

MINUTES OF THE MEETING  
FINANCE AND CLAIMS COMMITTEE  
MONTANA STATE SENATE

February 11, 1987

The seventh meeting of the Senate Finance and Claims Committee met on the above date in room 108 of the State Capitol. Senator Regan, Chairman, called the meeting to order at 4:52 p.m.

ROLL CALL: All members were present.

CONSIDERATION OF SENATE BILL 216: Senator Judy Jacobson, Senate District 36 and chief sponsor of Senate Bill 216 said this bill is a medicaid option that becomes available through the federal government and it deals with women during their pregnancy, delivery, postpartum care and grants them up to a year. There is increasing concern that there are certain women out there that might be in a minimum wage job that does not afford them any health benefits and as a consequence they are going through these pregnancies without benefit of any follow up by a physician, or they would have to quit their job in order to become eligible for Aid for Dependent Children (AFDC) This bill would allow those women who are below the poverty level but above the AFDC level a chance to get into a physician under medicaid and get the prenatal, delivery and postpartum care and then the follow up for that infant for a year afterward. We have also put resource limits of the Supplemental Security Income (SSI) limits into the bill. It is one of those things that you know there is a cost benefit in the end but you can't put your finger on it. Often women who are in the lower income level are also very young and tend to be a much higher risk among the women who are going through pregnancy and consequently there are complications to the pregnancy and as a result sometimes complications in the birth and sometimes on disability later to the child which can result in astronomical costs, say caring for an infant of low birth that may have problems perhaps throughout it's life.

Senator Jacobson said there is a fiscal note behind the bill that is different from the fiscal note that was originally prepared for me which is the white copy that I passed out to you. (attached as exhibit 1) It is very difficult, when you sit on that subcommittee Social and Rehabilitation Services (SRS), to put a price tag on any of these medicaid options that we have. One of the things--you can presume a certain amount of women and you can look at the WIC (Women, Infants and Children) and you can look at births and income levels but there is no way of judging what limitations the SSI is

going to provide because we don't have those figures. I suspect it would be somewhere between the note I passed out to you and the one Dave Hunter has signed off on.

Senator Jacobson said she had other witnesses and 2 letters she wished to present the committee. (attached as exhibits 2 and 3)

PROPOSERS TO SENATE BILL 216: Dr. Donald E. Espelin, Department of Health and Environmental Sciences (DHES), a pediatrician here in Helena, manager of the Montana Prenatal program bureau chief of the Preventive Health Services Bureau, said this bill needs to be addressed because of the crisis in prenatal care in Montana today. There are other people here today who could probably more accurately describe the extent of the problem, but I can tell you from our own experience that it is a very common problem for women to be in the working fore-class of the medically indigent. Not only that, the people who are in this group provide a good share of our troublesome pregnancies that have poor outcomes. Rough estimates have said that about 45% of the group of women who are in this age group for delivering babies are under the poverty line. I don't know that to be true but if you take that or a lesser number of them about half of those are covered with medicaid and half of them come under the heading of being medically indigent. He said we deliver in this state about 14,000 babies a year. He said he would like to relate to the committee a study made in Maine which was a state very similar to Montana. In Maine "poor" children die 3 times as often as rich children do. From all causes it is 3.1 times as often, from accidents it is 2.6, from homicide it is 5 times as common and from disease it is 3 1/2 times as common. He said low birth weight is a major factor in later problems and poor women who do not get prenatal care and increase their risk for low birth weight. Exhibit 4, attached is a fact sheet given out by Dr. Espelin. He said a recent publication from the Robert Wood Johnson Foundation says that the average low birth weight in the United States costs about \$13,600. 92% of those survive and require some additional hospital care in the first year. 20% of those low birth weight children suffer some form of long term disability. That disability is calculated by that foundation is estimated to be around \$122,000 for a life time in 1984 dollars. Montana has about 800 prematures a year.

When Dr. Espelin was asked by Senator Keating where the money for this came from he said somebody is spending that much money (\$32 million, as explained in the fact sheet) per year in the state of Montana. He said it was medical care, special education and care of the blind to take care of these children. He said on a study they ran a couple of years ago on the children they spent to Salt Lake City to the children's hospital over a 15 month period of time 5

out of 50 kids were blind. They required the special education that blind kids require. That is a high percentage of kids reported and it was related primarily to the low birth weight. In looking at Montana if a woman has 2 or less prenatal visits their low birth weight rate is 11%. If they have 10 or more prenatal visits their low birth rate is 4%. He said the Institute of Medicine studies that was published in 1985, and that is the State of the Art Study on the Prevention of Low Birth Rate revealed that for every dollar invested in prenatal care you could retrieve \$3.38 in avoidable costs. He showed comparison charts on low birth weight rates, said money was the number 1 barrier for women getting prenatal care, and in some cases care was not available because Dr.'s were refusing to take the patients because they did not receive enough money through medicaid.

