#### MINUTES OF THE MEETING PUBLIC HEALTH, WELFARE AND SAFETY COMMITTEE MONTANA STATE SENATE

FEBRUARY 18, 1983

The meeting of the Public Health, Welfare and Safety Committee was called to order on Friday, February 18, 1983 in Room 410 of the State Capitol Building by Chairman Tom Hager.

<u>ROLL CALL</u>: All members were present. Woody Wright, staff attorney, was also present.

Many visitors were also in attendance.

CONSIDERATION OF SENATE BILL 418: Senator Judy Jacobson of Senate District 42, the chief sponsor of Senate Bill 418, gave a brief resume of the bill. This bill is an act repealing administrative rules of the Department of Social and Rehabilitation Services implementing the chronic or end-stage renal disease treatment program and clarifying existing rulemaking authority for those rules, and providing an immediate effective date.

Senator Jacobson stated that this money to fund the program comes from the general fund. At the present time SRS is using life insurance as a criteria for resources. SRS rules are too inflexible to handle the program effectively.

Representative Nancy Keenan of District 89, spoke in support of the bill. Miss Keenan stated that there seems to be a lack of communication between the SRS and the patients in the program. The patients have come almost i full year without assistance. She then gave the history of the previous program.

Richard A. Norick of Missoula, himself a kidney patient, told of his own personal experiences. Many, many kidney patients try to use home dialysis because of the cost in the hospitals. Mr. Norick present a letter to the Committee which he had written to Representative John M. Shontz. See exhibit 1.

Dr. Sidney Pratt of the Department of Health stood in support of the bill. He stated that if the Department of SRS were amended out of the bill and the Department of Health amended into the bill would be an improvement. He stated that the Department of Health is already handling three similar programs of this type. 1) Cleft palate; 2) Handicapped children; and 3) Improved pregnancy program. PUBLIC HEALTH PAGE TWO FEBRUARY 18, 1983

John LaFaver, director of SRS, stood in support of the amendment to transfer the duties to the Department of Health from the Department of SRS. He explained the controvery and stated that it arose out of a lack of money. The last Legislature cut the money from \$150,000 to \$125,000. Everyone should look to the health aspect of the patient.

Senator Jacobson closed. She offered some ideas on the amendments and stated that she would have the staff attorney draw up some amendments to improve the bill. It is her intention that the people would be able to survive with the program and go back to the old rules.

The meeting was opened to a question and answer period from the Committee.

Senator Himsl stated that the cost of dialysis in the hospitals today is scandalous. He then asked about the funding of this program. Medicare and Medicaid will still cover the same programs that they always have in the past. As to who is eligible, the department will develop rules as they have on the other programs.

Dr. John Drynan, director of the Department of Health, stated that they will establish criteria patterned much the same as the rules which are already in place for the other programs.

Senator Norman asked what is the appropriation for the next fiscal year. It will be \$125,000 the same as before.

Dr. Drynan stated that home dialysis will be promoted as much as possible in order to cut costs.

CONSIDERATION OF SENATE BILL 446: Senator Bill Thomas of Senate District 20, the chief sponsor of Senate Bill 446, gave a brief resume of the bill. This bill is an act clarifying and defining the services to be provided by personal-care facilities; establishing restrictions on eligibility for residency in such facilities; requiring that the Department of Health and Environmental Sciences establish by rule certain standards relating to resident admission and screening; providing for licensing of such facilities; providing for civil and criminal enforcement; clarifying the definition of "roominghouse" or "retirement home" to completely exclude nursing services. PAGE THREE PUBLIC HEALTH FEBRUARY 18, 1983

Senator Thomas stated that this bill is the result of SJR 34 of last legislature. An interim study was held and hearings held in the 5 different areas of the state. He stated that the bill does need to be amended and they will try to do that on the floor of the Senate.

Judy Carlson, deputy director of SRS, stood in support of the bill. She stated that this bill established a residential personal care license category for adults. Current statutes only provide for institutional personal care in a nursing home or similar medical facility. This license will make possible the offering of personal care to persons not requiring nursing services, but needing some assistance beyond just board and housekeeping services. This bill provides for inspection and enforcement of the licensure requirements by the Department of Health. It also amends the "Roominghouse or Retirement Home" licensure law so that this license with less requirements and resident protection cannot be used to operate a personal care facility.

