



## 2017 IDAHO LEGISLATURE

### UPDATE

March 27, 2017

The 2017 Idaho Legislature was scheduled to adjourn this past Friday, however factions within the Republican dominated House have pushed the session into its final week. During the session, 534 bills were introduced. Of those 18 failed and another 148 are being held in committee with no action. 133 have been signed by the Governor and will become law on July 1<sup>st</sup>. Another 93 have been sent to the Governor for his signature. These numbers show the difficulty in passing legislation.

The 2017 session was very bland overall with little substantive action. The last few days have been the most active considering tax cuts and highway repair. The major controversy was generated by a group of ultra-right-wing legislators fighting the conventional House leadership through accusations and attacks in the media, public demonstrations and tactics to stall floor action. This included challenges to House rules and requests to read bills on the floor word-for-word.

Regarding Health Care, the Legislature was in a “wait-and-see” mode, waiting for the federal government to “repeal and replace” the Affordable Care Act. So, no action was taken to address those working Idahoans caught in the “Gap” between coverage under Medicaid and federal subsidy to purchase health insurance. Four bills with minimal intention to solving the Gap were aired. Three did not get a hearing and the fourth failed. The substance of those bills was the outcome of an interim legislative workgroup last summer providing \$10M for basic primary care and only covering a portion of those in the Gap. Now that Congress has withdrawn the “American Health Care Act,” there is a remote opportunity before this year’s legislative session closes to expand Medicaid to cover those in the Gap.

Several bills to extend consumer choice in health care did pass including allowing pharmacists to prescribe low-risk, single application medications; chiropractors to administer IV vitamin and mineral solutions, and psychologists to prescribe limited psychiatric medications.

A bill to address the faith-healing exemption to the Child Welfare Act which would have allowed court intervention in cases where parents refuse medical treatment for preventable, life-threatening illnesses, failed with strong defense for prayer and freedom of religion over life.

All the rules and bills proposed by the Board of Nursing passed with no opposition. A bill to clarify that advanced practice nurses, in addition to physicians and physician assistants, limited to their scope of practice and authorized by the facility credentialing process, can admit patients to psychiatric facilities, also passed and will become law in July.



## **Board of Nursing Rules**

Two bills and four rules presented by the Board of Nursing were adopted:

### Expand Clinical Preceptors for Advanced Practice Nursing Programs

To expand preceptor opportunities for advanced practice nurses, the rule allows MDs, DOs, and physician assistants practicing in an area relevant to the educational course objectives of the APRN student to be preceptors.

### Expand Official Board Notifications to Include e-mail

Given the current use of e-mail as a method of communication, the rule allows the Board of Nursing to use e-mail, when allowed by the recipient, to receive official notices, such as summons, complaints, and subpoenas, as an alternative to traditional mail.

### Clarify “Impairment Related Disability”

The rule expands and clarifies the definition of impairment, including “alcohol” or “drug abuse,” in the rules by replacing “Impairment Related Disability” with “Substance Use and Mental Health Disorders.”

### Eliminate the Renewal and Fee for Emeritus Status Licensure

Emeritus Licensure is a classification available to retired or non-practicing nurses, allowing them to continue to use their license designation (RN, LPN, APRN), but not allowed to actively practice.

Current rules assess a \$25 fee every two years to renew an Emeritus license. The new rule would eliminate the renewal fee, and an associated bill would eliminate the necessity to renew the Emeritus license every two years, making the Emeritus status a lifetime designation.

### Increase Compensation for Members of the Board of Nursing

Since the compensation for members of the Board of Nursing is set in law rather than rule, this bill increases the daily compensation for Board members from \$50/day to \$75/day. The last increase in compensation for Board members was in 1998 (19 years ago).

*New rules become effective upon adjournment of the Legislature, “sine-di.”*

*Bills passed by the House and Senate and signed by the Governor become law on July 1<sup>st</sup> unless there is an emergency clause which makes them effective at the end of the legislative session.*



## Passed in 2016 - Continued Competence Requirements for Renewal of an Active License

The rules add requirements for continuing education and/or clinical practice when renewing a nursing license. The additional competency requirements will become effective with the 2018 licensure renewal cycle.

- A licensee must complete at least two learning activities within the two-year licensure renewal period.
  - Practice: Current nursing specialty certification or 100 hours of actual or simulated clinical practice
  - Continuing Education:
    - 15 contact hours
    - 1 semester credit hour from college or university
    - Board recognized refresher course
    - Participation in or presentation of a workshop, seminar, conference or course relevant to nursing practice by a recognized organization.
- The rule specifies requirements for documentation and the retention of records.