Barbara Archer, Women's Lobbyist Fund, said they represent 39 groups and over 6500 individuals in Montana. We support expanded medicaid funding for prenatal, delivery and postpartum care and for infants for those whose income falls below poverty level. There are 19,019 families who live below the poverty level in Montana. This is a highly cost effective preventative program. There is a statistical correlation between lack of prenatal care and low birth weights as other speakers will show. Only 54% of teenage mothers begin prenatal care in the first trimester of pregnancy. Babies of mothers who receive late or no prenatal care are 3 times more likely to die in the first year of life than those who receive prenatal care. Proper medical care for women and infants is a must. We ask you to support this bill.

Jan Cronquist, said she had been asked to hand in testimony for Elsie Latham, President of the Montana Senior Citizens Association., Inc. This letter is attached as exhibit 5.

Annie Bartos, Montana Medical Association, said she is a nurse and an attorney here in Helena and for the record represents the Montana Medical Association. The MMA is in support of Senate Bill 216. The association believes that healthy children, healthy pregnant women are a vital resource to this state and Senate Bill 216 will provide a means for these people to obtain good health care. If we

There were no further proponents but exhibits no. 6, 7 and 8 were given to the committee and are attached to the minutes.

There were no further proponents, no opponents, and Senator Regan asked if there were questions from the committee.

QUESTIONS FROM COMMITTEE: Senator Keating asked if this was not an appropriation bill, just an enabling act? Senator Jacobson said yes, it is the enabling legislation that would

allow one of the options under medicaid. The money would have to be plugged in by the subcommittee. Senator Keating asked if the appropriation would be as shown on her fiscal note \$258,000 in the first year and \$330,000 in the second year--would that be about the appropriation that would be recommended? Senator Jacobson said this would be up to the committee. The original figures came out of SRS, then the Governor's office worked up some other figures and then the two got together and that is the fiscal note you have in yellow.

Senator Keating asked, Dr. Espelin you said that we have about 800 low birth weights a year and using your estimation we spend about \$30 million in child care. Do you know where and how we spend that kind of money on child care in the state on those presumptions? Dr. Espelin said we don't have a handle on where all that money is spent. It is an estimation by the people who put out that report on the long term care of special education needs and special medical needs over the long haul on these babies. Very small infants, only 2 pounders are now being saved and the price tag for acute care for the new born nursery runs up to \$500,000.

Senator Keating said, okay, if this is a money saver and it's a preventative that we could have, then the next question is where are we going to get the money to pay for this when we are into budget constraints right now. If it is a money saver, then some place else in that budget we are appropriating funds to provide the care for those children that are born under weight. This would then assume a priority, but if we save money in the long run then I suggest we take a look at where the money is spent because of the situation and withdraw some of that appropriation and plug it in over here as a priority for a preventative. That way we don't have to increase our budget, which obviously we can't and that way we could fund this and save money.

Senator Jacobson said she wished she could tell him they could just pull out the money and the situation would take care of itself. This is one of these bills where it is very difficult to say. We know fewer children will be born handicapped if they are going to get the care. Then you run into all sorts of problems, how many women are going to go in, how many pregnant teenagers are going to hide their pregnancies for several months, how many are we actually going to be able to help under this situation. I guess I would have to say to you that if we want healthy babies first we've got to have healthy mothers. I would argue this on a humane issue that I think women should be getting prenatal care and they should be getting delivery care and if they are not getting it then there is something wrong with our system.

Senator Himsl said he felt confused as to why the bill is before us and not before the subcommittee on SRS and for the health area, so I would like to ask the Doctor--how does this fit into what we have already set up? We've set up one program for those from zero to 2 years of age and we have that program temporarily in place; then there is the paranatal program which has \$200,000 a year in each one of those for the maternal care health and the preventative health. Now we come with this and this is prenatal. I suppose that is a different ball game or something, but how does this all fit together and why aren't we seeing it all in one place?

Dr. Espelin said, I don't know why this isn't all seen in one place, but it does all fit together. SRS takes care of medicaid and they pay the bills on it. They pay now under medicaid for about 40% of the women. That's my estimation from what I can glean from my studies of the situation in the state, they already pay for about 40% of the women, but then there's a large gap that are still under the poverty level that come under the heading of working poor. Women who have a couple of kids at home and don't have a husband (or whatever) and when they get pregnant again, they get married, or whatever, something happens and they're pregnant again, they're out of a job through all this and they need help. It all fits together, we pay the bottom line.