Rose Skoog, representing the Montana Health Care Association, stood in support of the bill.

Charles Banderob, representing the Montana Senior Citizens, stood in support of the bill. He stated that there is getting to be more and more senior citizens all the time and they need personal care. It seems that the Billings and Twin Bridges areas are the hardest hit by this.

Joyce Van Essick, representing the Montana Association of the Homes for the Aged, stood in support of the bill.

Lawrence Powers, representing the elderly of Montana and also the Montana People's Association and the Montana Senior Citizens, stood in support of the bill.

Shirley Thennis, representing the Montana Nurses Association, stood in support of the bill.

Jim Cordial, representing the Montana People's Association, stood in support of the bill. These people need personal care. He showed a sketch to the Committee of the Homes in Twin Bridges with plans to have a personal care building on the grounds. He urged the Committee to give this bill favorable consideration. PUBLIC HEALTH PAGE FOUR FEBRUARY 18, 1983

Douglas Olson, representing the Montana Senior Advisory Council, stood in support of the bill. He stated that SB 446 goes along ways to clarify the different degrees of care in our state. Mr. Olson offered an amendment which would clarify a "Roominghouse" as only with rooms, and a "Boarding House" which would provide room and board.

With no further proponents, the Chairman called on the opponents. Hearing none, the meeting was opened to a question and answer period from the Committee. Hearing none, the hearing was closed by Senator Thomas. He thanked all the people who had helped serve during the interim to put this bill together. He urged the Committee to give the bill a DO PASS recommendation.

CONSIDERATION OF SENATE BILL 447: Senator Bill Norman of Senate District 47, the chief sponsor of Senate Bill 447, gave a brief resume of the bill. This bill is an act to provide for one-step licensing of certain facilities under the Departments of Health and Environmental Sciences and Social and Rehabilitation Services and Institutions.

Senator Norman stated that this bill would make the law better with its one-step licensing.

Judy Carlson, deputy director of the Department of Social and Rehabilitation Services, stood in support of the bill. She stated that this bill is good for the people, good for the providers and good for the state.

There were no more proponents or opponents to the bill. There were no questions from the Committee. Senator Norman closed asking the Committee for a favorable recommendation as it is a "good bill".

CONSIDERATION OF SENATE BILL 439: Senator Tom Hager of Senate District 30, chief sponsor of Senate Bill 439, gave a brief resume of the bill. This bill is an act to authorize counties to enact ordinances defining areas where alcoholic beverages may or may not be sold; removing the prohibition against the issuance of a retail alcoholic beverage license to a business located within 600 feet of a school or a church. This is the bill which was requested by the Committee.

A letter was read from Mae Nan Ellingson and Phil Strope in support of the bill. They stated that this bill is an outstanding solution to a long standing problem. PAGE FIVE PUBLIC HEALTH FEBRUARY 18, 1983

There were neither proponents nor opponents to the bill at the hearing.

DISPOSITION OF SENATE BILL 439: A motion was made by Senator Norman that Senate Bill 439 receive a DO PASS recommendation from the Committee. Motion carried unanimously.

DISPOSITION OF SENATE BILL 404: The bill sponsored by Senator Stephens is an act for the designation of area agencies for senior citizen services.

This bill was passed out of Committee on February 16, 1983 with a favorable recommendation, however, the statement of intent was not adopted.

A motion was made by Senator Jacobson that the statement of intent for Senate Bill 404 be adopted. Motion carried unanimously.

Because of lack of time the committee took a recess while the Senate is in session and will reconvene during the floor break.

DISPOSITION OF SENATE BILL 446: This is the bill sponsored by Senator Thomas which is an outgrowth of SJR 34 from last session.

A motion was made by Senator Himsl that the Statement of Intent be adopted. Motion carried unanimously.

A motion was made by Senator Himsl that Senate Bill 446 receive a DO PASS recommendation from the Committee. Motion carried unanimously.

DISPOSITION OF SENATE BILL 447: Senator Norman is the chief sponsor of SB 447. This bill is an act to provide for one-step licensing of certain facilities under the Departments of Health and Environmental Sciences, Social and Rehabilitation Services, and Institutions.

