to have services delivered by providers meeting national accreditation standards. The proposed chapter does not contain all the standards needed to achieve accreditation. The minimal fees described in the Rule will be inadequate for the site visits to confirm provider conformation to the standards. The IACP requests rejection of this Rule and direction to the DHW to follow through with the intent of **H 260**.

In response to committee questions, **Mr. Dickerson** said accreditation reviews are on a three-year cycle, cost \$9,300 per review, and are performed by surveyors from other accredited organizations. Re-verification, if needed, costs a portion of the \$9,300 fee. Two financial references are required for the review. Individuals within the agency are certified by their professional licensing entities. The last Optum report indicated more than 520 BH providers. The \$9,300 CARF review fee covered two locations and three services at each location. When reviewing rural and frontier providers, the fees can drop to \$3,000 because they require only one surveyor and can be done in as little two days. Mr. Dickerson was unsure if the required income report affected review fees.

Fred Birnbaum, Idaho Freedom Foundation, testified **in opposition to Docket No. 16-0715-1501**. The notion that a state doing accreditation is cheaper than a national standard is compelling. He expressed concern with cost duplication, the value of the state agency actions, and conflict with **H 260**.

Kelly Keele, Idaho Association of Community Providers, Children's Supportive Services of Idaho, testified **in opposition to Docket No. 16-0715-1501**. The prior DHW credentialing process was ineffective and the **H 260** requirements have not been implemented. Optum already conducts credentialing reviews of all network providers. National accreditation, required in Idaho Code, would improve quality and outcomes of BH services. He asked for rejection of this Rule and a sunset date to require national accreditation for all BH providers.

Answering committee questions, **Mr. Keele** said his agency is not nationally accredited. Accreditation in other states has taken three to four years. The Medicaid provider agreement and Optum contract rely on the internal credentialing.

Greg Dickerson was asked to return to the podium to address a committee question. He stated his agency provides MH services and has never been asked for any state credential.

Shad Priest, Regents Blue Shield Idaho, was invited to answer committee questions; however, he said Regence does not work with the Idaho Medicaid Program.

Mike Reynoldson, Blue Cross of Idaho, was asked to answer committee questions. He said internal discussions continue regarding statewide facility standard variations.

Reps. Perry, Vander Woude, Beyeler, and Wood expressed their desire for additional time to review **Docket No. 16-0715-1501**.

MOTION: **Rep. Perry** made a motion to **HOLD Docket No. 16-0715-1501 for time certain, February 2, 2016,**

For the record, no one else indicated their desire to testify.

VOTE ON MOTION: **Chairman Packer** called for a vote on the motion to **HOLD Docket No. 16-0715-1501 for time certain, February 2, 2016. Motion carried by voice vote.**

Chairman Packer stated the remaining Dockets will be carried over to a later date.

ADJOURN: There being no further business to come before the committee, the meeting was adjourned at 11:03 a.m.

Representative Packer
Chair

Irene Moore
Secretary