Senator Himsl said we are taking care of the zero to 2, that is in place, paranatal is in place, and now prenatal. How does it all fit together? Dr. Espelin said the prenatal would prevent a lot of postnatal and later disabilities.

Senator Smith asked if there were women out there who can't afford the care who would not go to get it and would have to be forced to go to a doctor? Senator Jacobson answered they would not try to force them, but women get into a complicated situation--no health insurance or medicaid for physician to see them.

Senator Smith asked if they had figures on the number of low birth weights that were caused by drugs and alcohol. Dr. Espelin said alcohol is not on the birth certificates by a code number. The code number for that is nonexistent in our system so it is very poorly recorded. The estimates that we have is about 1 in every thousand births, so in Montana that would be about babies with FAS (Fetal Alcohol Syndrome) per year FEA (Fetal Alcohol Effect) which is a less severe form can be a small baby that is hyperactive and is a little bit slow, is estimated to be 20 times that common. The drugs--we have no estimate. We are just not getting that information. Now in 1988 we will have a new birth certificate that some of that material will come through on and we will be able to have a better handle on it.

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Senator Gage said he had one question for Barbara Archer and Annie Bartos. He asked, do you know if either of the groups you represented were in to testify in favor of Senator Keating's bill to de-earmark coal funds? They answered that they did not know. Senator Gage said the reason he asked the question was that we are looking for funding here and we don't know where we are going to get it. I would suggest to some of these groups they be more aware of some of the things that are being worked on so they could come in support of them.

Senator Keating said there was one other question he would like to ask of Mrs. Archer from the Women's Lobbyist Fund. He said, Did I understand you to say that you represent 6500 people, members or what? Ms. Archer said 6500 individuals in the group they represent. Senator Keating said, Mrs. Archer, just for a matter of prospective on our problem of trying to raise funds or find monies to afford these various programs that you and the Senior Citizens and some of the people who come in to support bills that are going to cost money. If each one of the members that you represent would contribute \$100 we could fund this program. That would be \$6500. I don't think we can just fund these programs, we have to look around and establish priorities, so there are other programs that are funded for a million dollars a year that have less priority than this, but there is no way to de-earmark it or detach it from a statutory appropriation. I signed on this bill because I think it is a darn good idea, I think it has merit. It is something that I've been interested in for a number of years, but how are we going to fund it?

There were no further questions and Senator Jacobson closed by saying, I am certainly sympathetic with this committee, being a member of it, the shortage of funds and Senator Keating's comments about priorities. I discussed this with the chairman, I discussed it with a number of other people, and it is just such a very important vital issue for this state and across the nation that I just didn't think we could ignore the possibility of being able to bring this care to the women of Montana. I just think it is so vitally important that it is something we have just got to do. I have talked to Representative Winslow and if it looks like the bill will get some favorable response I suspect your subcommittee will have to take a look at the funding of it.

Senator Regan closed the hearing on Senate Bill 216 and asked for executive action on Senate Bill 128.

CONSIDERATION OF SENATE BILL 128: Senator Gage said he got today from the Criminal Investigation Division, a recommendation of how they would like the bill to read. It's not in amendment form, and since I just got this late this afternoon.

Senator Regan asked if he was asking to wait to get the amendments and Senator Gage said yes, if possible and he would have it ready for the Friday meeting.

CONSIDERATION OF HOUSE BILL 214: Senator Regan said this was the emergency disaster bill. Senator Smith asked if we appropriate this does it add another half million to our present deficit. Senator Gage said he would have the same concern and if passed, would suggest it have an effective date of July 1, 1987. Senator Hammond asked if there were 1/2 million in there now and was told it was down to \$200,000. At the request of the Chairman Judy Rippingale said it was around \$200,000.

Senator Regan recalled from testimony that if they had a flood on the Hi-Line they wouldn't even have the money then for taking care of it. Senator Jergeson said the concern is that in the spring with the reservoirs being full and the ground being saturated, if there is a considerable amount of moisture in the spring and heavy snow fall with run off we could have another flood as bad or worse than the last one.

DISPOSITION OF HOUSE BILL 214: Motion by Senator Keating that we do not concur in H. B. 214.

Senator Hammond said he wondered if there wasn't some other way of doing it when it is known that we are facing a disaster more serious than we have here. Is there any vehicle by which the disaster fund could be supplemented at that time.

Senator Jergeson said as he understood it if the fund balance is used up as in the case of an emergency and the emergency is on-going, we are likely to be called into special session. We would have to calculate that as cost of the emergency, I suppose.

Senator Tveit said if it is drawn down to \$200,000 and the law now is a million, would we give him the right to the other \$800,000 or go the rest if we go the whole million and a half, but where does the money come from then?

