

**IDAHO BOARD OF HEALTH AND WELFARE  
MINUTES  
May 17, 2018**

The Board of Health and Welfare convened at:  
Pete T. Cenarrusa Building  
450 W. State Street  
Boise, Idaho 83720

**BOARD MEMBERS PRESENT**

Darrell Kerby, Chairman  
Tom Stroschein, Vice-Chair  
Russ Barron, Secretary  
James Giuffré  
Dr. Linda Hatzenbuehler  
Dr. Timothy Rarick  
Senator Lee Heider

**STAFF PRESENT**

Lori Wolff, Deputy Director, FACS and Welfare Services  
Lisa Hettinger, Deputy Director, Behavioral Health, Medicaid, and Public Health  
David N. Taylor, Deputy Director, Support Services  
Tamara Prisoek, Division Administrator, Licensing and Certification  
Kathie Brack, Special Assistant to the Director  
Niki Forbing-Orr, Public Information Manager  
Chris Smith, Public Information Officer  
Lynn Overman, Liaison to the Board  
Fernando Castro, Program Supervisor, Criminal History Unit  
Wayne Denny, Bureau Chief, Emergency Medical Services  
Elke Shaw-Tulloch, Division Administrator, Public Health  
Dieuwke Spencer, Deputy Division Administrator, Public Health  
Kathryn Turner, PhD MPH, Bureau Chief, Public Health  
Christine Hahn, Medical Director, Public Health

**OTHERS PRESENT**

Nicole McKay, Lead Deputy Attorney General  
Jared Tatro, Legislative Services Office, Principal Budget & Policy Analyst

**CALL TO ORDER**

Following proper notice in accordance with Idaho Code, Section 67-2343, and pursuant to call by the Chairman, the meeting of the Idaho Board of Health and Welfare was called to order by Darrell Kerby, Chairman of the Board, at 8:11 a.m. Thursday, May 17, 2018, at the Pete T. Cenarrusa Bldg., 450 W. State Street, Boise, Idaho.

**ROLL CALL**

Director Barron, Secretary, called the roll. Roll call showed **seven (7)** members present. With five **(5)** voting members present, Chairman Kerby declared a quorum. Absent and excused was Representative Fred Wood, Tammy Perkins, Wendy Jaquet and Richard Roberge.

**PUBLIC COMMENT PERIOD**

Chairman Kerby opened the floor for public comment. There being none, the Board advanced to the next order of business.

**ADOPTION OF MINUTES FROM BOARD MEETING ON FEBRUARY 22, 2018**

Motion: Jim Giuffre moved that the minutes of the February 22, 2018, Board meeting be adopted as prepared.

Second: Tom Stroschein

Vote:

Ayes: **Giuffré, Kerby, Stroschein, Hatzenbuehler, Rarick**

Nays: **None**

Motion Carried

**ADOPTION OF MINUTES FROM SPECIAL BOARD MEETING ON MARCH 20, 2018**

Motion: Linda Hatzenbuehler moved that the minutes of the March 20, 2018 Special Board meeting be adopted as prepared.

Second: Jim Giuffre

Vote:

Ayes: **Giuffré, Kerby, Stroschein, Hatzenbuehler, Rarick**

Nays: **None**

Motion Carried

**INTRODUCTION OF TIMOTHY RARICK TO THE BOARD**

Chairman Kerby introduced and welcomed Dr. Rarick to the Board. Mr. Rarick described his education and area of expertise in support of children and families, (see Curriculum Vitae, Attachment 1), and described the family as being the most “humane” organization in society. He speaks annually at the United Nations and has been invited to speak all over the world in support

of family, specifically regarding the role and effect of fathers. He expressed his eagerness to learn from current Board members and provide input through the lens of his professional experience.

**COMMENTS FROM BOARD MEMBERS**

Mr. Rarick was welcomed by the other Board members.

**APPROVAL OF TEMPORARY AND PENDING RULES**

**CRIMINAL HISTORY UNIT**

**DOCKET NO. 16-0506-1801 CRIMINAL HISTORY AND BACKGROUND CHECKS**

Presenter: Fernando Castro

Fernando Castro, Program Supervisor of the Criminal History Unit, presented the Criminal History Unit rule docket for the Board's approval.

Motion: Jim Giuffré moved that the Idaho Board of Health and Welfare adopt the "Temporary" rules for the "Criminal History and Background Checks", presented under Docket No. 16-0506-1801, effective July 1, 2018.

Second: Tom Stroschein

Vote: Ayes: **Giuffré, Kerby, Stroschein, Hatzenbuehler, Rarick**

Nays: **None**

Motion Carried

**EMERGENCY MEDICAL SERVICES**

**DOCKET NO. 16-0102-1801 RULE DEFINITIONS**

Presenter: Wayne Denny

Wayne Denny, Bureau Chief of Emergency Medical Services, presented the Emergency Medical Services rule docket regarding Rule Definitions for the Board's approval.

Motion: Tom Stroschein moved that the Idaho Board of Health and Welfare adopt the "Temporary" rules for "Emergency Medical Services – Rule Definitions", presented under Docket No. 16-0102-1801, effective July 1, 2018.

Second: Jim Giuffré

Vote: Ayes: **Giuffré, Kerby, Stroschein, Hatzenbuehler, Rarick**

Nays: **None**

Motion Carried

**EMERGENCY MEDICAL SERVICES**  
**DOCKET NO. 16-0103-1801 AGENCY LICENSING REQUIREMENTS**

Presenter: Wayne Denny

Wayne Denny, Bureau Chief of Emergency Medical Services, presented the Emergency Medical Services rule docket regarding Agency Licensing for the Board's approval.

Motion: Jim Giuffré moved that the Idaho Board of Health and Welfare adopt the "Temporary" rules for "Emergency Medical Services – Agency Licensing Requirements", presented under Docket No. 16-0103-1801, effective July 1, 2018.

Second: Linda Hatzenbuehler

Vote: Ayes: **Giuffré, Kerby, Stroschein, Hatzenbuehler, Rarick**

Nays: **None**

Motion Carried

**EMERGENCY MEDICAL SERVICES**  
**DOCKET NO. 16-0107-1801 PERSONNEL LICENSING REQUIREMENTS**

Presenter: Wayne Denny

Wayne Denny, Bureau Chief of Emergency Medical Services, presented the Emergency Medical Services rule docket regarding Personnel Licensing Requirements for the Board's approval.

Motion: Linda Hatzenbuehler moved that the Idaho Board of Health and Welfare adopt the "Temporary" rules for "Emergency Medical Services – Personnel Licensing Requirements", presented under Docket No. 16-0107-1801, effective July 1, 2018.

