

From the Desk of Jim Genetti

## **November Health Care Task Force Meeting**

### **Report**

#### **Behavioral Health Transformational Working Working Group**

Skip Oppenheimer, chairman of the Governor's Behavioral Health Transformation Work Group gave a report on the group's Behavioral Health Plans recommendation that legislation be drafted and presented in the 2011 session that will establish a Behavioral Transformation Office (BHTO) and a Director of that office is named. The director would be appointed to champion the effort of transformation on a local, regional and state level.

The plan address issues associated with the existing mental health and substance abuse disorder systems which currently feature inconsistent service standards and the use of high cost crisis and hospitalization services or incarceration. The mental health and substance abuse systems currently operate independent of each other and this has created fragmented services and duplication of efforts. The plan has specific recommendations to address the problems of the current system at the same time addressing budgetary constraints currently being affected by the economy.

If anyone would like to read the full report I have a copy.

#### **Suicide Prevention**

Former Representative Kathy Garrett gave a presentation on suicide prevention and the impact a Suicide Hotline could have on the suicide problem. Presently, the Idaho suicide hotline is handled out of Oregon. Idaho ranks 11<sup>th</sup> in the nation for per capita suicides. Ms. Garrett will be presenting legislation to fund a suicide hotline network in Idaho.

#### **Report of the Director of Insurance**

The Director gave an overview on the Department's progress on creating the Insurance Exchanges. The Director and Shad Priest, Deputy Director, visited Utah to look at Utah's exchange which has been in place for several months. Their conclusion was that the Utah exchange would not meet the federally mandated requirements and would not work in Idaho because it only addresses small groups and not the individual health insurance market. Presently Utah's plan has about 200 companies enrolled and about 5,000 participants.

The Director stated that the objectives of the exchanges would be greater choices of plans, expanded access, greater individual control and responsibility, higher quality of benefits and ultimately improved health on the part of the participants.

**The ultimate goal of the department as stated by the Director is to keep the companies viable and include the Producers and Agents in selling and servicing insurance health products.**

The Department plans on having an Exchange Design completed by January 1, 2013, which will be implemented January 1, 2014.

The Department intends to conduct Town Hall meetings on the Exchange Plan through 2011.

### **Idaho Immunization Assessment Board**

Dr. Richard Rainey gave a report on the immunization board actions. He stated that the board was formed to develop a funding mechanism for child immunization as required under the Idaho insurance code. The funding mechanism has been established and all Health care insurance companies as well as Self-funded groups will be assessed to fund child immunization.

This assessment establishes a single source of vaccine free of charge to medical providers throughout Idaho.

Health and Welfare

### **Report on the Department's effort to comply with the federal health reform**

Director, Dick Armstrong reported that the Patient Protection and Affordable Care Act of 2010 had already had an impact on the state's Medicaid Program because of the expanded benefits and the fact that more individuals will qualify for the services because the income cutoff level to qualify for Medicaid will be raised to 133% of poverty level. The Director stated that 108,000 more Idahoans will be covered by Medicaid due to the change in qualification requirements and that by 2020 about 40% of Idahoans will be on the plan.

The increased levels will go into effect in 2014 and will initially be covered 100% by the Federal Government. The percentage covered by the Federal government will gradually decrease to 90% by year 2020.

The Director did state that their present computer system could handle the increased work load that will be brought by the new health care mandates.

Pacific Source was suppose to report on their progress in response to the federal health care reform, however it was reported the Dave Self was ill and could not attend the Task Force Meeting.

I did not attend the afternoon session since there was no insurance specific issues being addressed.