Senator Keating said the law says right now that there is a statutory appropriation of \$1 million in any one biennium for a contingency fund for the Governor. This bill is raising it to \$1 1/2 million, that's all. There is \$200,000 left for this biennium, so if we don't have any other floods or drought or something that kills people that money will revert to the general fund and at the beginning of the next biennium we will begin with a fresh appropriation of \$1 million. I don't see any reason to add another half million to a contingency fund.

Senator Smith said it seemed to him that they have the power to go before the finance committee and ask for a budget amendment. He was told by Senator Regan, Judy Rippingale and several others that they could not do this.

Question was called on House Bill 214, voted, passed, Senators Jergeson, Stimatz and Manning voting no. House Bill 214 was killed.

DISPOSITION OF HOUSE BILL 391: Senator Keating said the Historical Society needed this money to carry over since it was for publications paid in advance.

Motion by Senator Keating that House Bill 391 be concurred in. Voted, passed, Senator Keating to carry the bill on the floor.

CONSIDERATION OF SENATE BILL 175: Senator Regan said this is Senator Halligan's bill where you are appropriating money in excess of the monies the subcommittees recommended.

Senator Keating said, this thing merely assures that all the money that is paid in fees will in some way be funneled to the District Court either through the appropriation process or the grant process.

Motion by Senator Keating that Senate Bill 175 do pass.

Senator Himsl said this is not my understanding. My understanding is that the assessment on the motor vehicles took care of the shortage but they collected more money than they needed and so the 727,000 would revert to the general fund and they wanted to revert to their needs to the grant process.

Senator Regan said, if you are looking for money Senator, it is right here. Senator Keating said we have passed the fee to pay for the district court, the taxpayers are paying for it out there, it is their district court and the money ought to go for that purpose, and I don't think it ought to come back into the general fund and be used for that purpose.

Senator Smith said he would like to make one comment. He said, I am carrying a bill to put the court fees back into the vehicle account and if this is a way to collect more money for the general fund, I am going to ask when my bill goes on the floor that it be reduced to the amount that is necessary for district court fees because I don't think that is the way to back door getting money into the general fund.

Senator Regan said if they remembered, she had asked Senator Halligan who was the sponsor not only of this bill but of the fee that was levied for the district court, and I asked him at the time about the amount of money that was expected

and he said we know that we will be collecting more than will go into the district court, but the rest of it will go into the general fund. The sponsor was well aware of that when he sponsored the bill. I guess I have the feeling that if the district court wants monies they should be before the subcommittee and you set the level of spending. Otherwise what you are doing is saying--well whatever money you can get you get.

Senator Himsl said he would like to call the attention of the committee to the fact that this fee was levied to cover the criminal cases and we did cover the criminal cases, but they want this balance to cover shortages in other funds. I don't think we are violating that.

Senator Haffey said the testimony that was heard was so forceful that it sounded like it should have been a lead pipe cinch to flow to the grant-in-aid, but our decision from here on should be made on whether we think--as they noted, when they fall short they are responsible for paying, and toward the end of the bill they acknowledge that the intent was that if an excess of funds they wanted it to flow into the grant-in-aid programs that we did leave in state law. I think our decision is whether we want excess to flow into the grant-in-aid program because shortages flow to the county to do whatever they will. I support the bill.

Senator Boylan made a substitute motion that Senate Bill 175 do not pass. I think this should be taken up in the subcommittee. I think it was discussed and I don't know which option we did choose in subcommittee, and I think that will come up again in the next few days. What you are doing--they are getting an extra amount of money here. They were short of money and we were to fund district courts on criminal cases and criminal cases alone. That is the intent of it. This is for the courts--they are trying to put it into the grants, and I say it should be specifically for criminal cases in court and that is all.

Senator Bengtson said she would support Senator Keating's amendment. She said she was not familiar with what they are doing, but they are strapped. I think the request is straight-forward, and I think we should support the bill, she said.

Senator Keating suggested dropping this bill back to the subcommittee that is handling the budget.

Senator Harding said, I agree with Senator Keating's stand, and if we do not take that stand I think this money that has been raised to support the courts should be taken off the taxpayers unless we say what we are doing with it.

Senator Regan said she would then ask, would you all support reducing the insurance fees that we currently levy that is paid on premiums that bring our general fund in excess of \$4 million a year which is levied and originally intended to run the insurance commissioners office, but if you are willing to give up \$8 million on the same philosophy you are expressing tonight we should be consistent then and the general fund has dropped \$4 million more.

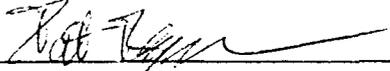
Senator Gage said that goes all the way along the line for any of these funds that go into the general fund that are to fund a particular program. GVW fees bring in a tremendous amount of money paid by the truckers for the GVW inspectors going on. That is probably another 8, 10 or 12 million bucks.