Woody Wright, staff attorney, read a prepared statement of intent. A motion was made by Senator Norman that the Statement of Intent be adopted. Motion carried unanimously.

Amendments were presented which Senator Norman stated would improve the bill. A motion was made by Senator Norman that Senate Bill 447 be amended as read. Motion carried unanimously. PAGE SIX PUBLIC HEALTH FEBRUARY 18, 1983

A motion was made by Senator Norman that SB 447 receive a DO PASS as amended recommendation from the Committee. Motion carried unanimously.

DISPOSITION OF SENATE BILL 410: Senate Bill 410, which was sponsored by Senator Halligan, is an act to generally revise and clarify the laws relating to licensure of cesspool, septic tank, and privy cleaning businesses; allowing the Department of Health and Environmental Sciences to establish requirements by rule for disposal sites and increasing the license fee; providing for a hearing after the denial, suspension, or revocation of a license; providing for exceptions to the licensing requirements; and providing for civil and criminal penalties.

A motion was made by Senator Marbut that the bill be amended on page 2, line 22, strike: "but not limited to" . Motion carried.

A motion was made by Senator Marbut that the bill be amended on page 6, lines 12 through 14. This would strike the penalty clause. Motion carried.

Senator Hager stated that four years ago he had carried a bill which was very similar to this, and there still seems to be some problems.

A motion was made by Senator Norman that SB 410 receive a DO PASS as amended recommendation from the Committee. A roll call vote was taken. Motion carried. See attachments.

A motion was made by Senator Himsl that the statement of intent for Senate Bill 410 be adopted. Motion carried.

DISPOSITION OF SENATE BILL 31: A motion was made by Judy Jacobson that Senate Bill 31 be tabled at the request of the sponsor. Motion carried.

DISPOSITION OF SENATE BILL 293: Senator Tom Hager is the chief sponsor of SB 293 which is an act to generally revise and clarify the laws relating to certificates of need for health care facilities, and providing an immediate effective date. PUBLIC HEALTH PAGE SEVEN FEBRUARY 18, 1983

The amendments to Senate Bill 293 were adopted at the meeting of February 16, 1983.

Senator Himsl brought up the question of the amendment presented by Mrs. Rose Skoog, representative for the Montana Health Care Association. Senator Himsl made a motion that the bill be amended on page 21, line 24; following: "need"; Insert: "The department may adopt rules for the imposition of such conditions, but only if the secretary of the United States department of health and human services has approved an amendment to the state's medicaid plan, adopted pursuant to 42-USC-1396a, allowing for the imposition of such conditions."

Senator Jacobson stated that she called the Health Care Finance Administrator at the federal office in Denver. However, there seems to be some controvery in what they are telling. They have told several different versions as to what are their views on the proposed amendment suggested by Mrs. Skoogs in regards to the medicaid plan.

A vote was taken on the Skoog amendments. Motion carried.

A motion was made by Senator Hager that Senate Bill 293 receive a DO PASS as amended recommendation from the Committee. Motion carried.

Senator Norman stated that this bill must meet the federal requirements. Senator Hager will write a letter requesting a formal reaction to the Health Care Finance Administrator in Denver before the hearing on SB 293 in the House.

DISPOSITION OF SENATE BILL 274: Senator Dover is the chief sponsor of Senate Bill 274 which is an act providing for the mandatory licensing and regulation of professional counselors; creating a state board of licensed professional counselors; creating a communications privilege; providing penalties for violations; and allowing disability and health insurance coverage for work done by licensed professional counselors.

Amendments were handed out to the Committee which are the amendments requested by the counselors and also Senator Dover. The amendments would tighten up the law. PUBLIC HEALTH PAGE EIGHT FEBRUARY 18, 1983

A motion was made by Senator Himsl that Senate Bill 274 receive a DO NOT PASS recommendation from the Committee. Motion carried. See the Roll Call Vote Sheet.

DISPOSITION OF SENATE BILL 446: Senator Bill Thomas is the chief sponsor of Senate Bill 446 which is an act clarifying and defining the services to be provided by personal care facilities; establishing restrictions on eligibility for residency in such facilities.

Amendments were presented to the Committee which Senator Thomas stated were in agreement with most everyone. Senator Thomas explained the three pages of amendments.

A motion was made by Senator Jacobson that the amendments be adopted to SB 446. Motion carried unanimously.