Second: Tom Stroschein

Vote: Ayes: **Giuffré, Kerby, Stroschein, Hatzenbuehler, Rarick**

Nays: **None**

Motion Carried

**PUBLIC HEALTH**  
**DOCKET NO. 16-0211-1801 IMMUNIZATION REQUIREMENTS FOR CHILDREN**  
**ATTENDING LICENSED DAYCARE FACILITIES IN IDAHO**

Presenter: Kathryn Turner

Kathryn Turner, Bureau Chief of Public Health, presented the Public Health rule docket regarding Immunization Requirements for Children Attending Licensed Daycare for the Board's approval.

Motion: Tim Rarick moved that the Idaho Board of Health and Welfare adopt the "Temporary" rules for "Immunization Requirements for Children Attending Licensed Daycare Facilities in Idaho", presented under Docket No. 16-0211-1801, effective May 18, 2018.

Second: Tom Stroschein

Vote: Ayes: **Giuffré, Kerby, Stroschein, Hatzenbuchler, Rarick**

Nays: **None**

Motion Carried

**PUBLIC HEALTH**  
**DOCKET NO. 16-0215-1801 IMMUNIZATION REQUIREMENTS FOR IDAHO**  
**SCHOOL CHILDREN**

Presenter: Kathryn Turner

Kathryn Turner, Bureau Chief of Public Health, presented the Public Health rule docket regarding Immunization Requirements for School Children for the Board's approval.

Motion: Tim Rarick moved that the Idaho Board of Health and Welfare adopt the "Temporary" rules for the "Immunization Requirements for School Children", presented under Docket No. 16-0215-1801, effective May 18, 2018.

Second: Tom Stroschein

Vote: Ayes: **Giuffré, Kerby, Stroschein, Hatzenbuchler, Rarick**

Nays: **None**

Motion Carried

(A copy of current statutes was provided for reference – see Attachment 2)

Jim Giuffré and Senator Heider thanked the Department of Health and Welfare (DHW) for response to public concerns of citizens opposed to immunizations. Mr. Giuffré asked to be on record, stating his appreciation for the need to honor parent desires to exempt their children from immunization, while also educating them on the importance of immunizations and the lack of scientific evidence that immunizations cause autism. He also requested a copy of childhood immunization rates. The rates for children aged 19-35 months are available through the DHW Infant/Toddler program - a copy was provided to the Board (see Attachment 3). Records of school aged children are kept by the Department of Education. **The DHW will receive these records as they become available for the 2017-18 school year and will forward the information to Board members via email.**

### **PUBLIC HEALTH/ADVANCE CARE PLANNING UPDATE**

Elke Shaw-Tulloch, Division Administrator of the Public Health Division, gave an update on advanced care planning. The registry at the Secretary of State's office needs a major technology upgrade to accommodate access for living wills, etc. A stakeholder meeting was held April 25, 2018, to begin a discussion to develop a funding model. The group will meet again June 7 to define the model and determine legislation necessary to move the registry from the Secretary of State's office to the DHW and to allow hospitals access to the system. They will also discuss education outreach for advanced care planning through revisions to the Honoring Choices Idaho website.

The Suicide Prevention Plan (SPP) created in 2016 has been moving forward with 4 positions. The 2017-18 legislative session saw considerable attention to the issue from many stakeholders and included ideas for increased funding to create a youth hotline, as well as additional education and outreach through public awareness. Suicide rates in Idaho, especially among youth, are high. The DHW deadline to develop a business plan is August 15.

Idaho is now processing gender changes on birth certificates as the result of a recent federal court order. Since the adoption of Vital Statistics Rules Docket No. 16-0208-1801, effective April 6, 2018, which complies with the March 5 federal court order, there have been 18 requests for gender change birth certificates, including 3 minors.

**Mr. Rarick requested information related to the Rule.**

**Nicole McKay, lead Deputy Attorney General, will provide information at the next Board meeting regarding states that did not comply with court rulings regarding gender changes to birth certificates.**

### **MEDICAID/ BEHAVIORAL HEALTH/ HEALTH POLICY INNOVATION UPDATE**

Lisa Hettinger, Deputy Director of Medicaid, Behavioral Health, Public Health and Health Policy Innovation, provided a handout regarding Idaho Medicaid Plus (see Attachment 4). This program provides managed, coordinated care and allows participants to choose between Blue Cross of Idaho and Molina Health Care of Idaho, rather than having benefits administered by the state. In addition to coordinated care, participants report an increase in available benefits.

Currently, there are 3,000 participants. Phased implementation is expected to raise this number to 20,000 within one year. This program serves those with physical disabilities, rather than intellectual or developmental delays.

The Behavioral Health division received funding for 3 new crisis centers to complete the goal to have a center in every region of the state. Staff are also working with the Idaho Building Authority to fund and replace the Syringa facility in Blackfoot. An aggressive timeline is needed to build the new center, move patients and demolish the old property. It will be completed within 2-3 years.

A national ten-year study from the Western Interstate Commission for Higher Education (WICHE) will be utilized to determine what is working and not working to develop a plan for Idaho to treat Serious Mental Illness (SMI) and Serious Persistent Mental Illness (SPMI) in the Gap population. The plan will also be a valuable tool for communities and the Division of Behavioral Health to prioritize solutions to gaps in the current continuum of behavioral health services available to affected Idahoans. **A link to the report will be forwarded to Board members, as requested by Linda Hatzenbuehler.**

A handout was provided regarding the Office of Healthcare Policy Initiatives (see Attachment 5). Phase 1 of the State Healthcare Innovation Plan (SHIP) has been very effective in transforming primary care practices to Patient Centered Medical Homes (PCMHs). Remaining practices are moving to the PCMH model as participating practices have reported better patient care. The Department will work with the Idaho Healthcare Coalition on Phase 2 of the program, focusing on coordination of Electronic Health Records (EHRs), data analytics and virtual PCMHs. The success of Phase 1 has created a willingness on the part of providers to push through the difficulties of Phase 2. Mr. Giuffrè praised the program as a model for healthcare across the United States. He also announced that a one-year, \$875,000 allocation to the state medical residency program infrastructure helped grow the workforce and create interest for a 10-year program. This will increase the permanency of doctors in Idaho, as reports show residency ties doctors to a state.

### **WELFARE/ FAMILY AND COMMUNITY SERVICES UPDATE**

Lori Wolff, Deputy Director of Welfare and Family and Community Services (FACS), reported that renovation of an existing building at the Southwest Idaho Treatment Center (SWITC) has been completed. This will serve as a secure facility for developmentally disabled individuals who have been committed to the state by the courts. These individuals also have Severe Emotional Disorders (SEDs) that may require restraint to protect themselves and others. The facility is scheduled to open in mid-July this year. An advisory board is being created by the Director that will provide suggestions for improvement at SWITC. An Office of Performance Evaluations (OPE) report is underway.

Current personnel numbers at SWITC are good, however turn-over is high due to low wages and injuries sustained while restraining clients. Experts have been hired to teach employees appropriate and safe restraints that also lower staff injury.