Question was called on the substitute motion called for do not pass. This motion failed.

Substitute motion by Senator Keating that the bill go back to the subcommittee. Voted, passed, 2 noes.''

Senator Regan said she had asked Senators Keating and Jergeson to look at Senate Bill 178 to see if they can come in with some amendments.

The meeting was adjourned at 6:10 p.m.

  
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Senator Pat Regan, Chairman



STATE OF MONTANA - FISCAL NOTE  
Form BD-15

In compliance with a written request, there is hereby submitted a Fiscal Note for LC 0693, as introduced.

DESCRIPTION OF PROPOSED LEGISLATION: This legislation would provide Medicaid coverage to women and children whose income is below the federal poverty guidelines but is greater than the SSI standards(women) or the AFDC standard (children).

ASSUMPTIONS: Assumes 908 women would be eligible in each fiscal year-based on WIC program statistics. Assumes Medicaid reimbursement would be \$577 for prenatal care, delivery and postpartum care. Assumes yearly cost for children would be \$679 per child. Child costs would be about one half in first year since they are not all born on July 1. Assumes the federal matching rate will be 68.91% in FY88 and 70.92% in FY89.

FISCAL IMPACT:

Revenue: Federal funds would increase to cover their share of the program costs.

	Proposed Law FY 1988	Proposed Law FY 1989
Expenditures:		
Medicaid Expenditures	<u>832,182</u>	<u>1,140,448</u>
General Fund	258,725	331,642
Federal Special Revenue	<u>573,457</u>	<u>808,806</u>
Total	<u>832,182</u>	<u>1,140,448</u>

EFFECT ON COUNTY OR OTHER LOCAL REVENUE OR EXPENDITURES: N/A

LONG-RANGE EFFECTS OF PROPOSED LEGISLATION: N/A

TECHNICAL OR MECHANICAL DEFECTS IN PROPOSED LEGISLATION OR CONFLICTS WITH EXISTING LEGISLATION: N/A

SENATE FINANCE AND CLAIMS  
EXHIBIT NO. 2-11-87  
DATE SB 216  
BILL NO. 216

exhib 1  
Judy J

(copy)

Fiscal Note for SB 216 DATE 2/10/87  
Judy J

FEBRUARY 6, 1987

PRO SB 216

TESTIMONY OF: JOYLEE DAVIDSON, RN  
DIRECTOR, CENTRAL MONTANA FAMILY PLANNING  
211 BANK-ELECTRIC BUILDING  
LEWISTOWN, MONTANA 59457

RE: LACK OF PRENATAL CARE,

Good health care requires a commitment to provide prenatal services to all Montana women irregardless of their income. I am in favor of SB 216 as a vehicle to provide wider access to preventive care during pregnancy.

Presently, Lewistown, Montana may be an unhealthy place to be if you are a low-income pregnant female. Currently 20% of our Family Planning patients are going without prenatal care. Local physicians are refusing to provide prenatal care unless the patient is either covered by private insurance or can pay cash at the first visit. Cash required is a payment between \$250-350.00 at the first visit and the remaining charges are pro-rated monthly with the total balance due before delivery.

If a low-income women calls an office to inquire about symptoms of pain, bleeding, etc. she is advised to go to the emergency room of the local hospital. If she cannot pay she is advised that once in active labor she is to go to the ER; this effectively eliminates any preventive type care for the previous nine months. Using the ER for non-emergency services is not economically prudent.

In Lewistown, a woman eligible for welfare assistance is usually seen during her sixth month of pregnancy; this practice ignores preventive measures for the first 2/3rds of the pregnancy. Medicaid patients are traveling to Harlowton, Billings and Great Falls as no Lewistown doctor is currently accepting new Medicaid patients. It cost more to reimburse mileage, meals, and medical charges than to provide local care. Local physicians would perhaps be willing to provide care if they recouped a higher rate of their base charges than Medicaid currently reimburses. Consider also the risk to pregnant women and their babies traveling during a typical Montana winter.

The liability issue needs to be addressed and resolved. Physicians pay close to \$600. for malpractice insurance per pregnant woman seen. This explains why doctors are reluctant to treat pregnant women or women who may not reimburse their charges.

At Family Planning we contract with a physician to see an average of 5 patients in one hour once a week. We do not have the funds nor the physician time available to assume responsibility for all those women denied services. Our physician does a one-time baseline exam. The nurse monitors weight, blood pressure, and urine monthly and provides nutritional and pregnancy counseling.