## **BILL SUMMARY**

- H0003**      **PHARMACISTS – PASSED** - Allows pharmacists to prescribe and administer a tuberculin purified derivative product for screening purposes under certain circumstances. Passed House. Approved by Senate. Signed by Governor. Becomes Law.
- H0004**      **PHARMACISTS – PASSED** - Allows pharmacists to prescribe tobacco cessation products. Passed House. Approved by Senate. Signed by Governor. Becomes Law.
- H0081**      **J-1 VISA WAIVER PROGRAM – PASSED** - The Visa Waiver Program currently allows recruitment of up to 30 foreign primary care physicians to practice in underserved areas. The bill would allow 10 of the 30 positions to be used to recruit specialty physicians. Signed by Governor. Becomes Law.
- H0091**      **IMMUNIZATION REGISTRY – FAILED** - Idaho Immunization Reminder Information System (IRIS) reporting. IRIS is maintained by the Department of Health & Welfare and is a centralized database to track and notify providers and patients of recommended vaccinations, immunization information, and recall notifications. There is an opt-out provision for those who do not wish to be tracked. Failed House. Bill Died.
- H0146**      **SEXUAL ASSAULT MEDICAL EXAMS, ASSAULT EVIDENCE, NOTIFICATION – PASSED** - Victims of sexual assault cannot be denied a medical examination. Inability to pay cannot be an obstacle to receiving an examination. Addresses retention of evidence and

notification of victim of case status change. Signed by Governor. Becomes Law.

- H0160 HEALTH CARE ASSISTANCE PROGRAM – WITHDRAWN** - Primary care, limited prescription and care coordination to cover primary healthcare for those not qualifying for employer or governmental coverage or subsidy including Medicaid, Medicare or enrollment in the healthcare exchange. House Health & Welfare – Withdrawn. Reintroduced as **S1142**.
- H0161 LICENSING OF MEDICAL LABORATORY PRACTITIONERS – HELD** - Establishes licensure requirements for medical lab science practitioners. House Health & Welfare.
- H0191 PHARMACY PRESCRIPTION AUTHORITY – PASSED** - Allows the Board of Pharmacy to authorize pharmacists to prescribe. Signed by Governor. Becomes Law.
- H0195 CLINICAL NUTRITION CERTIFICATION – PASSED** - Allows the limited administration by IV of mineral and vitamin preparations by chiropractors. Signed by Governor. Becomes Law.
- H0212 PSYCHOLOGISTS PRESCRIPTION AUTHORITY – PASSED** - Allows limited prescription authority for mental health drugs. Requires psychopharmacology degree and one year psychiatrist supervision. Signed by Governor. Becomes Law.
- H0310 IDAHO ACCOUNTABLE COMMUNITY CARE ACT – HELD** - Creates primary care program for Medicaid and those at less than 100% federal poverty level, creates standards for providers, and incentives for addressing primary care physician shortage. House Ways & Means Committee
- S1003 NURSES LICENSES, EMERITUS/REINSTATE – PASSED** - Eliminates the necessity for a nurse to renew a license on emeritus status. Passed Senate. Passed House. Signed by Governor. Becomes Law.
- S1004 NURSING BOARD COMPENSATION REVISED – PASSED** - Increases compensation for Board of Nursing members from \$50/day to \$75/day. Passed Senate. Passed House. Signed by Governor. Becomes Law.
- S1050 IMMUNIZATION FORM – HELD** -Allows parents to use any written communication to decline having their children immunized rather than using the Department of H&W form that includes acknowledgement of the risk of not immunizing but does not include information on the risks associated with immunizations. Held in Senate Health & Welfare for revisions.
- S1058 TELEHEALTH ACCESS – FAILED** - Requires insurers to cover telehealth in an “equivocal” manner as face-to-face healthcare services. Failed Senate. Bill Died.

- S1060**      **CYTOMEGALOVIRUS INFORMATION – PASSED** – Require the Department of Health and Welfare to provide information on the risks of cytomegalovirus to the public, pregnant women and healthcare providers. Signed by Governor. Becomes Law.
- S1081**      **IMMUNIZATION ASSESSMENT BOARD SUNSET REAUTHORIZATION – PASSED** - The bill reauthorizes the Idaho Immunization Assessment Board that funds the Universal Childhood Vaccine Program to distribute vaccines to providers throughout Idaho. Passed Senate. Passed House. Signed by Governor. Becomes Law.
- S1082**      **COMMUNITY PRIMARY CARE PROGRAM – HELD** - Would cover the initial \$600 for primary care physician visits, lab, drugs, and health coaching for specified chronic illness management for 15,000 adults in the coverage gap. Senate Health & Welfare.
- S1090**      **HEALTH CARE ADVANCED DIRECTIVES – PASSED** – Clarifies the rights of developmentally disabled to consent to their own healthcare without a guardian’s consent, including the ability to revise or withdraw advanced directives. Clarifies presumed consent to resuscitate. Held in Senate for amendment. Passed Senate. Passed House. Sent to Governor.
- S1139**      **HOSPITAL ADMISSION AUTHORITY – PASSED** – Clarifies that Advanced Practice Nurses and physician assistants, in addition to physicians, can admit patients to psychiatric facilities subject to their scope of practice, privileges and facility policy.
- S1142**      **HEALTH CARE ASSISTANCE PROGRAM – FAILED** - Primary care, limited prescription and care coordination to cover primary healthcare for those not qualifying for employer or governmental coverage or subsidy including Medicaid, Medicare or enrollment in the healthcare exchange. Failed Senate.