Nicole McKay offered that several claims from a previous abuse investigation at SWITC are pending. These claims have been filed with the Department of Risk Management and the DHW has 90 days to respond. The claims are in a variety of phases, with none resolved at this time.

Funding for the Child Welfare program during the 2017-18 legislative session will allow for increased staffing and updating the automation system. The update will alleviate burdensome administrative processes and allow data sharing between stakeholders.

Foster Care legislation codified the Department's commitment to place siblings together when possible, rather than splitting them between foster families. When there is a felony conviction of one or both parents, particularly lewd and lascivious conduct with a child, the DHW must do a safety assessment and reunified families will have a 90-day requirement for supervised visits. Effective July 1, Citizen Review Panels at each of the seven state-wide public health districts will review all foster care cases that have been open longer than 120 days. These panels will be established by each public health district and will consist of volunteers from the community. In addition, a legislative oversight committee is established to review quarterly reports from the panels and will submit an annual report to the US Department of Health and Human Services. This committee will be made up of 4 members of the House of Representatives and 4 members of the Senate.

The Division of Self-Reliance is in the third and final year of funding to update its technology system. Data sharing with the courts and other stakeholders is needed.

### **SUPPORT SERVICES UPDATE**

Dave Taylor, Deputy Director over Support Services, provided the 3<sup>rd</sup> quarter budget summary for FY2018. (see Attachment 6).

HB 493 was signed by Governor Otter in March. This bill provides the funding source and governance model for the State Controller's statewide initiative to modernize the state's accounting, payroll, human resources, budget, and procurement systems. The current system is 30 years old and quickly approaching its end of supportable life, and the estimated replacement cost is approximately \$102 million over a projected five-year project timeline. This new system will replace DHW's current financial system.

Please refer to Attachment 7 for a list of projects that will be funded by the Division of Public Works for FY2019.

A Department proposal has been provided to the Division of Financial Management for FY2019, regarding Changes in Employee Compensation (CEC). (See Attachment 8).

All new hires and existing employees who fall below 75% of the compa-ratio will be compensated at 75% of the new rate with the hope to lower employee turn-over. The Department's long-term goal is to increase compa-ratios to 80% to further decrease turn-over rates.

With the passage of HB 431 the department is shifting its two Medical Directors from classified status to non-classified effective 6/17/18. One Medical Director is currently employed at each State Hospital.



With the election of a new Governor in November, the DIIW and other state agencies have been asked to provide the following documentation to the new administration:

- Agency Summary
- Organizational Charts
- Statutory Authority
- Non-classified Positions
- Facilities Information

A memorandum with specifics for the transition information was provided. (See Attachment 9).

### **DIRECTOR'S UPDATE**

Director Barron updated the Board regarding the dual waiver healthcare bill that was presented to the 2017-2018 legislature. The bill required considerable work by Department staff, including the Department of Insurance, as well as work with legislators and the public. It made it to the House floor twice, but was sent back to committee both times. The DIIW has no plans to bring another bill forward in the 2018-19 session. There may be a ballot initiative for Medicaid expansion in the November general election, if sufficient signatures are gathered. The DHW is developing a fiscal impact statement regarding the possible expansion for Medicaid increases.

Behavioral Health is a top priority for the Department, as its impact on Idaho communities is significant. There is a Behavioral Health Summit taking place now in Boise. The summit is bringing many community members and services together, with an emphasis on suicide prevention. The Western Interstate Commission for Higher Education (WICHE) report has detailed areas for improvement, guiding the Department's processes to ensure the program moving forward.

We will continue to watch what happens with federal and state elections and how that might affect state programs.

Tom Stroschein announced that funding for 9 Recovery Idaho Centers dealing with the opioid crisis will continue for another year. Several county commissioners are considering lawsuits against pharmaceutical companies for damages related to opioid abuse.

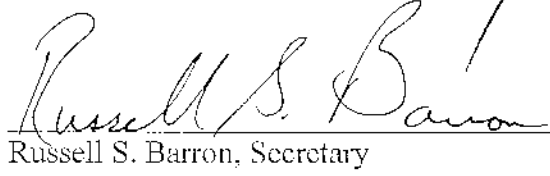
### **ADJOURNMENT**

The next meeting of the Idaho Board of Health and Welfare is scheduled to be held August 23, 2018. There being no further business to come before the Board, Chairman Kerby adjourned the meeting at 11:35 a.m.

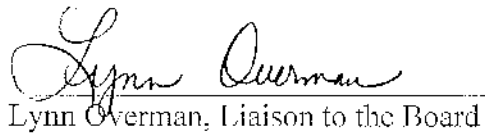
Respectfully signed and submitted by:



Darrell Kerby, Chairman



Russell S. Barron, Secretary



Lynn Overman, Liaison to the Board





# Timothy M. Rarick, Ph.D.

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CLK 223R, 525 S Center St ▪ Rexburg, ID 83460 ▪ Phone: 208-206-0004 ▪ rarickt@byui.edu

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## PROFILE

Primary abilities are related to teaching, speaking, writing, collaborating and influencing others. Much of my work is focused on promoting and protecting the family as the basic unit of society. Additionally, my secondary specialty lies in parenting with an emphasis in father-daughter relationships. I have wrote and spoken on many topics related to family advocacy, parenting, and everything in between. I have had the privilege of collaborating with a wide variety of organizations and individuals from all over the world regarding family policy, fatherhood, sexual exploitation, and religious liberty to name a few.

## EDUCATION

### Ph.D. – Family Studies & Life Span Human Development

- Kansas State University, Graduated: December 2011
- Areas of emphasis: Human Development, Family Studies, & Education
- Dissertation: The Importance of Adulthood & Goal-Pursuit in Emerging Adults Attending College
- **Certification – Academic Advising**

### M.S. – Marriage, Family, & Human Development

- Kansas State University, Graduated: December 2008
- Thesis: Happiness Orientation & Life Satisfaction in Emerging Adults
- Graduated with honors: Phi Kappa Phi

### B.S. – Human Development & Family Studies; Minor – Psychology

- University of Utah, Graduated: May 2006
- Graduated with honors: Kappa Omicron Nu

### A.S. – General Studies

- Utah Valley University, Graduated: May 2004

## WORK EXPERIENCE

### Brigham Young University – Idaho, Rexburg, ID

#### *Professor in Department of Home & Family*

April 2011 to present

- Taught, advised, and counseled students from all backgrounds and majors. Participated in conferences, committees, and various meetings to further the work more effectively. Served as faculty rep for the Child & Family Advocacy Society for the past 6 years.
- Child & Family Advocacy - Created a full course for online and campus. Learning to advocate for the family as the fundamental unit of society by employing, social science research, policy and law, social media, public speaking, and blogging.
- Parenting - Created course and curriculum for online and campus. Basic parenting principles founded in research, theory, and philosophy.
- Child Development - Development of the person cognitively, biologically, emotionally, and spiritually from womb to 25 years old.
- Parent Education & Child Guidance - This is class has two major components: (a) learn

- several parent education programs and (b) learn how to teach them effectively to parents.
- Marriage & Family Studies Practicum – Guiding students to prepare and deliver a practical yet empirical course or intervention in the field of Marriage & Family.