SECRET FUNDANCE AND CLAIMS  
EXHIBIT NO. 2  
DATE 2-11-87  
BILL NO. SB-216

FEBRUARY 6, 1987

PRO SB 216

TESTIMONY OF: PHILLIP AND DEBORAH GEORGE  
307 OUELETTE  
LEWISTOWN, MONTANA 59457

RE: HIGH RISK PREGNANCY -- LACK OF PRE-NATAL CARE AVAILABLE

Deborah George had miscarried in December of 1985 during her first month of pregnancy. She had had a positive pregnancy test in Helena.

During her second pregnancy (March 1986) Deborah vomited daily, averaging 15 times daily. She lost 15 pounds and was admitted to the hospital in Bozeman. She was hospitalized for 4 days. During her stay she received IV therapy. A sonogram was done and the baby seemed to be progressing well..

At this time the Georges lived 49 miles away from town in the mountains and had no transportation.

In July of 1986 Phillip and Deborah moved to Lewistown, to be closer to medical services. Shortly after arriving Phillip became employed.

Phillip called all the doctor's offices in Lewistown, to ask to have his wife taken for pre-natal care. All the office staff of each doctor contacted told him that their medical office was not taking patients without insurance unless they could pay the \$250.00 up front for pre-natal care and also \$750.00 to be paid before the baby was born. That would average \$150.00 per month. When Phillip said they were unable to pay that amount at one time he was told to take Deborah to the local hospital ER when she went into labor. If any problems arose during the pregnancy she was to go to the ER.

It took 4 months to become eligible to receive Medicaid. After receiving Medicaid the Georges were told that no doctors were taking new Medicaid patients.

Welfare told them that they could re-imburse mileage to travel to another town to receive pre-natal care if they could find a doctor to take them. These funds would be received after the bill was submitted so it would require money up front and also a car available. This would require winter travel in their situation.

Deborah was finally seen on October 27, 1986.

At the time of delivery she was 3 weeks overdue. She had to have a C-Section. Medicaid would only reimburse the hospital for 4 days stay. Deborah was released from the hospital before the doctor wanted her to be. She had to have home care for a week after dismissal from the hospital.

SENATE FINANCE AND CLAIMS  
EXHIBIT NO. 3  
DATE 2-11-87  
BILL NO. SB 216

FACT SHEET  
LOW BIRTH WEIGHT COSTS

Average Low Birth Weight costs - \$13,616\*

92% survive and require additional \$1,025.00 hospital care the first year.

20% suffer long-term disability.

The special education and long-term care needed by each such disabled child, over the course of a lifetime, is estimated to cost \$122,854.\*

\*1984 dollars

Montana has about 800 LBW's per year.

$800 \times \$ 15,000 = \$12,000,000$  per year  
 20% of 800 is 160  $\times \$125,000 = \underline{20,000,000}$  per year  
 LBW costs MT    \$32,000,000 per year

Poor women do not get appropriate prenatal care. In Montana:

2 or less prenatal visits LBW is 11%  
 10 or more prenatal visits LBW is 4%

PRENATAL CARE CAN SAVE MONEY

10M Study states that for every one dollar invested in prenatal care, we save \$3.38 in avoidable costs.

If the Montana Perinatal Program is successful in the Low Birth Weight Program projects and we cut the LBW in half, we could save \$16,000,000 per year in Montana.

REFERENCES: 10M Study 1985  
 Robert Woods Johnson Special Report #2  
 DHES Vital Statistics Bureau

SENATE FINANCE AND CLAIMS  
 EXHIBIT NO. 4  
 DATE 2-11-87  
 BILL NO. SB 216

# Montana Senior Citizens Assn., Inc.

WITH AFFILIATED CHAPTERS THROUGHOUT THE STATE

P.O. BOX 423 - HELENA, MONTANA 59624



(406) 443-5341

*ep 5*

February 11, 1987

Chairman Pat Regan  
Senate Finance and Claims Committee  
1987 Montana Legislature

Madame Chairman and Members of the Committee:

On behalf of the more than 7000 members of the Montana Senior Citizens Association, I would like to express our support of SB 216 that would expand the eligibility guidelines for Medicaid to include pregnant women with incomes up to 100% of the poverty line.

MSCA has worked diligently to improve the affordability and accessibility of health care in Montana and have joined with other groups nationally to promote this goal.

As grandparents and great-grandparents of our future generations we are very concerned about the increasing rate of infant mortality and teen pregnancy in our nation. We all know that early care in pregnancy will give us healthy children and save money in the long run by avoiding serious health problems in our pregnant women and young children.

There are now 37 million Americans who do not have health insurance and that number seems to be increasing. SB 216 would address a portion of that needy population by allowing them access to health care that they do not have.

We believe that health should be a right of all and we believe SB 216 is a step in that direction. We urge you to recommend a 'do pass' for SB 216.

