

Grant Waiver Applications under EO 2011-03

Governor Otter signed Executive Order (EO) 2011-03 Prohibiting Executive Branch departments, agencies and institutions of the State from Implementing the *Patient Protection and Affordability Care Act (PPACA)*. The EO states that agencies or employees may not promulgate rules, enter into agreements, provide resources or expend federal funds to implement provisions of PPACA. However, a waiver process was included to ensure agencies could seek permission to continue programs that did not implement provisions of Obamacare or were in existence before the law passed. Many previously granted program funding sources were combined with the federal health care legislation and should be evaluated individually based on the program's merits and the needs of Idaho citizens.

The following list is an overview of the waivers the Governor has reviewed. The list will be updated as subsequent waiver requests are considered.

Health and Welfare

Grant waivers that have been approved:

- **Tobacco Cessation funding for media campaigns** to promote the use of Quitline, QuitNet and Nicotine Replacement Therapies for people trying to quit smoking. This was a grant H&W applied for in past years, but is now included under PPACA funding. The Department is planning a one-time media buy that will run from October 2011 to March 2012. Tobacco users historically report increased attempts to quit tobacco during this time of year. **Waiver request amount: \$82,100.** (2011)
- **Building and Strengthening Epidemiology, Laboratory, and Health Information Systems Capacity in State and Local Health Departments.** To increase the public health laboratory's capacity to identify and respond to disease clusters and improve H&W's ability to exchange electronic data between physician's electronic health record systems and public health disease surveillance systems. The Department's goal is to improve disease tracking using electronic disease laboratory reports; increase number of laboratories reporting electronically; improve hospital infection tracking and control. **Waiver request amount: \$785,000. This is a renewal request of a multi-year grant—H&W received \$304,000 prior to the Governor's Executive Order.** (2011)
- **Health Homes for Medicaid Enrollees with Chronic Conditions**—This is a planning grant that needs state matching funds. The federal government will pay 70 percent of costs, while the state will pay 30 percent. The grant allows H&W to develop a health home model for people with multiple chronic conditions. This group of Medicaid enrollees are large users of medical benefits and some of H&W's most expensive individuals to insure. As an example, a person with a chronic mental illness who also has another chronic disease such as diabetes will have their case managed to reduce inappropriate use of

emergency rooms, and reduce both hospitalizations and nursing home admissions. The Legislature appropriated \$91,400 to use as the state match, which will pay 30 percent of costs. This will leverage \$213,000 in federal funds. **Waiver request amount: \$213,000.** (2011)

- **Strengthening Public Health Infrastructure for Improved Health Outcomes.** The overall intent is to improve public health accountability by improving business practices and using evidence-based programs (CDC has a process by which they identify evidenced based programs). For example, H&W is implementing tighter contract monitoring and fiscal controls; using funding to conduct evaluations of program effectiveness and efficiencies. Our focus is to decrease costs and adopt prudent measures in an economically challenged environment. **Waiver request amount: \$300,000. This is a renewal request—H&W received \$200,000 from the same grant prior to the Executive Order.** (2011)
- **Prevention and Public Health Fund – Coordinated Chronic Disease Prevention and Health Promotion Program--** Since March 2008 Idaho Public Health has received funding that is utilized for activities in communities related to chronic diseases such as diabetes, stroke, arthritis, etc. These funds are used for working with health care providers for implementation of best practices in hypertension and diabetes clinical care, obesity and active community design, etc. These funds are now in the PPACA. The Chronic Disease Prevention and Health Promotion grant will allow public health to continue ongoing state/local planning activities and application of evidence-based practices. **Waiver request: \$589,000 per year for three years.** (2011)
- **Maternal, Infant and Early Childhood Home Visiting Program--** Some of Idaho's most expensive social problems are rooted in early childhood. Helping families provide healthy, stable home environments during the critical years of a child's development increases that child's health and success later in life. One of the most effective programs is an early childhood home visiting program in which trained professionals visit homes and provide coaching, education and information to support families. The Idaho home visiting program is being planned for Kootenai, Shoshone, Jerome and Twin Falls counties. **Waiver request amount: \$1,000,000. This is a renewal request—H&W received \$785,000 to plan and begin a home visiting program prior to the Executive Order.** (2011)
- **Public Prevention Health Fund for Community Transformation Grants—**This grant provides prevention money to community partners to prevent the leading causes of death and disability—cancer, heart attacks, strokes and diabetes. Funding is provided to community partners for prevention work, which would include district health departments, hospitals, cities, YMCAs, universities and other organizations. Funds are targeted to be used to address tobacco-free living; active living and healthy eating; high impact quality clinical and other preventive services; and healthy and safe physical environments. **Waiver request amount: \$2 million per year over a five-year funding cycle.** (2011)