### **Kansas State University – Manhattan, KS**

#### *Instructor*

Fall 2007 – Spring 2011

- Primary Instructor for 2 sections of Introduction to Human Development primarily made up of freshman and sophomore students (approximately 850 students total).
- Supervise 2 GTAs and 2 undergraduate TAs that assist in grading, emailing, and other duties.
- Many of my students changed their major to FSIS due to the experience in this course.

### **OTHER PROFESSIONAL EXPERIENCE**

#### **Marriage & Religion Research Institute (MARRI) – Washington D.C.**

##### *Visiting Research Fellow*

Sept 2017-Jan 2018

- The **Marriage and Religion Research Initiative (MARRI)** is dedicated to delivering robust social science data on the impact of marriage and religious practice on the lives of adults and children, and on the future of the nation. MARRI contributes to the social discourse through original research based on the federal survey system, and through research synthesis that consolidates peer reviewed studies.
- Wrote a research synthesis paper regarding the fathers impact on his daughters sexual development, activity, and exploitation.

#### **Native American Fatherhood & Families (NAFFA) – Mesa, AZ**

##### *Research Advisor*

July 2017-present

- NAFFA seeks to strengthen Native American families through culturally-based family life education. My efforts aided in providing empirical evidence to support the approach and overall philosophy of NAFFA. Also created materials to increase the reach, funding, and effectiveness of NAFFA's incredible mission.

#### **Family Good Things**

##### *Co-Founder & Contributor (Family Life Education blog)*

2015-present

- Along with my friend/colleague, Rob Stewart, we have created a website where we podcast, blog, and share research based information regarding the family. This has been a great way for me to hone my social media and outreach skills.

#### **World Congress of Families (WCF) – Rockford, IL**

##### *Organizing Committee (by invitation)*

2014-2015

- Assembled from many national, ethnic, cultural, social and religious communities, to affirm that the natural human family is established by the Creator and essential to good society. WCF addresses all people of good will who, with the majority of the world's people, value the natural family. Ideologies of statism, individualism and sexual revolution, today challenge the family's very legitimacy as an institution. To defend the family and to guide public policy and cultural norms, the WCF asserts principles that respect and uphold the vital roles that the family plays in society.

#### **United Families International – Phoenix, AZ**

##### *Advisory Board*

January 2012 to present

- An organization devoted to maintaining and strengthening the family. By strengthening the family, communities, states and nations are strengthened. Work primarily with the youth arm

to connect young family advocates throughout the country and world and give them opportunities to develop skills such as speaking, writing, and blogging.

### **Educate Empower Kids (EEK) – San Antonio, TX**

#### *Board Member*

February 2018 to present

- Educate and Empower Kids (EEK) provides resources to parents and educators to encourage deep connection with their kids through media education, meaningful family communication and intentional parenting. We believe this must be done by teaching digital citizenship, media literacy, and healthy sexuality education—including education about the dangers of online pornography.

## **PRESENTATIONS**

### *SELECT PRESENTATIONS (BY INVITATION)*

Rarick, T. (Nov 2017). *The Remarkable Potential of the Father-Daughter Relationship*. ECOSOC. **United Nations**, New York, NY.

Rarick, T. (2017). *Empowering Women and Girls Through Fatherhood*. Commission on the Status of Women. **United Nations**, New York, NY.

Rarick, T. (2017). *Fathers Be Good to Your Daughters: The powerful connection between fatherlessness and pornography*. Utah Coalition Against Pornography. Salt Lake City, UT.

Rarick, T. (2017). *Getting “in the Mood” to Talk About Intimacy*. Northern Utah Marriage Celebration. Weber State University. Ogden, UT.

Rarick, T. (2016). *Smartphones: The Electronic Drug for Teens (and Adults)*. Adventure For Youth. Badger Creek, ID.

Rarick, T. (2016). *The Remarkable Potential of the Father-Daughter Relationship*. Commission on the Status of Women. **United Nations**, New York, NY.

Rarick T. & Stewart, R. (2016). *Tips to Prevent Your Family from Resenting Your Blogging Pursuit*. Build Your Blog Conference. Salt Lake City, UT.

Rarick, T. (2015). *Fathers: the absent superheroes in the battle against sexual exploitation*. Coalition to End Sexual Exploitation. Orlando, FL.

Rarick, T. (2015). *The Remarkable Potential of the Father Daughter Relationship*. Commission on the Status of Women. **United Nations**, New York, NY.

Rarick T. (2014). *The Importance of Fatherhood*. Stand for the Family Conference. Provo, UT

Rarick, T. (2014). *In Memory of Our Freedom, Peace, Wives, & Children*. BYU-Idaho Alumni Webcast. Rexburg, ID

Rarick, T. (2014). *Fathers Be Good to Your Daughters*. Commission on the Status of Women. **United Nations**, New York, NY

Rarick, T. (2013). *Technology & the Family*. Especially for Youth. Rexburg, ID

Rarick, T. (2013). *The Decline in Morals & the Family*. Society-sponsored Forum. BYU-Idaho, Rexburg, ID.

Rarick, T. (2009). *Flow & creativity in everyday life*. Joy Learning 1st Sino-American Preschool Education Forum, **Guangzhou, China**

Rarick, T. (2009). *Identifying and lifting low self esteem students*. Education Symposium, Kansas State University, Manhattan, KS

Rarick, T. (2009). *Happiness & Life Satisfaction in Emerging Adulthood*. Kansas State University Graduate Research Forum, Manhattan, Kansas

## GRANTS & FUNDING

- Rarick, T. (2017). BYU-Idaho Professional Development Leave at Catholic University. Cascadia Motivation Funding, Awarded: \$15,000
- DuPree, W. J., Anderson, M. P., & Rarick, T. M. (2010). *Examining generational trends: A national survey*. Faculty Research Support Fund, University of Houston-Clear Lake. Awarded: \$5987.50.

## PUBLICATIONS

Rarick, T. & Ratchiffe, G.C. (2017). *Using the R.A.M. Model to Understand Dating Attitudes and Behaviors in College Students*. (Journal TBD)

Rarick, T. (2018). *The Father's Impact on His Daughter's Sexual Development and Behavior. A Review of the Research*. MARRI Institute.

Doctoral Dissertation: Rarick, T. & Scheidt, R. (2014). *The importance of reaching adulthood and goal-pursuit in emerging adults attending college*.

Masters Thesis: Rarick, T. & Fees, B. (2011). *Happiness & life satisfaction in emerging adults attending college*.