Sincerely,

*Elsie Latham*

Elsie Latham

President

SENATE FINANCE AND CLAIMS  
SENATE NO. 5  
DATE 2-11-87  
BILL NO. SB 216

2-9-87

Chairperson Senator Pat Regan  
Senate Finance and Claims Committee  
ATTN: SB 216  
Capitol Station  
Helena, MT 59620

SENATE FINANCE AND CLAIMS  
EXHIBIT NO. 6  
DATE 2-11-87  
BILL NO. SB 216

Re: Support of SB 216

Dear Senator Regan,

I am writing to you in support of Senator Judy Jantzen's SB 216 to expand Medicaid payments for prenatal care to include poor, working pregnant women ineligible for Medicaid.

Every woman has a right to prenatal care. It is not a privilege. Every woman should have a comprehensive program of obstetric care that begins as early as possible in the first trimester of pregnancy and extends through the postpartum period. Many women are unable to afford prenatal care. They wait until late in their pregnancy to seek this care or will have intermittent care or will even seek an abortion based on economic reasons.

Prenatal care is to ensure for the mother and fetus a normal period of gestation and a healthy conclusion of

that gestation, providing the community with a new member capable of reaching his or her full genetic potential.

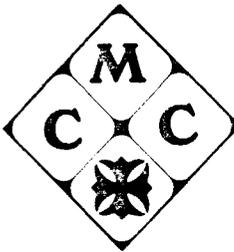
It costs the Montana Taxpayers an average of \$46,000 a year to care for one low birth weight infant.

I would appreciate your sharing this letter with your committee. I thank you and the Committee for your consideration and time. Please let me know if I can be of any further assistance.

I would also like to take this opportunity to thank you, Senator Regan, for your personal commitment to the health of women and children in Montana.

Sincerely yours,

Clare Boydog RNC, NP  
712 Saddle Drive #3  
Helena, MT 59601  
(442-7029)



# Montana Catholic Conference

February 11, 1987 *ckf*

CHAIRMAN REGAN AND MEMBERS OF THE FINANCE AND CLAIMS COMMITTEE:

I am John Ortwein representing the Montana Catholic Conference. The Montana Catholic Conference serves as the liaison between the two Roman Catholic Bishops of the State of Montana in matters of public policy.

We are here today to speak in favor of S.B. 216.

We favor the establishment of programs of pre-natal and postpartum care for women living at or near federal poverty level.

In the recently published Bishops' Pastoral Letter on the Economy it is stated: Many poor children are disadvantaged even before birth; their mothers' lack of access to high-quality pre-natal care leaves them at much greater risk of premature birth, low birth weight, physical and mental impairment, and death before their first birthday.

S.B. 216 would allow for high-quality prenatal and post-partum care.

We encourage you to vote "yes" on S.B. 216.

SENATE FINANCE AND CLAIMS  
EXHIBIT NO. 7  
DATE 2-11-87  
BILL NO. SB 216



TESTIMONY OF NANCY DUPRE, HELENA, IN SUPPORT OF SB 216

February 11, 1987

I have worked with a large number of pregnant women, both married and unmarried, during the past four years, through an organization which offers counseling and support to these women. Many of them have told me that they could not afford medical care during their pregnancy because they (with husbands in some cases) earned just enough to disqualify them for Medicaid, but not enough to pay doctors' fees.

One young woman had previously had a premature baby, probably due to her total lack of prenatal care. With the second baby on the way, she was concerned about another premature baby, but due to her financial situation, she again could not afford medical care.

These women are usually forced to choose medical care such as an emergency delivery; an undesirable option which causes great emotional and physical stress to both mother and child, and can result in exorbitant costs for hospital and medical care for the baby, and in some cases, lifelong disabilities for the baby.

Senate Bill 216 will ensure proper medical care for these mothers and babies. I urge your support of this bill.

SENATE FINANCE AND CLAIMS  
EXHIBIT NO. 8  
DATE 2-11-87  
BILL NO. SB 216

COMMONLY USED ACRONYMS

*WIC  
Women, Infants & Children*

FY	fiscal year
PILT	payment in lieu of tax
RIT	Resource Indemnity Trust
MAPA	Montana Administrative Procedures Act
MEPA	Montana Environmental Policy Act
ARM	Administrative Rules of Montana
MCA	Montana Code Annotated
MAR	Montana Administrative Register
CE	continuing education
MPEA	Montana Public Employees Association
SRS	Department of Social and Rehabilitation Services
LFA	Legislative Fiscal Analyst
OBPP	Office of Budget and Program Planning
PERS	Public Employees Retirement System
PERD	Public Employees Retirement Division
PSC	Public Service Commission
DNRC	Department of Natural Resources and Conservation
OLA	Office of the Legislative Auditor
EQC	Environmental Quality Council
AG	Attorney General
DHES	Department of Health and Environmental Sciences
OPI	Office of Public Instruction
A & E	Architecture and Engineering
D of A	Department of Administration
WICHE	Western Interstate Commission for Higher Education
WAMI	Washington, Alaska, Montana and Idaho cooperative project
MSDB	Montana School for the Deaf and Blind
MCH Block Grant	Maternal Child Health block grant
EMS	Emergency Medical Service
EPA	Environmental Protection Agency
MHSA	Montana High School Association
AFDC	Aid to Families with Dependent Children
GA	general assistance
DD	developmental disabilities
MSP	Montana State Prison