A motion was made by Senator Christiaens that SB 446 receive a DO PASS as amended recommendation from the Committee. Motion carried unanimously.

STATEMENT OF INTENT FOR SENATE BILL 418: A motion was made by Senator Jacobson that the statement of intent for SB 418 be adopted. Motion carried.

RECONSIDER ACTIONS OF SENATE BILL 446:

A motion was made by Senator Marbut that the Committee reconsider its actions on Senate Bill 446. Motion carried unanimously.

Senator Marbut asked for a further explanation of the amendments. A motion was made by Senator Marbut that all of the proposed amendments to SB 446 be adopted. Motion failed with Senators Marbut and Jacobson voting "yes" and Senators Himsl and Hager voting "no".

Senator Thomas stated that this bill is a very much needed piece of legislation as people are taking advantage of some of our senior citizens and this bill would help to prevent that from happening to them. Howver, this bill would not strangle those in the business of taking care of the elderly.

Senator Himsl stated that he was not against the bill, but that he was against having so many many pages of amendments on a bill at such a late date. PAGE NINE PUBLIC HEALTH FEBRUARY 18, 1983

A motion was made by Senator Jacobson that Senate Bill 446 receive a DO PASS recommendation from the Committee. Motion carried.

A motion was made by Senator Jacobson that the statement of intent for SB 446 be adopted. Motion carried.

Senator Hager told Senator Thomas that he would visit with the Human Services Chairman in the House and ask that this bill be scheduled early in March for hearing so that the amendments could be worked into the bill.

Senator Thomas thanked the Committee for the patients and understanding with the bill.

ADJOURN: With no further business the meeting was adjourned.

SENATOR CHAIRMÁN, TOM HAGER

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## ROLL CALL

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SENATE \_\_\_\_\_ COMMITTEE

## BILL\_\_\_\_\_ VISITORS' REGISTER

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surviving spouse, if any, and only at a time when he has no surviving child who is under age 18 or is blind or permanently and totally disabled) of any medical assistance correctly paid on behalf of an individual. To the extent necessary for reimbursement of medical assistance paid to an individual, the department of social and rehabilitation services is subrogated to the rights of the individual to recover from a third party who may be liable to pay the medical expenses, as provided in 53-2-612. Recoveries shall be prorated to the federal government and the state in the proportion to which each contributed to the medical assistance. Recovery for medical assistance paid prior to July 1, 1974, shall be prorated to reimburse the county share of participation. The provisions of this section are hereby extended to provide for the recovery of all medical assistance paid under this part and likewise to all medical aid to the aged assistance paid by the department of social and rehabilitation services during the period of time July 1, 1965, through June 30, 1967.

History: En. Sec. 14, Ch. 325, L. 1967; amd. Sec. 1, Ch. 249, L. 1969; amd. Sec. 1, Ch. 279, L. 1974; amd. Sec. 5, Ch. 379, L. 1977; R.C.M. 1947, 71-1524.

53-6-144. Relative's responsibility. The provisions of other parts of this title, as amended, notwithstanding, the only relatives that can be held responsible for payment of medical assistance under the program are the husband or wife of the individual, the parents of children under age 18, and the parents of blind or disabled persons over age 18.

History: En. Sec. 15, Ch. 325, L. 1967; amd. Sec. 15, Ch. 423, L. 1971; R.C.M. 1947, 71-1525.

#### Part 2

#### **Renal Disease Treatment Program**

53-6-201. Legislative intent. It is the intent of the legislature to insure the establishment of a program for the care and treatment of persons suffering from chronic renal diseases who require lifesaving care and treatment for such renal diseases but who are unable to pay for the services on a continuing basis.

History: En. 71-2501 by Sec. 1, Ch. 453, L. 1975; R.C.M. 1947, 71-2501.

53-6-202. Establishment of program. The department of social and rehabilitation services shall establish a program to provide treatment to persons suffering from chronic renal diseases, including dialysis and other medical procedures and techniques, which will have a lifesaving effect in the care and treatment of such persons. The department shall extend financial assistance to persons suffering from chronic renal diseases in obtaining the medical, nursing, pharmaceutical, and technical services necessary to care for such diseases, including the rental or purchase of home dialysis equipment and supplies. The department shall establish standards for determining eligibility for care and treatment under this program in order that treatment shall be provided to those who are financially unable to obtain such treatment without causing severe economic imbalance in the family economic unit Such standards shall be established without reference to maximum or minimum income levels.