Dupree W. J. & Rarick, T. M. (2009). *Towards an ecological systems framework of creativity*. Poster presentation at the International Family Therapy Association Annual Conference, Portoroz, Slovenia.

## BOOK CHAPTERS

Rarick, T. (2016). *Fatherhood: The antibiotic to the poverty problem*. In S. Roylance (Ed.) *Family Capital and the SDGs* (pp. 9-16).

## PERIODIC

Rarick, T. (2014). *LDs Life: Upper Valley Southeast Idaho*. Bringing Back Fathers.

Rarick, T. (2014). *United Families International Alert*. Raising the Standard for Fathers

Rarick, T. (2013). *LDs Life: Upper Valley Southeast Idaho*. Keeping Frustration in Perspective in Family Life.

Rarick, T. (2012). *LDs Life: Upper Valley Southeast Idaho*. Parenting requires unconditional love.

Sellers, D. & Rarick, T. (2007). *Age Buzz*, a periodic on-line resource. Topics include: *Preparing older friendly materials*.

## AWARDS AND RECOGNITION

- Lambda Chi Alpha Teaching Recognition Award (March 2010)
- Kappa Kappa Gamma Teaching Recognition Award (November 2009)
- KSU Presidential Award of Excellence in Undergraduate Teaching (2008-2009)  
[http://www.byui.edu/news/2009/04/02\\_rarick-awarded-excellence-in-teaching](http://www.byui.edu/news/2009/04/02_rarick-awarded-excellence-in-teaching)



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- Golden Key Graduate Teaching Assistant of the Year (Nomination) (2008-2009)
- Alpha Delta Pi Teaching Recognition Award (November 2008 & 2009)
- Pi Beta Phi Faculty Teaching Award (October 2008 & 2009)
- Faculty Member of the Game, K State Women's Basketball (December 9, 2008)
- *Kansas State Collegian* Faculty Profile Article (October 27, 2008)  
<http://www.kstatecollegian.com/instructor-uses-comedy-music-to-teach-1,816262>
- FSHS Alumni Newsletter - Outstanding Graduate Student (Article) (Fall 2007)  
<http://www.humcc.k-state.edu/documents/alumni/newsletters/2007/fshs-newsletter-2007.pdf>
- The Honor Society of Phi Kappa Phi Member (since 2007)

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**REFERENCES**


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Steve Dennis, Ph.D., College Dean  
College of Human Development & Education  
Brigham Young University - Idaho  
(208) 496-4008, [dennis@byui.edu](mailto:dennis@byui.edu)

Scott Gardner, Ph.D., Associate Dean  
Department of Home & Family  
Brigham Young University - Idaho  
(208) 496-4012, [gardners@byui.edu](mailto:gardners@byui.edu)

William H. Meredith, Ph.D., Former  
Associate Dean  
College of Human Ecology  
Kansas State University, Justin Hall  
(785) 532-0649, [meredith@ksu.edu](mailto:meredith@ksu.edu)

Bronwyn S. Fees, Ph.D., Associate Dean I  
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Human Development  
Kansas State University, 343J Justin Hall  
(785) 532-1476, [fees@ksu.edu](mailto:fees@ksu.edu)

Kelli Houghton, LCSW  
LDS Family Services  
United Families International  
(480) 776-4776, [kelli@unitedfamilies.org](mailto:kelli@unitedfamilies.org)

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(385) 313-8629, [fightthenewdrug.com](http://fightthenewdrug.com)

Dawn Hawkins, Executive Director  
National Center on Sexual Exploitation  
Washington D.C.  
[www.ncse.org](http://www.ncse.org)

Lynn Walsh, PhD  
World Peace Federation  
New York City, NY  
[lwalsh.org](http://lwalsh.org)

Boyd Matheson, President  
The Sutherland Institute  
Salt Lake City, UT

Ryan Koch, Director  
LDS Public Affairs  
New York City, NY  
[ryan.koch@ldspublicaffairs.org](mailto:ryan.koch@ldspublicaffairs.org)





**Idaho Statute References for Docket 16-0211-1801 and 16-0215-1801**

TITLE 39  
HEALTH AND SAFETY  
CHAPTER 48  
IMMUNIZATION

39-4802. EXEMPTIONS. (1) Any minor child whose parent or guardian has submitted to school officials a certificate signed by a physician licensed by the state board of medicine stating that the physical condition of the child is such that all or any of the required immunizations would endanger the life or health of the child shall be exempt from the provisions of this chapter.

(2) Any minor child whose parent or guardian has submitted a signed statement to school officials stating their objections on religious or other grounds shall be exempt from the provisions of this chapter.

TITLE 39  
HEALTH AND SAFETY  
CHAPTER 11  
BASIC DAY CARE LICENSURE

39-1118. IMMUNIZATION REQUIRED. (1) Within fourteen (14) days of a child's initial attendance at any licensed daycare facility, the parent or guardian shall provide an immunization record to the operator of the daycare facility regarding the child's immunity to certain childhood diseases. This record, signed by a physician or his representative or another licensed health care professional, shall verify that the child has received or is in the process of receiving immunizations as specified by the board; or can effectively demonstrate, through verification in a form approved by the department, immunity gained through prior contraction of the disease.

Immunizations required and the manner and frequency of their administration shall be as prescribed by the board and shall conform to recognized standard medical practices in the state. The board shall promulgate appropriate rules for the enforcement of the required immunization program and specify reporting requirements of daycare facilities, pursuant to the provisions of chapter 52, title 67, Idaho Code.

(2) Any minor child whose parent or guardian has submitted to officials of a licensed daycare facility a certificate signed by a physician licensed by the state board of medicine stating that the physical condition of the child is such that all or any of the required immunizations would endanger the life or health of the child shall be exempt from the provisions of this section. Any minor child whose parent or guardian has submitted a signed statement to officials of the daycare facility stating their objections on religious or other grounds shall be exempt from the provisions of this section.









## Childhood Primary Series\* Coverage - Idaho and U.S., 2009-2016 Children Aged 19-35 Months



\*The Primary Series is a combined rate that includes vaccination with the following dosages of 7 vaccines: 4 DTap (diphtheria, tetanus, and acellular pertussis), 3 or more polio, 1 or more MMR (measles, mumps, and rubella), 2 or 3 Hib (dosage depends upon brand) (*Haemophilus influenzae b*), 3 or more hepatitis B, 1 or more varicella, and 4 or more pneumococcal.

Data are from the National Immunization Survey

U.S. Idaho



IDAHO DEPARTMENT OF HEALTH & WELFARE  
DIVISION OF PUBLIC HEALTH









IDAHO DEPARTMENT OF  
**HEALTH & WELFARE**

### **Idaho Medicaid Plus**

To improve Medicaid benefits for Dual Eligible beneficiaries (people with both Medicare and Medicaid coverage), Idaho Medicaid is introducing a new managed care plan named **Idaho Medicaid Plus**.