- **Building and Strengthening Epidemiology, Laboratory, and Health Information Systems Capacity in State and Local Health Departments.** The goal of this funding is to enhance public health programs, improve population health, and help restrain the rate of growth of health care costs through building epidemiology, laboratory, and health information systems capacity in state and local public health departments. **Waiver request amount: \$1,150,000.** (2012)
- **Empowering Older Adults and Adults with Disabilities through Chronic Disease Self-Management Education Programs.** The program is intended to increase the number of older and/or disabled adults with chronic conditions who complete evidence-based chronic disease self-management programs to maintain or improve their health status and to strengthen and expand integrated, sustainable service systems within State to provide evidence-based chronic disease self-management programs. Waiver request amount: **Between \$200,000 and \$575,000 per year for 3 years.** (2012)
- **Breast and Cervical Cancer Screening Opportunities for States, Tribes and Territories.** The goal of this program is to provide additional funding to cover the increased number of low income and rural area women screened for breast and cervical cancer. Screening and early detection of breast and cervical cancer contribute significantly to improved outcomes and reduced costs. **Waiver request amount: \$110,000.** (2012)
- **Adult Medicaid Quality Measures.** This grant will be used to create a quality measures collection plan for Medicaid. Centers for Medicare and Medicaid is providing this grant opportunity to assist state Medicaid agencies with the costs associated with collecting and reporting data required under the Patient Protection and Affordable Care Act on adult quality measures data. **Waiver request amount: \$2 million.** (2012)
- **State Innovation Models: Model Design Grant.** This grant is a six month model development planning grant to test whether new payment and service delivery models will produce superior results when implemented in the context of a state health care innovation plan. This project will build upon initiatives started by the Medical Home Collaborative. **Waiver request amount: \$3 million.** (2012)
- **Strengthening Public Health Infrastructure for Improved Health Outcomes.** These funds are for year 4 of a 5 year project period. The grant's purpose is to improve the accountability, efficiencies and effectiveness of public health programs by improving business practices using evidence-based policies and quality improvement strategies. **Waiver request amount: \$300,000.** (2013)
- **Maternal, Infant, and Early Childhood Home Visiting Program Extension Grants.** This grant provides funding to states that have made significant progress towards implementing high-quality, effective home visiting programs as part of a comprehensive early childhood system. This funding will build on the existing formula funding and support quality implementation of evidence-based home visiting programs through increased family enrollment and retention. **Waiver request amount: \$3,200,000.** (2013)

Grant waivers that have been denied:

Health and Welfare

- **The Community First Choice Option** is a Medicaid grant that expands home and community based services to people who at this time do not qualify for those services. To help pay for the expansion, the feds would increase their share of expenses in the first year to 76 percent of costs (up from about 70 percent today.) There is no set amount of funding to apply for everyone on Medicaid who qualifies for the expanded use of services can receive the services. (2011)
- **Medicaid Emergency Psychiatric Demonstration Project** is a three year Medicaid pilot project that will only be awarded to selected states. The pilot funding would provide Medicaid payments to private psychiatric providers for emergency psychiatric services to Medicaid recipients. These services are not currently covered under the Medicaid program and would require an additional state match. (2011)

Other Agencies' Approved Waivers

Idaho State University:

- **Idaho State University Family Medicine Residency Program.**
This funding continues support for one of the two physician residency programs. The funding does not implement new federal health care provisions, but is intended to sustain development of new family doctors in the state.
Waiver request amount: up to \$1,200,000 (budget is still pending). (2011)
- **Primary Care Physician Assistants: Linguistic and Cultural Competence Curricular Determinants of Career Choice in a Rural PA Program.** The funding does not implement new federal health care provisions, but is intended to provide funding for physicians' assistants instead of physicians and will help meet the medical needs of underserved areas of the state, particularly the Hispanic-speaking population. **Waiver request amount: \$642,404.** (2011)
- **Patient-centered Decision Making with Rural Elderly Patients for Elective Surgery.**
The funding does not implement new federal health care provision, but is intended to provide information about the best available evidence to help Idaho patients and their health care providers make informed decisions and give patients a better understanding of the prevention, treatment, and care options available. **Waiver request amount \$682,822 over a two year period.** (2012)

