## LEGISLATURE OF THE STATE OF IDAHO

Sixty-third Legislature

First Regular Session - 2015

## IN THE HOUSE OF REPRESENTATIVES

## HOUSE BILL NO. 218

## BY APPROPRIATIONS COMMITTEE

1 AN ACT

APPROPRIATING MONEYS TO THE DEPARTMENT OF HEALTH AND WELFARE FOR THE HEALTH-CARE POLICY INITIATIVES PROGRAM FOR FISCAL YEAR 2015; APPROPRIATING ADDITIONAL MONEYS TO THE DEPARTMENT OF HEALTH AND WELFARE FOR THE PHYSICAL HEALTH SERVICES PROGRAM FOR FISCAL YEAR 2015; REDUCING THE APPROPRIATION TO THE DEPARTMENT OF HEALTH AND WELFARE FOR THE MEDICALLY INDIGENT ADMINISTRATION PROGRAM FOR FISCAL YEAR 2015; AUTHORIZING ADDITIONAL FULL-TIME EQUIVALENT POSITIONS FOR THE PHYSICAL HEALTH SERVICES PROGRAM FOR FISCAL YEAR 2015; REDUCING THE NUMBER OF FULL-TIME EQUIVALENT POSITIONS FOR THE SOUTHWEST IDAHO TREATMENT CENTER FOR FISCAL YEAR 2015; REDUCING THE NUMBER OF FULL-TIME EQUIVALENT POSITIONS FOR THE MEDICALLY INDIGENT ADMINISTRATION PROGRAM FOR FISCAL YEAR 2015; LIMITING THE NUMBER OF AUTHORIZED FULL-TIME EQUIVALENT POSITIONS FOR THE HEALTHCARE POLICY INITIATIVES PROGRAM FOR FISCAL YEAR 2015; REPORTING ON IMPLEMENTATION OF THE SHIP GRANT; AND DECLARING AN EMERGENCY.

Be It Enacted by the Legislature of the State of Idaho:

SECTION 1. There is hereby appropriated to the Department of Health and Welfare for the Healthcare Policy Initiatives Program, from the Cooperative Welfare (Federal) Fund, the following amounts to be expended for the designated expense classes, for the period July 1, 2014, through June 30, 2015:

21 FOR:

22 Personnel Costs

\$250,000

23 Operating Expenditures

3,229,800

24 TOTAL

\$3,479,800

SECTION 2. In addition to the appropriation made in Section 1, Chapter 177, Laws of 2014, and any other appropriation provided for by law, there is hereby appropriated \$41,900 from the Cooperative Welfare (Federal) Fund to the Department of Health and Welfare for the Physical Health Services Program, to be expended for personnel costs, for the period July 1, 2014, through June 30, 2015.

SECTION 3. Notwithstanding any other provision of law to the contrary, the appropriation made to the Department of Health and Welfare for the Medically Indigent Administration Program, in Section 1, Chapter 328, Laws of 2014, from the Cooperative Welfare (General) Fund, is hereby reduced by the following amounts according to the designated expense classes for the period July 1, 2014, through June 30, 2015:

for:

SECTION 4. FTP AUTHORIZATION. The full-time equivalent position authorization provided to the Department of Health and Welfare for the Physical Health Services Program, in Section 2, Chapter 177, Laws of 2014, is increased by one (1) for the period July 1, 2014, through June 30, 2015.

SECTION 5. FTP AUTHORIZATION. The full-time equivalent position authorization provided to the Department of Health and Welfare for the Southwest Idaho Treatment Center, in Section 2, Chapter 295, Laws of 2014, is reduced by eight (8) for the period July 1, 2014, through June 30, 2015.

SECTION 6. FTP AUTHORIZATION. The full-time equivalent position authorization provided to the Department of Health and Welfare for the Medically Indigent Administration Program, in Section 2, Chapter 328, Laws of 2014, is reduced by one (1) for the period July 1, 2014, through June 30, 2015.

SECTION 7. FTP AUTHORIZATION. In accordance with Section 67-3519, Idaho Code, the Department of Health and Welfare for the Healthcare Policy Initiatives Program, is authorized no more than seven (7) full-time equivalent positions at any point during the period July 1, 2014, through June 30, 2015, unless specifically authorized by the Governor. The Joint Finance-Appropriations Committee will be notified promptly of any increased positions so authorized.

SECTION 8. REPORTING ON IMPLEMENTATION OF THE SHIP GRANT. The Health-care Policy Initiative Program shall report on an annual basis, the status of the State Healthcare Innovation Plan (SHIP) to the Legislative Services Office and the Division of Financial Management. The report shall include comments and suggestions from private insurers, private providers, and other active stakeholders on the process of moving from the current fee-for-service medical model to a capitated model of healthcare delivery. The report should also include results of any performance metrics required by the grant, in addition to updates on potential solutions for the State of Idaho. This report shall be submitted no later than December 31, 2015.

SECTION 9. An emergency existing therefor, which emergency is hereby declared to exist, this act shall be in full force and effect on and after its passage and approval.