History: En. 7+-2502 by Sec. 2, Ch. 453, L. 1975; R.C.M. 1947, 71-2502.

Exhibit 1

Missoula, Montana January 30, 1983

Representative John M. Shontz Chairman Appropriations - Finance and Claims Joint Subcommittee - Human Services Capitol Station Helena MT 59620

Dear Representative Shontz;

At the monthly meeting of the Montana Kidney Patients Association, we discussed concerns we had regarding recent changes that S. R. S. has made in the End Stage Renal Disease Program. This letter is to inform you of our concerns in hopes you will assist us in making changes in the new rules.

The new eligibility rules that S. R. S. developed have placed too much hardship on ESRD patients before they can qualify for assistance. Members of our association attended two hearings regarding the rule changes, but we were not able to make any changes in them.

We feel that the following areas need attention during this year's legislative session:

1. The Administrative Branch should not be allowed to change rules governing programs established by the legislature without the consent of the legislature.

Rationale: S. R. S. tried to change eligibility rules during the last session with HB 811. This bill was killed, but they implemented these rules anyway.

2. Raise the amount appropriated for each fiscal year.

Rationale: The amount appropriated for FY 80 and 81 was \$150,000. For FY 82 and 83 it is \$125,000. During this period, medical costs have been soaring, and the number of ESRD patients has also increased greatly. For FY 82, the funds were exausted by January! For six months, no new patients could receive assistance.

3. The eligibility requirements are too strict, eliminating almost everyone from the program.

Rationale: My disability income is barely adequate to meet my expenses for food, utilities, other medical bills, taxes, etc. The new limitations on income place an extreme burden on my family in order to start receiving assistance.

4. Cash value of life insurance should not be used in determining assets.

Rationale: People on disability can't buy additional life insurance. They should not be penalized for providing some security for their family to use for future income after the disabled is deceased. I now have a \$4800 loan against my insurance on which I must make annual interest payments. This places an added burden on our limited income. 5. Those qualifying for assistance should have funds encumbered for their expected yearly expenses.

Rationale: S.R.S. used this method in Missoula to manage the funds available to this district. Our bills were paid for the entire year because of this good management practice. The present system uses first come-first served until funds are depleted.

6. Persons on home dialysis who are living at home should not have parents assets used to determine eligibility.

Rationale: Persons over 21 and living at home are doing so to receive the medical assistance from their family during dialysis. It is not fair to penalize the patient for trying to cut costs by doing this.

7. Return the responsibility for the program from Welfare to Vocational Rehabilitation.

Rationale: Welfare has been unable to handle the new program. They would not send anyone to our meetings to explain the changes being made. The new rules went into effect 7/1/82, but they would not answer any questions or take any applications until 11/15/82.

8. If changes are made in a program, those changes should be ready to implement on the effective date of said changes.

Rationale: The delay in starting to accept applications and then notifying the person of acceptance has placed another burden on the ESRD patient who is trying to maintain some quality of life for his family.

9. S. R. S. should not be allowed to place patients who are eligible for Medicaid on the ESRD program.

Rationale: I feel that this is in direct violation with the intent of the ESRD program as well as with statements made by John LaFaver which stated they would not do this.

Thank you for taking these matters into consideration. We appreciate anything you can do to assist us in reaching a solution to some of our problems with the new changes that have been made in the ESRD program.

I would appreciate an opportunity to provide testimony at any hearing regarding the ESRD program.

Respectfully, Richard a Norick

Copies: Other subcommittee members and other legislators. Richard A. Norick 2117 35th. Ave. Missoula, MT 59801 Telephone 549-7576

- 1. Title, line 4.
  Following: "ACT"
  Insert: "TRANSFERRING THE END STAGE RENAL DISEASE
  PROGRAM TO THE DEPARTMENT OF HEALTH AND ENVIROMENTAL SCIENCES;"
- 2. Title, line 7.
  Strike: "and"
  Insert: ";"

e)