*SSI - Supplemental Security Income*

*AFDC - Aid for Dependent Children*

Budget amendment  
Budget modification

Personal Services  
Operations budget  
Capital budget  
Pay plan

Sunset audit  
"grandfather"

Maintenance of effort  
mill levy

ROLL CALL

50th LEGISLATIVE SESSION - - 1987

Date 2-11-87

NAME	PRESENT	ABSENT	EXCUSED
SENATOR REGAN	✓		
SENATOR HIMSL	✓		
SENATOR JACOBSON	✓		
SENATOR BENGTON	✓		
SENATOR STIMATZ	✓		
SENATOR HARDING	✓		
SENATOR HAFNEY	✓		
SENATOR SMITH	✓		
SENATOR KEATING	✓		
SENATOR STORY	✓		
SENATOR BOYLAN	✓		
SENATOR JERGSON	✓		
SENATOR TVEIT	✓		
SENATOR MANNING	✓		
SENATOR HAMMOND	✓		
SENATOR GAGE	✓		

ROLL CALL VOTE

SENATE COMMITTEE

FINANCE AND CLAIMS

DATE \_\_\_\_\_

Bill No. \_\_\_\_\_

Time 6:47

NAME	YES	NO
SENATOR HIMSL	✓	
SENATOR JACOBSON	✓	
SENATOR BENGTON		✓
SENATOR STIMATZ		✓
SENATOR HARDING		✓
SENATOR HAFHEY		✓
SENATOR SMITH		✓
SENATOR KEATING		✓
SENATOR STORY	✓	
SENATOR BOYLAN	✓	
SENATOR JERGESON		✓
SENATOR TVEIT		✓
SENATOR MANNING		✓
SENATOR HAMMOND	✓	
SENATOR GAGE	✓	
SENATOR REGAN	✓	

7 9

Sylvia Kinsey  
Secretary

Senator Regan  
Chairman

MOTION: Sub -4 & be

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*ML*

ROLL CALL VOTE

SENATE COMMITTEE

FINANCE AND CLAIMS

DATE \_\_\_\_\_

Bill No. \_\_\_\_\_

Time 6:14

NAME	YES	NO
SENATOR HIMSL		
SENATOR JACOBSON		
SENATOR BENGTSON		
SENATOR STIMATZ		
SENATOR HARDING		
SENATOR HAFHEY		
SENATOR SMITH		
SENATOR KEATING		
SENATOR STORY		
SENATOR BOYLAN		
SENATOR JERGESON		
SENATOR TVEIT		
SENATOR MANNING		
SENATOR HAMMOND		
SENATOR GAGE		
SENATOR REGAN		

Sylvia Kinsey  
Secretary

Senator Regan  
Chairman

MOTION: Sub 175 (L.A.)

*2 no's  
Hedberg  
Haffey*

# STANDING COMMITTEE REPORT

February 11, 1987 19.....

MR. PRESIDENT

We, your committee on FINANCE AND CLAIMS

having had under consideration HOUSE BILL No. 214

third reading copy ( blue )  
color

J. Brown *Regan Story*

**AUTHORIZING INCREASED EMERGENCY OR DISASTER EXPENDITURES BY GOVERNOR**

Respectfully report as follows: That HOUSE BILL No. 214

BE NOT CONCURRED IN

~~OPPOSE~~

~~OPPOSE~~

.....  
SENATOR REGAN Chairman.

# STANDING COMMITTEE REPORT

*February*  
~~June~~ 11

19. 37

MR. PRESIDENT

We, your committee on..... **FINANCE AND CLAIMS** .....

having had under consideration..... **HOUSE BILL** ..... No. **391** .....

**third** \_\_\_\_\_ reading copy ( **blue** )  
color

**Thoft Keating**

**ALLOW MONTANA HISTORICAL SOCIETY TO EXPEND DEFERRED SUBSCRIPTION  
INCOME**

Respectfully report as follows: That..... **HOUSE BILL** ..... No. **391** .....

BE CONCURRED IN

~~DO PASS~~

~~DO NOT PASS~~

.....  
**SENATOR PAT REGAN**

Chairman.