

MINUTES  
**SENATE HEALTH & WELFARE COMMITTEE**

**DATE:** Thursday, February 15, 2018

**TIME:** 3:00 P.M.

**PLACE:** Room WW54

**MEMBERS PRESENT:** Chairman Heider, Vice Chairman Souza, Senators Martin, Lee, Harris, Agenbroad, Foreman, Potts, and Jordan

**ABSENT/ EXCUSED:** None

**NOTE:** The sign-in sheet, testimonies and other related materials will be retained with the minutes in the committee's office until the end of the session and will then be located on file with the minutes in the Legislative Services Library.

**ADJOURNED:** **Chairman Heider** called the meeting of the Health and Welfare Committee (Committee) to order at 3:00 p.m.

**PAGE FAREWELL:** **Chairman Heider** recognized and thanked Heidi Kofoed for her excellent work as the Committee page. **Ms. Kofoed** thanked the Committee and spoke about her experience as a Senate page.

**APPROVAL OF MINUTES:** **Vice Chairman Souza** moved to approve the Minutes of January 29, 2018. **Senator Jordan** seconded the motion. The motion carried by **voice vote**.

**H 0343** **Dentistry, Dental Specialists.** **Susan Miller** introduced herself as the Executive Director of the Idaho Board of Dentistry (BOD). Current Idaho law states dental specialties are determined by the American Dental Association (ADA). **Dr. Miller** explained **H 0343** would strike references to the ADA from this section of Idaho Code and give the BOD the authority to recognize the specialty areas of dental practice. **Dr. Miller** stated the BOD is prepared to engage stakeholders in the rulemaking process that would result from this legislation. The legislation would have no fiscal impact.

**MOTION:** There being no testimony or questions, **Senator Martin** moved to send **H 0343** to the floor with a **do pass** recommendation. **Vice Chairman Souza** seconded the motion. The motion carried by **voice vote**. Senator Martin will carry this bill on the floor of the Senate.

**H 0344** **Dental Hygienists, Access Settings.** **Dr. Miller** explained this bill would revise the definition of "extended access oral health care program" and the associated supervision requirements. Current law requires supervising dentists in extended access oral health care programs to be employed by, retained by, or a volunteer for the program. **Dr. Miller** asserted requiring a relationship between the supervising dentist and the program creates a barrier to care. This legislation would also replace language referring to locations with the broader term "practice setting." This legislation would have no fiscal impact.

**DISCUSSION:** **Chairman Heider** asked for the definition of practice settings. **Dr. Miller** stated practice settings refer to locations such as dental offices and extended access oral health care programs. Using the term "practice settings" throughout the legislation would be more consistent.

**Senator Lee** asked how this legislation relates to a BOD rule which places a 75-mile restriction on the practice of teledentistry. **Dr. Miller** stated this legislation discusses authorization for procedures performed by dental hygienists, which relates to teledentistry, an extended access oral health care setting.

- MOTION:** There being no more testimony or questions, **Senator Jordan** moved to send **H 0344** to the floor with a **do pass** recommendation. **Senator Lee** seconded the motion. The motion carried by **voice vote**. Senator Jordan will carry the bill on the floor of the Senate.
- H 0345** **Dentistry, Convictions.** **Dr. Miller** stated this legislation expands the definition of "conviction" in the Dental Practice Act by including a finding of guilt under the Uniform Code of Military Justice (UCMJ). This will clarify the BOD's authority when considering applicants for licensure, or when considering conduct of licensees who have been convicted of a crime by a military tribunal. **Dr. Miller** asserted it is currently unclear that conviction under the UCMJ is covered in the Dental Practice Act's current definition of conviction. **Dr. Miller** noted, in the past two years, the BOD has considered the applications of two dentists who were convicted of felony-level conduct under the UCMJ.
- DISCUSSION:** **Senator Potts** asked if this specification is necessary. He asked if the BOD had to accept the applications of the two dentists convicted under the UCMJ because Idaho law does not specify UCMJ convictions as convictions. **Dr. Miller** stated there was no issue with the two convicted dentists because they did not appeal the rejection of their applications. However, she explained the current definition of conviction does not include UCMJ conviction.
- MOTION:** There being no more testimony or questions, **Senator Agenbroad** moved to send **H 0345** to the floor with a **do pass** recommendation. **Vice Chairman Souza** seconded the motion. The motion carried by **voice vote**. Senator Agenbroad will carry this bill on the floor of the Senate.
- H 0346** **Board of Dentistry, Compensation.** **Dr. Miller** explained BOD member compensation has remained static at \$50 per day for many years. Members are compensated for each day spent in the performance of duties, which typically consists of one to one-and-a-half meeting days per quarter. BOD members spend a significant amount of non-compensated time traveling and reviewing materials before meetings. This legislation would increase BOD member compensation to \$100 per day. **Dr. Miller** stated the BOD is a dedicated fund agency; therefore, this legislation would not impact the General Fund. **H 0346** would result in a yearly draw of less than \$5,000 from the BOD's dedicated fund.
- DISCUSSION:** **Senator Martin** inquired as to the current balance of the BOD's fund. **Dr. Miller** stated the BOD's fund is currently equal to 100-150 percent of the BOD's operating budget.
- Senator Jordan** asked when the per diem pay for BOD members was last increased. **Dr. Miller** stated that the rate was last increased sometime before 1985.
- MOTION:** There being no more testimony or questions, **Senator Martin** moved to send **H 0346** to the floor with a **do pass** recommendation. **Vice Chairman Souza** seconded the motion. The motion carried by **voice vote**. Senator Martin will carry this bill on the floor of the Senate.