Under **Idaho Medicaid Plus**, Medicaid benefits will be administered by the participant's choice of health insurance company rather than directly by the state. If the participant does not choose a health plan, they will be randomly assigned to one of the available plans. Medicare coverage will not change unless the participant asks to enroll in a different form of coverage.

**Available Health Plans:** Blue Cross of Idaho and Molina Health Care of Idaho

**Projected Implementation Date:** Phased implementation beginning October 1, 2018

#### **Tentative schedule for roll-out:**

Oct 1, 2018	Twin Falls County
March 1, 2019:	Bannock, Bingham, and Bonneville Counties
May 1, 2019:	Ada and Canyon Counties
July 1, 2019	Bonner, Kootenai, and Nez Perce counties.

The roll-out schedule will be contingent on successful implementation as well as performance and quality benchmark performance for plans.

Dual Eligible tribal members, pregnant women, may decline to participate in Idaho Medicaid Plus. Participants in the Adult Developmental Disabilities Waiver program will not be enrolled in Idaho Medicaid Plus but can choose a similar coordinated managed care plan option.

Idaho needs federal approval for implementation and is asking for a new waiver and changes to existing waivers. We are also changing state IDAPA regulations to support this new approach to coverage:

- Public Notice for changes was published on **March 30, 2019**
- Public comment was open from **April 2, 2018 through May 1, 2018**.
- Notice of Negotiated Rulemaking was published in the May Administrative Bulletin, **Volume 18-5, May 2, 2018**
- Negotiated rulemaking for proposed changes to Idaho Administrative Code is scheduled for **May 16, 2018**.
- 30+ Statewide town-hall style meetings for Duals are scheduled throughout the **month of May**.
- Public hearings related to proposed changes to Idaho Administrative Code are scheduled for **August**.











Office of Healthcare Policy Initiatives

SHIP Milestones:

- SFY2018 Appropriation: 100% Federal Grant Funds: Total: \$12,063,500
- A. 165 Idaho primary care practices are participating in transformation toward becoming Patient-Centered Medical Homes (PCMHs)
- B. 60 of those offices are now bidirectionally connected to IHDE
- C. 49 Community Health Workers (CHWs) have been trained and are working in clinics and/or communities
- D. 10 Community Health EMS (CHEMS) programs have been established across the state and 28 community paramedics have been trained
- E. 24 health and life sites have been re-established. Grant funds supported the launch of Project Echo in Idaho

Healthcare Policy Summary:

- SFY2018 Appropriation: 29% State General Funds: Total: \$4,200,000
- 1. Review and update the 2016-2017 Medicaid (MCO) rules
- 2. Develop the 2018-2019 Health Access and Care Plan (HACP) and the 2018-2019 Medicaid Chapter 17
- 3. Review and update the 2016-2017 Medicaid (MCO) rules
- 4. Create a new policy for the 2018-2019 Medicaid (MCO) rules
- 5. Update the 2016-2017 Medicaid (MCO) rules
- 6. Update the 2016-2017 Medicaid (MCO) rules

GME Update:

- SFY2018 Appropriation: 71% Federal CMS Funds: 29% State General Funds: Total: \$875,000
- A. Medicaid worked with CMS to obtain approval for GME funding effective July 1, 2017
- B. Medicaid's contractor, Myers and Stauffer, has worked with community health center-based residency programs to determine and distribute Medicaid GME funding
- C. Continuing to work through some challenges related to funding for HealthWest/ASU residency - meeting held May 9th at ISU to discuss potential adjustments to the approach

SHIP GOALS

Idaho's plan identified seven goals that together are transforming Idaho's health-care system:

**Goal 1: Transform primary care practices across the state into Patient-Centered Medical Homes (PCMHs).** Idaho is establishing PCMHs as the foundation of the state's healthcare system by making them the vehicle for delivery of primary care services. The PCMH focuses on preventive care, keeping patients healthy, and stabilizing patients with chronic conditions. Grant funding is being used to provide training, technical assistance, and coaching to assist practices in this transformation.

**Goal 2: Improve care coordination through the use of electronic health records (EHRs) and health data connections among PCMHs and across the medical-health neighborhood:** Idaho is investing in connecting PCMHs to the Idaho Health Data Exchange (IHDE) and enhancing care coordination through improved sharing of patient information among providers.

**Goal 3: Establish seven Regional Collaboratives to support the integration of each PCMH with the broader medical-health neighborhood:** At the local level, Idaho's seven Public Health Districts have convened Regional Collaboratives (RCs) that are supporting provider practices as they transform to PCMHs. Additionally, the RC drives community medical-health neighborhoods at the local level to ensure patients' needs can be addressed through existing services and providers.

**Goal 4: Improve rural patient access to PCMHs by developing virtual PCMHs:** The virtual PCMH model is a unique approach to developing PCMHs in medically-underserved communities by training CHWs, CHEMS, and integrating telehealth services into rural and frontier practices.

**Goal 5: Build a statewide data analytics system:** Grant funds are supporting development of a statewide data analytics system to track, analyze, and report to providers and Regional Collaboratives. At the state level, data analysis is informing

policy development and program monitoring for the entire healthcare system transformation.

**Goal 6: Align payment mechanisms across payers to transform payment methodology from volume to value:** Idaho's four largest commercial insurers: Blue Cross of Idaho, Regence, Pacific Source, and SelectHealth, along with Medicaid, are participating in the Model Test. Payers have agreed to evolve their payment models from paying for volume of services to paying for improved health outcomes.

**Goal 7: Reduce healthcare costs:** Independent financial analysis indicates that Idaho's healthcare system costs will be reduced by \$89M over three years through new public and private payment methodologies that incentivize providers to focus on appropriateness of services, improved quality of care, and outcomes rather than volume of service. Idaho projects a return on investment for all populations of 197% over five years.

# Healthcare Transformation Successes

Our clinic saw a morbidly obese woman with diabetes in winter. Because of the severe nature of her illness she was taking a super-concentrated insulin. She was usually seen at a diabetes specialist clinic but due to winter weather was experiencing transportation issues. The patient saw one of our providers who became alarmed during the visit because it appeared this patient was taking five times the dose of insulin we previously thought she was taking. Rather than change the dose, the provider sent a clinical pharmacist out to do a home visit to make sure her insulin regimen was safe. He observed her doing her injections in her house. He found that, because of her size, she actually did need that much insulin, and her regimen was safe. A potentially unsafe change in medication was avoided using a team-based model of care.

- District 4 Physician

An older man approached the CHW in the grocery store. He asked for help getting his aging wife to exercise. 'She won't listen to me,' he said. When the right time came, the CHW suggested Fit & Fall classes to the man's wife. The CHW and the wife drove together to the class; now she is attending classes every week. The CHW took the time--- to talk, to give her a ride, and connect with her. Now this woman is engaged in regular physical activity.

