

MINUTES  
**HOUSE HEALTH & WELFARE COMMITTEE**

**DATE:** Thursday, February 01, 2024

**TIME:** 8:00 A.M.

**PLACE:** Room EW20

**MEMBERS:** Chairman Vander Woude, Vice Chairman Erickson, Representatives Blanksma, Kingsley, Mitchell, Dixon(24), Gallagher, Healey, Redman, Wheeler, Chew (Wilson), Rubel, Roberts

**ABSENT/  
EXCUSED:** None

**GUESTS:** The sign-in sheet will be retained in the committee secretary's office; following the end of session the sign-in sheet will be filed with the minutes in the Legislative Library.

**Chairman Vander Woude** called the meeting to order at 8:00 a.m.

**H 419:** **Rep. Redman**, District 3, presented **H 419** to address the Medicaid Expansion failures and shortcomings while maintaining the positive effects of Idaho's welfare program. This legislation provides guardrails and accountability measures through eleven conditions designed to greatly reduce abuse while removing restrictions for low income individuals who want to go onto the private insurance market. It will close loopholes, improve eligibility verifications, implement common sense enrollment guardrails, and assure individuals who can work do work. Those who voted for the expansion wanted to help individuals who hit a rough patch, not provide long-term government dependency. This does not impact traditional Medicaid. It asks the federal government to let Idaho use its Medicaid dollars wisely for the families who need it most. This is an ambitious bill to regain control of the program.

**Scott Centerino**, Deputy Policy Director, Foundation for Government Accountability, Visiting Fellow, Opportunities Solutions Project, further presented **H 419**. This legislation is a Medicaid rescue mission for a program on an unsustainable path. The program cost has increased from 17% of the state budget to almost 30%. The improper payment rate of 18% is mostly eligibility errors. Through **H 419** individuals in need are again being prioritized. The lifetime caps and worker requirements are in alignment with other existing programs.

This legislation stipulates continuation of the Medicaid Expansion is a provisional part of the eleven conditions. These conditions include the federal match rate, work requirements, private insurance coverage, an enrollment cap, reduction of the improper payment rate, annual eligibility verification, a lifetime cap, a time frame for redetermination, hospital presumptive determination limits, and the use of funds for sex change services for minors or adults.

Answering committee questions, **Mr. Centerino** said nothing on this scale has been done before. Georgia currently has a work requirement. Arkansas briefly had a work requirement for a while. Utah experimented with an enrollment cap. Idaho's previous waivers were rejected as not being cost neutral. The enrollment cap applies only to the expansion population. The waivers will be part of a package the Department of Health and Welfare will submit along with the demonstration of the federal cost savings.

**Chairman Vander Woude** explained to the committee the Medicaid Expansion's unexpected doubling of the anticipated program costs.

Continuing to answer questions, **Mr. Centerino** said not all conditions require a waiver. Improper payment, a federal term, does not include fraud and the high rate consists of eligibility errors.

Testifying **in opposition** to **H 419** were **Bonnie Shuster**, Boise; **Hillarie Hagen**, Idaho Voices For Children; **Dr. Scott Dunn**, Sandpoint; **Carol Augustus**, Nampa; **David Lehman**, Cottonwood Creek Behavioral Hospital; **John Barnes**, Boise; **Jennifer Johnson**, Boise; **Brittany Shipley**, Hailey; **Beth Markley**, NAMI Idaho; **Michael Sandvig**, Idaho Council on Developmental Disabilities; **Christine Curry**, AARP; **Dr. Jonathan Chu**, Boise; **Laura Scuri**, Idaho Association of Community Providers and Access Behavioral Health Services, Inc.; **Tina Hilding**, Moscow; **William Thomas**, McCall; **Loren Colson**, Idaho Coalition for Safe Healthcare; **Rad Nguyen**, Boise; **Michael Baker**, Heritage Health; **Dr. Andrea Christopher**, Boise; **April Frederick**, Boise; **Kandie Luttmmer**, American Cancer Society, Cancer Action Network; **Gwynne McElhinney**, Boise; **Dr. Amelia Schurke**, Boise; **Randy Johnson**, American Cancer Society, Cancer Action Network; **Karen Lansing**, Boise; **Rebecca Tateoka**, Paul; **Kay Hummel**, Boise; **Laura Brown**, The Leukemia & Lymphoma Society; **Jeff Fereday**, Boise; **Melanie Edwards**, Idaho Falls; **Rhoda Mack**, Viola; **Toni Lawson**, Idaho Hospital Association; **Sam Sandmire**, Boise.

This legislation goes against the intent of those voting in favor of Medicaid Expansion, would create a new healthcare gap population, and negatively impacts small businesses. Idahoans with mental health issues would no longer have access to services and medications. Mental health crises would lead to increased incarceration and institutionalism. Private insurance costs would be too high, resulting in non-covered medical costs, a rise in destitute Idahoans, and the return of heavy emergency room use over preventative care. The 2025 waiver completion deadline is unreasonable.

Testifying **in support** of **H 419** were **Fred Birnbaum**, Idaho Freedom Foundation; and **Maggie Lyons**, Panhandle Affordable Housing Alliance.

Their comments included the package concept with the repeal ultimatum provides an incentive for federal approval. Idaho has more job openings than workers. Work requirements are important for self worth at every level.

**Rep. Redman**, in closing remarks, said the mentally ill are part of traditional Medicaid and would not be affected. This legislation is not intended to repeal Medicaid Expansion. Rather, it is designed to grow the continuing program. The taxpayer interest must also be protected. Through **H 419**, Idaho's relationship with Washington D.C. is redefined, letting them know Idaho wants to manage Medicaid expansion on its terms.

**MOTION:** **Rep. Kingsley** made a motion to send **H 419** to the floor with a **DO PASS** recommendation.

**SUBSTITUTE MOTION:** **Rep. Rubel** made a substitute motion to **HOLD H 419** in committee.

Speaking to her substitute motion, **Rep. Rubel** said the upshot of this legislation would be repeal of Medicaid expansion. She expressed concern regarding the requests being unrealistic.

**AMENDED SUBSTITUTE MOTION:** **Rep. Gallagher** made an amended substitute motion to introduce **RS 31158** and recommend it be sent directly to the Second Reading Calendar.

**ROLL CALL  
VOTE ON  
AMENDED  
SUBSTITUTE  
MOTION:**

**Chairman Vander Woude** requested a roll call vote on the amended substitute motion. **Motion failed by a vote of 5 AYE, 8 NAY. Voting in favor** of the motion: **Reps. Kingsley, Mitchell, Gallagher, Redman, Vander Woude. Voting in opposition** to the motion: **Reps. Erickson, Blanksma, Dixon(24), Healey, Wheeler, Wilson, Rubel, Roberts.**

**ROLL CALL  
VOTE ON  
SUBSTITUTE  
MOTION:**

**Chairman Vander Woude** requested a roll call vote on the substitute motion. **Motion carried by a vote of 8 AYE, 5 NAY. Voting in favor** of the motion: **Reps. Erickson, Blanksma, Dixon(24), Healey, Wheeler, Wilson, Rubel, Roberts. Voting in opposition** to the motion: **Reps. Kingsley, Mitchell, Gallagher, Redman, Vander Woude.**

Due to time constraints, **RS 31158** did not come before the committee.

**ADJOURN:**

There being no further business to come before the committee, the meeting adjourned at 10:56 a.m.

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Representative Vander Woude  
Chair

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Irene Moore  
Secretary