



2026 IDAHO MEDICAL ASSOCIATION LEGISLATIVE PRIORITIES

Improving the Physician Workforce in Idaho:

IMA is committed to strengthening Idaho's physician workforce, particularly in rural and underserved communities, to ensure patients can access the care they need. As Idaho's population continues to grow the need to recruit, train, and retain the next generation of physicians has never been greater. IMA supports a comprehensive strategy that invests in every stage of the physician pipeline.

During the 2025 interim, IMA was actively engaged with the State Board of Education's (SBOE) Medical Education Working Group – formed pursuant to HB 368 – to develop a medical education plan for Idaho. The group's deliberations produced four primary themes:

Undergraduate Medical Education (UME) – UME is the starting point of the physician pipeline, laying the foundation for future physicians through classroom learning and early training. A robust UME pipeline helps create opportunities for students to build early relationships with local communities and a stronger connection to the state. It also helps ensure more Idaho students are prepared to enter residency programs within the state, strengthening the overall pathway from medical school to practice in Idaho.

Increasing the Number of Physician Preceptors – Physician preceptors are practicing doctors who dedicate their time to mentoring and supervising medical students in clinical settings, playing a crucial role in preparing the next generation of physicians. However, the Medical Education Working Group has identified a shortage of available preceptors which has created a significant barrier to expanding UME in Idaho. Strengthening financial incentives – such as loan repayment assistance or tax credits – and offering training opportunities can help recruit and retain more preceptors statewide.

Graduate Medical Education (GME) – Also known as residency training, GME is the last step in physician training – after medical school and before establishing medical practice – and establishes the physician's specialty, such as Family Medicine, Internal Medicine, Psychiatry, etc. While Idaho still ranks 50th in physicians per capita, our residency retention rate ranks in the top five. This proves that the GME Expansion Plan is working and delivering a positive return on investment.

For 2026, IMA supports funding for year nine of the Idaho SBOE's Ten-Year Graduate Medical Education Expansion Plan and will advocate for \$900,000 in new funding. This funding will increase residency positions by another 15 slots across Idaho. Continued support is critical to expand on this proven success and ensure Idaho can meet its rising healthcare needs.

Rural Physician Incentive Program (RPIP) – RPIP helps place physicians in Idaho's areas of greatest need by offering up to \$100,000 in loan repayment for a four-year service commitment in a designated Health Professional Shortage Area. RPIP has been a resounding success with 91% of participants remaining in rural communities beyond their required term. As Idaho continues to face one of the nation's most severe physician shortages, continued investment in programs like RPIP is essential to expanding access to care in rural areas.

Medical Emergency Exception to Idaho's Abortion Ban:

Idaho women faced with pregnancy complications continue to experience delays and denials of care that threaten their lives, health, and future ability to have children. IMA supports changes to Idaho's abortion laws to make it legal for physicians to provide standard of care, evidence-based treatments for women whose life or health may be endangered by severe pregnancy complications.

IMA is committed to working with the Legislature to remedy these unintended consequences for Idaho families and supports the following language that has been vetted and is commonly used in Republican-led states with abortion bans. This language allows medically necessary treatment for pregnancy complications without creating unintended pathways for accessing abortion:

"The treatment of a woman whose pregnancy or other health condition in the good faith clinical judgment of her physician so complicates her medical condition as to necessitate the abortion of her pregnancy to treat her and avoid serious risk of substantial impairment of a major bodily function or serious dysfunction of any bodily organ or part; provided however that no abortion shall be deemed necessary because the physician believes she may or will take action to harm herself."

Amending Idaho's Parental Consent Laws:

In the 2024 legislative session, the *Parental Rights in Medical Decision-Making Act* was passed, significantly changing the way parental consent is required in Idaho. Since its implementation, several unintended consequences have surfaced. IMA supports parental involvement in their children's healthcare. However, many of the children most negatively impacted are in family situations with a significant lack of parental support. Often, these children are victims of the most unimaginable situations and circumstances.

In 2026, IMA will advocate for changes to the *Parental Rights in Medical Decision-Making Act* to resolve the issues below:

Newborn Screening – It has become increasingly common to hear reports of newborns exhibiting clear signs of withdrawal yet being denied drug screening because their parents – fearful of legal consequences – refused consent. Without timely screening, physicians are limited in their ability to diagnose and manage withdrawal symptoms, putting the immediate and long-term health of these newborns at risk.

Mental Health – Children may be reluctant to share sensitive issues if they fear their privacy will be compromised. Confidentiality reassures them that they can speak openly, which is essential for accurate assessment and effective treatment. Recent changes also impact children seeking help through Idaho's 988 Suicide and Crisis Lifeline, creating new barriers to receiving timely follow-up care and potentially discouraging youth from reaching out when they need help most.

Instances of Physical & Sexual Assault – In its current form, the law requires parental consent to conduct the proper tests and examinations necessary to pursue justice. Sadly, far too many minor victims are assaulted by members of their own family, creating a conflict where the assailant can delay or stop time-sensitive examinations from being performed.

Pregnant & Parenting Teens – In these situations, the minor still needs parental consent for pregnancy and post-partum care, even though the new mother is now a legal guardian and can consent to the care of her child. This problem has become common, ultimately delaying treatments and routine care.

Strong Medicaid = Healthier Idaho:

Maintaining a strong and stable Medicaid program is essential to ensuring Idahoans have access to the care they need. Medicaid provides critical coverage for Idaho's most vulnerable residents who would otherwise go without necessary healthcare, ensuring they can receive preventive and ongoing care. Efforts to repeal or underfund portions of the program, including reductions to physician reimbursement, threaten this access by forcing clinics to limit services or close altogether. When this happens, patients don't stop getting sick, they simply delay care until conditions become serious or life-threatening. Without access to routine visits and early treatment, more people end up in emergency rooms, driving up healthcare costs for everyone. Preserving Idaho Medicaid safeguards all patients and the healthcare system that serves them, helping create a healthier Idaho.