- **Rural Interprofessional Practice and Collaborative Emergency Services.** This project will improve the interprofessional collaborative care skills of rural nurse generalists during emergencies through interprofessional education and systems innovation. **Waiver request amount \$1,500,000 over a three year period.** (2012)
- **Idaho Senior Refugee Interprofessional Holistic Health Project.** This project will train students from multiple health professions in an interprofessional approach to patient centered care, providing health services to the underserved refugee population in Idaho. **Waiver request amount \$1,500,000.** (2013)
- **Veteran to Bachelor of Science in Nursing Project.** This project combines components of the LPN to BSN program in the School of Nursing, the Practical Nursing program in the College of Technology, and the Veteran’s Sanctuary at ISU to create new opportunities for veterans with medical training to enter the healthcare workforce. **Waiver request amount \$1.4 million.** (2013)
- **REACH Su Comunidad: Health Promotion in Power County.** This project will improve the health outcomes of all residents in Power County, including Hispanic/Latino populations at the community and population level through high-impact, population-wide interventions on physical activity and nutrition. **Waiver request amount \$592,000.** (2013)

College of Southern Idaho:

- **The Idaho Ladder to Success Project.** This grant does not implement new national health care provisions. It is a collaborative project that includes the six regional technical colleges that are part of the Idaho system of Professional-Technical Education. The project will develop an optimum system for building and expanding programs that provide education, experience, and employment for Trade Adjustment Assistance workers and other similar populations that meet the specific needs of Energy, Advanced Manufacturing and Health care sectors in each region. **Waiver request amount: \$12,510,600.** (2011)

Department of Administration:

- The Legislature directed the Department to file the **State’s Employee Health Benefit Plan** as a “grandfathered plan” under the new national health care provisions. In order to comply with the requirements to obtain this status, the department must enhance the State’s employee health benefit plan. The direction from the Legislature is found in HB 323. **Waiver request amount: associated costs added to the State’s employee health benefit plan will be a .66-percent increase equitably distributed between the State and the employees.** (2011)

- **Early Retiree Reinsurance Program (ERRP).** This allows the state to participate in a temporary reimbursement program to reimburse part of the claims cost for participating employment-based plans that provide health insurance coverage for early retirees age 55 and older, but who are not eligible for Medicare.
Waiver request amount: between \$2-2.5 million, based on the availability of \$5 billion set aside for the federal program. (2011)

Department of Labor:

- **State Workforce Planning Development Grant.** This grant funding establishes an integrated work force information system for primary care health occupations. This is the second year of a two year grant.
Waiver request amount: \$150,000. (2011)

Department of Insurance:

- A waiver permitting the Department of Insurance to comply with Centers for Medicare and Medicaid services (CMS) requirements will avoid duplicative review of health insurance rate filings in Idaho and help preserve state oversight of rates. Without a waiver the potential exists for conflicting determinations by the Department and CMS regarding rate filings. In addition, the costs and uncertainty associated with federal review will result in higher costs to insurers, which will likely be passed on to Idaho consumers. **Waiver request amount not applicable.** (2011)
- **SERFF Enhancement.** This waiver allows the agency to participate in expanded electronic data collection and review of insurance rate and form filings. **Waiver request amount: \$84,500** (2013)

Idaho Commission on Aging:

- **Aging and Disability Resource Center Sustainability Program Extension (ADRC).** Funding for this program was not previously connected to the Affordable Care Act. The funding is designed to help support states in pursuing and developing sustainability strategies for the ADRC Options Counseling Program. **Waiver request amount: \$199,758** (2012)
- **Medicare Improvements for Patients and Providers Act.** This grant supports states in developing plans to expand, extend or enhance outreach efforts to Medicaid Part D beneficiaries in senior centers and low income housing developments. **Waiver request amount: \$80,940** (2013)