- CHW Supervisor District 2

I had a patient walk into the clinic for evaluation after being in the ER for a possible stroke. He just walked in for evaluation and records were simply not going to be faxed from the hospital in a timely fashion. With access to the Idaho Health Data Exchange portal, I was able to view the radiology reports that indicated that a stroke had occurred and that he was still having problems. I had an incomplete note from the ER that the patient had left the ER and had declined admission; he just got medications and left. Without immediate access to the portal I would not have been able to appreciate the seriousness of the situation; I wouldn't have known that he was diagnosed with an actual stroke. With that knowledge, I was able to get other processes moving to help the patient back to health.

- District 3 Physician





		A										A-1	A-1	A-1									
		PUBLIC HEALTH			WELFARE			FACS			BEHAVIORAL HEALTH			MEDICAID		Healthcare Policy		Licensing & Cert.		Indirect		INDEPENDENT COUNCILS	
		F	I	C	V	AB	AC	AD	AF	A-1	A-1	A-1	A-1	A-1	A-1	A-1	A-1	A-1	A-1	A-1	A-1	A-1	
1	Total Projection																						
2	FY18 3rd Quarter Review																						
3																							
4																							
5																							
6																							
7	FY18 JFAC Action Approp:	116,887,700	172,822,100	137,113,200	109,978,500	2,287,266,800	2,942,766	6,885,700	48,381,700	6,383,100													
28	TOTAL																						
29																							
30	Adjustments:																						
31	Adjust. Med Admin. TRS to FN 47																						
32	Corporation Receipt Authority - Receipts to Approp	(1,738,700)	(627,300)	(7,800,800)	(7,715,100)	(31,875,400)		(2,200)	1,180														
33	Dedicated Fund Authority Adjustment	(4,878,800)			(80,400)	(3,825,700)				(154,900)													
34	Federal Fund Authority Adjustment / Non-Obj Request	(5,268,700)	(4,510,800)	(4,518,800)	(942,800)	(35,660,500)	(937,700)	(162,500)	(1,857,700)	(155,300)													
35	Carrier Authority - General Funds																						
36	Object Transfer - General Funds - BOOKED																						
37	Object Transfer - Federal Funds - BOOKED																						
38	Good Transfer - Receipts - BOOKED																						
39	Good Transfer - Dedication Funds - BOOKED																						
40	Object Transfer - General Funds																						
41	Object Transfer - Federal Funds																						
42	Object Transfer - Receipts																						
43	Object Transfer - Dedicated Funds																						
44	Supplemental Request - General Funds			1,686,700	1,325,200	17,388,700																	
45	Supplemental Request - Federal Funds			86,700	(1,770,000)	57,704,500																	
46	Supplemental Request - Receipts					(25,300,000)																	
47	Supplemental Request - Dedicated Funds																						
48	Federal Fund Program Transfers - BOOKED			(135,700)																			
49	Receipt Program Transfers - BOOKED																						
50	General Fund Program Transfers - BOOKED																						
51	Program Transfer																						
52	Transfer Federal Fund Program Transfers																						
53	Transfer Receipt Program Transfers	216,000	(568,800)	(13,800)																			
54	Physical Capital Fund Program Transfers	7,300		26,500																			
55																							
56	Total FY18 Est. Approp. with adjustments	106,659,800	166,637,000	122,399,100	102,285,000	2,343,513,600	12,105,000	6,884,700	44,688,900	8,782,900													
57																							
58																							
59	Proj Expenditures w/vacancy rate	106,659,800	166,743,600	102,483,200	98,277,700	2,362,922,400	11,942,500	6,884,700	44,442,200	8,782,900													
60	Variance from Approp. action	-	457,400	(85,100)	3,763,300	(19,308,800)	167,500	-	246,700	-													
61																							
62	General Fund Portion		457,400	(85,100)	3,763,300	(19,308,800)	167,500	-	246,700	-													
63																							
64																							
105	General Fund Over <Under> by Object																						
106	Personnel																						
107	Operating																						
108	Capital																						
109	T&B																						
110	Total:																						
111																							
112	Diff:																						











**C. L. "BUTCH" OTTER**  
Governor  
**ROBERT L. GEDDES**  
Director  
**JAN P. FREW**  
Administrator

# State of Idaho

Department of Administration  
Division of Public Works

502 North 4th Street  
P.O. Box 83720  
Boise, ID 83720-0072

Telephone (208) 332-1900 or FAX (208) 334-4031

Design and Construction

Facilities Services

<http://dpw.idaho.gov>

## MEMORANDUM

**TO:** Tom Long, Department of Health and Welfare

**FROM:** Jan P. Frew, Division of Public Works

**SUBJECT:** FY19 Funded Projects

**DATE:** May 9, 2018

Please see below for a list of FY2019 Alteration and Repair projects funded for your agency.

2019350	Renovate Reception/Lobby Area, State Health Lab	115,000
2019351	Replace Roof, Flammable Storage, State Health Lab	42,000
2019352	Replace Interior Sewer Lines, Region VI, HDC, Pocatello	65,000
2019353	Replace Heating Boilers, State Health Lab	200,000
2019354	Room Environmental Monitoring, Data Logger Temp/Humidity, State Health Lab	120,000
2019355	Safety Railing, Roof Perimeter, State Health Lab	87,000
* 2019356	Renovate Receiving & Admin Area, State Health Lab	165,000 *
* 2019357	Replace Fan Coil Units, Region VI, HDC, Pocatello	87,000 *
2019360	Exterior Painting, Whitehall, SWITC	55,000
2019361	Campus Water System Update, SWITC	110,000
2019362	HVAC Controls, Ramsey, SWITC	47,000
* 2019363	Demolish Medical Building, SWITC	581,000 *
* 2019364	Replace Heating Boilers, Aspen, Pine, Birch, SWITC	190,000 *
* 2019365	Upgrade Exterior Fire Sprinklers to Aspen, Pine, Birch Bldgs, SWITC	75,000 *
* 2019366	Cabinet Heaters and Thermostat Replacement, Whitehall	105,000 *
2019380	Replace Low Slope Roof, SHN	185,000

*"Serving Idaho citizens through effective services to their governmental agencies"*

2019381	Replace Perimeter Electric Door Locks and Controls, SHN	130,000
2019382	Concrete Repair to Include Additional Slab to Supply Delivery Location, SHN	255,000
2019383	Renovate Campus Cottage, SHN	50,000
2019384	Upgrade Storage Building, SHN	87,000
2019400	Replace Exterior Doors, PTF, SHS	91,000
2019401	Re-build Large Parking Lot, SHS	260,000
2019402	Replace Window, North Side Admin Building, SHS	85,000
2019403	Enclose/Upgrade Administration Backup Generator, SHS	85,000

\$3,272,000







IDAHO DEPARTMENT OF  
HEALTH & WELFARE

C.L. 'BUTCH' OTTER – Governor  
RUSSELL S. BARRON – Director

OFFICE OF THE DIRECTOR  
450 West State Street, 10<sup>th</sup> Floor  
P.O. Box 83720  
Boise, Idaho 83720-0036  
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MEMORANDUM

TO: Jani Revic, Administrator  
Division of Financial Management

Susan E. Buxton, Administrator  
Division of Human Resources

FROM: Russell Barron, Director  
Department of Health and Welfare

RB

DATE: May 10, 2018

SUBJECT: FY19 CEC

Following is our proposal for the FY19 CEC, for your review and approval.