**Medicaid, Nursing Facilities.** **Alexandra Fernandez** introduced herself as the Bureau Chief of the Bureau of Long-Term Care in the Division of Medicaid within the Department of Health and Welfare (DHW). This legislation is meant to implement quality incentive programs for skilled nursing facilities. **Ms. Fernandez** stated skilled nursing facilities are required to contribute to the Assessment Fund annually. The Division of Medicaid is then able to add federal matching funds to the Assessment Fund. The Fund is used to pay participating facilities based on the number of days the facility serves Medicaid participants. In order to retain this revenue source for skilled nursing facilities, Idaho must comply with federal regulations pertaining to these types of payments. This bill would ensure compliance by incorporating a quality component into the existing Assessment Fund distribution method. This legislation would also allow Idaho's three veterans homes to participate in the Skilled Nursing Facility Quality Program.

The Division of Medicaid formed a workgroup, which established quality measures and payment distribution that will be used during the first five-year period of the Skilled Nursing Facility Quality Program. Quality measures are based on resident data that skilled nursing facilities already collect and supply to the Centers for Medicare and Medicaid Services (CMS). Full implementation of the program would occur in State fiscal year (FY) 2021. The proposed payment distribution method would ensure that facilities have the opportunity to earn 100 percent of their allocation if they are high performers or if they demonstrate improvement over time. The Division of Medicaid workgroup will meet on a semi-annual basis to discuss the program. **Ms. Fernandez** asserted this legislation would have no fiscal impact to the State.

**DISCUSSION:**

**Senator Lee** asked if this assessment would replace the licensing process. She asked if the two processes are similar. **Ms. Fernandez** stated the proposed assessment is separate and distinct from the licensing process. **Senator Lee** asked if the assessment is part of a review process that determines the allocation of funds. **Ms. Fernandez** responded in the affirmative. She explained this initiative is meant to improve quality over time. She also noted that the quality data necessary for the proposed assessment comes from an existing data source.

**Senator Potts** asked if facilities who do not meet certain standards received a reduced allocation. **Ms. Fernandez** responded in the affirmative. She explained any money remaining in the Assessment Fund would be distributed evenly among the participating facilities. **Senator Potts** asked how the remaining funds are distributed across the remaining facilities. **Ms. Fernandez** explained the distribution would be based upon the number of days a facility serves a Medicaid resident. **Senator Potts** asked if facilities have the opportunity to resolve issues found in the assessment prior to losing a portion of their funding. **Ms. Fernandez** explained that the program would begin collecting data in 2019, but would not implement the proposed distribution method until 2021. This would allow facilities to rectify problems before their payments are impacted.

**Vice Chairman Souza** noted quality measures must be based on a periodic evaluation. She asked who would conduct the evaluation, how much an evaluation would cost a facility, how often facilities would be evaluated, and whether a facility could dispute the findings of an evaluation. **Ms. Fernandez** stated quality data is collected by the skilled nursing facility. The data is derived from an evaluation of each resident's functionality. It is collected upon a resident's admission to the facility and approximately every three months thereafter. The data is then submitted to CMS. **Ms. Fernandez** noted that the Skilled Nursing Facility Quality Program would be utilizing an existing data set.

**Vice Chairman Souza** asked if the natural decline of a patient's health would reflect

poorly upon a facility in the proposed assessment. **Ms. Fernandez** explained the quality measures focus upon preventable conditions such as pressure ulcers or falls resulting in major injury. **Vice Chairman Souza** asked if reimbursement from the Assessment Fund is based upon self-reported data from the facilities. **Ms. Fernandez** responded in the affirmative.

**TESTIMONY:** **Rick Holloway** introduced himself as the Home Administrator of the Idaho State Veterans Home in Boise. He expressed support for **H 0336**, which would allow Idaho State Veterans Homes to participate in the program.

**DISCUSSION:** **Senator Potts** asked if the evaluation standards could be so costly that facilities would prefer to take the loss over improving the facility. **Mr. Holloway** responded in the negative.

**MOTION:** There being no more testimony or questions, **Senator Harris** moved to send **H 0336** to the floor with a **do pass** recommendation. **Senator Potts** seconded the motion. The motion carried by **voice vote**. Senator Harris will carry this bill to the floor of the Senate.

**ADJOURNED:** There being no further business, **Chairman Heider** adjourned the meeting at 3:38 p.m.

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Senator Heider  
Chair

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Rachel Goodman  
Secretary