**Step 1: Address Minimum Hiring Compa-Ratios for Classified Positions**

Effective immediately, the Department is establishing a minimum hiring rate for classified positions at 75% compa-ratio of the FY19 Compensation Schedule. Due to this change, existing classified employees whose compa-ratios are less than 75% of the FY19 Compensation Schedule will be increased to this rate effective June 17, 2018. We estimate that 360 existing classified employees will be impacted by this policy change. CBC per the agency-wide matrix would then apply to employees who meet eligibility requirements.

In addition, several years ago, the Division of Welfare set minimum hiring rates based on compa-ratio for classified employees in several job classifications. With the 3% shift of the Compensation Schedule, newly hired classified employees will be hired at rates above the pay rates of approximately 24 existing classified employees. To avoid this, the Division of Welfare intends to raise all classified employees (regardless of probationary status) in the following job classifications to the specified compa-ratio based upon the FY19 Pay Schedule. CBC per the agency-wide matrix would then apply to employees who meet eligibility requirements.

Division of Welfare Hiring Rates	
Job Classification	Compa-Ratio Hiring Rate
Customer Service Representative 2	78.46%
Grants/Contracts Officer	79.64%
Program Specialist - DHW	79.64%
Self-Reliance Specialist, Principal	76.79%
Welfare Training Specialist	79.64%

**Step 2: Award Permanent Merit Increases**

Eligible employees will be awarded permanent merit increases effective June 17, 2018; said raises will be realized in employee paychecks received on July 13, 2018.

To be eligible for this permanent merit increase, employees must:

1. Have passed entrance probation on or before May 25, 2018 (i.e., have worked their 1040<sup>th</sup> hour on or before May 25, 2018);
2. Have classified status (i.e., not be “temporary” or “non-classified”);
3. Be active (still employed) as of June 17, 2018;
4. Have a current performance evaluation on file rated, “Achieves” or better;
5. Have a current performance evaluation on file with an “end” date of June 21, 2017 or later; and
6. Have completed the required KnowBe4 cybersecurity training.

Employees are ineligible for this merit increase if:

1. They are still on entrance probation as of May 26, 2018 (i.e., have not worked the required 1040 hours); OR
2. Their most recent performance evaluation on file is rated, “Does Not Achieve;” OR
3. They do not have a current performance evaluation on file; OR
4. They have not completed the required KnowBe4 cybersecurity training.

To determine an employee’s CEC increase, the Department will consider employee compa-ratio and employee performance evaluation ratings. (Employee compa-ratio will be calculated by dividing the employee’s current pay rate by the appropriate FY19 Compensation Schedule policy rate.) CEC funds will be distributed as follows:

Compa-Ratio	Performance Evaluation Rating		
	Achieves	Solid, Sustained	Exemplary
100.00% or more	2.75	3.25	3.75
less than 100.00%	3	3.5	4

There are four employees for whom we cannot increase pay in accordance with the above matrix because their new pay rates would exceed the FY19 Compensation Schedule maximum rates.

Employees on promotional probation are eligible for the CEC. If the employee has a performance evaluation on file with an end date of June 21, 2017 or later, that evaluation rating will determine the amount of the employee's merit increase. If the employee does not have a current performance evaluation on file, then the employee will receive an increase in accordance with the "Achieves" rating. Note that all employees on promotional probation will be required to sign a memorandum acknowledging that, despite having received a pay increase, probation has not been met.

While formal performance evaluations are not required for Director-appointed, non-classified appointees, the Director will award merit increases based on the above matrix with consideration to individual performance, internal equity, and market factors, with one notable exception -- Medical Directors. The Department currently employs two Medical Directors, one at State Hospital South and one at State Hospital North. These employees will be shifting from classified service to non-classified service effective June 17, 2018. The pay rate for these two employees effective June 17, 2018 will be \$120.00 per hour. As these proposed increases exceed the agency-wide matrix, said matrix would not apply to Medical Director increases.

Division Administrators have the discretion to withhold payment of the permanent merit to employees who are in the disciplinary action process, pending the outcome of that process.

Supervisors who fail to submit one or more employee evaluations necessary for the employee to qualify for CEC will be ineligible for the merit increase.

As required, a copy of the Department's compensation policy is attached.

Thank you for your consideration of our request.











State of Idaho

## DIVISION OF FINANCIAL MANAGEMENT

Executive Office of the Governor

C.L. BUCHHEIT  
Governor

JANI REVIER  
Administrator

May 10, 2018

### MEMORANDUM

TO: Executive Branch Agency/Department Heads  
Executive Branch Agency/Department Fiscal Contacts  
(with the exception of Constitutional Officers)

FROM: Jani Revier, Administrator

SUBJECT: Transition Information

In November of this year Idaho will elect a new governor. State agencies need to prepare documentation to make the transition to the new administration as smooth as possible. Information that is compiled in a consistent format for all agencies will contribute greatly to a successful transition. The Division of Financial Management (DFM) will coordinate the collection and presentation of this material. **Your agency's contribution will be due to DFM on August 17, 2018.**

A separate document should be prepared for each section below. Please supply two hard copies that are three-hole punched with a tab for each section. All material should also be submitted electronically to [info@dfm.idaho.gov](mailto:info@dfm.idaho.gov). Text should be created using Microsoft Word. Organizational charts should be in either Power Point or Excel formats. Do not send .pdf documents. These formats enable placement on the DFM web page to meet open records requirements.

The documents should be as concise as possible. Please include information in the order shown below.

- Agency Summary: Brief history of the agency including any recent major restructuring, general description of services provided, major accomplishments during previous four years, list of short-term and long-term critical needs, and recent significant changes in funding or staffing levels.
- Organizational Chart: Down to the STARS Activity level with the current salary, position title, and name of the supervisor at each organizational level.
- Statutory Authority: List only major *Idaho Code* citations and titles.
- Non-classified Positions: List incumbents, position, and current salary. If positions are vacant, show the job title and the budgeted salary.
- Facilities Information: Provide a listing by location of all facilities used by the agency and identify whether they are leased or state owned, the expiration date for all leases, and any plans for future relocation. Include the number of employees at locations.

Additional information may also be requested throughout the fall and into the new year.