- 3. Title, line 9. Following: "MCA;" Insert: "ADOPTING NEW RULES GOVERNING THE END-STAGE RENAL DISEASE PROGRAM UNTIL SUCH TIME AS RULES ARE ADOPTED BY THE DEPARTMENT;"
- 4. Page 1, line 21. Strike: "social and rehabilitation services" Insert: "health and environmental sciences"
- 5. Page 2, line 2. Strike: "all"
- 6. Page 2, lines 15 through 17. Strike: "but...earned"
- 7. Page 2.
- Following: line 21

Insert: "NEW SECTION. Section 3. Renal program rules adopted -- expiration. (1) The department of health and enviromental sciences shall extend financial assistance to persons with chronic renal diseases under 53-6-202 in accordance with the following:

PROGRAM FOR NON-VOCATIONAL REHABILITATION CLIENTS SUFFERING FROM CHRONIC END STAGE RENAL DISEASE (1) The appropriate division shall extend financial assistance to eligible persons suffering from chronic renal diseases in obtaining the medical, nursing, pharmaceutical, and technical services necessary to care for such diseases; other services include but are not limited to kidney transplantation, surgery, hospitalization, psychological treatment, transportation for applicant, donor, or attendant, attendant training and attendant salary.

(a) Services shall not exclude the rental or purchase of home dialysis equipment supplies, plumbing, wells, rewiring and other adaptive equipment and supplies.

(2) Eligibility requirements:

(a) Applicants who are not financially able to obtain care and treatment on a continuing basis without causing severe economic imbalance to their family economic unit are eligible.
(i) Maximum or minimum income levels of the applicant or his or her family shall not be considered. (b) Vocational Rehabilitation clients are not eligible unless:(i) a reasonable period of time has elapsed (generally

six months) during which evaluative services were provided; and, (ii) a medical determination of nonfeasibility can be shown

(ii) a medical determination of nonfeasibility can be shown at the close of the six month evaluation period.

(c) Applicants must be medically described as suffering from "chronic" End Stage Renal disease, which does not include those persons with conditions which could potentially lead to the "chronic" state, and does not include those persons with conditions medically defined as acute renal failure.
(d) Applicants eligible for Medicare may be eligible if they

meet the standards of this program, providing Medicare benefits are fully utilized.

(e) Applicants eligible for the appropriate Medicaid or Medically Needy Programs are not eligible for this program until the Medicaid and Medically Needy Program benefits are exhausted.

(f) Eligibility as to financial need shall be determined by the economic need test as set forth in sub-chapter 4 of the social and rehabilitation services rules. Such standards shall be established without reference to maximum and minimum income levels.

(3) Priorities of service:

(a) Only the following services will be provided:

(i)training for dialysis (including transportation, room and board);

(ii) transplant costs;

(iii) center dialysis (when justified);

(iv) medications, for treatment of end stage renal medical conditions;

(v) surgery (fistual, etc.);

(vi) dialysis machine rent, supplies and repairs;

(vii) costs to install dialysis machine at home, such as necessary;

(viii) plumbing, wiring, etc.;

(ix) attendant.

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(2) The rule provided in subsection (1) is effective until such time as the department adopts appropriate rules under the Montana Administrative Procedure Act to implement the provisions of 53-6-202."

Renumber: subsequent sections accordingly

#### SUMMARY OF SENATE BILL 446

This bill establishes a residential personal care license category for adults. Current statutes only provide for institutional personal care in a nursing home or similar medical facility. This license will make possible the offering of personal care to persons not requiring nursing services, but needing some assistance beyond just board and housekeeping services.

This bill provides for inspection and enforcement of the licensure requirements by the Department of Health & Environmental Sciences. It also amends the "Roominghouse or Retirement Home" licensure law so that this license with less requirements and resident protection cannot be used to operate a personal care facility.

In order not to prevent permissible home health services in a Retirement Home, line 12, page 14 should be amended by adding "provided by the facility." Line 21 should also be amended to add "by the facility is".....

Also, lines 22, 23, and most of 24 on page 14 would not be deleted as in the proposed bill. The lines would read "Hotels, motels, boardinghouses, roominghouses or similar accommodations may not provide professional nursing services to residents."

On page 15, line 7 would be amended to add "and cannot be appropriately provided in that setting."

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DO YOU: SUPPORT	?	AMEND?		OPPOSE?		· · · · · · · · · · · · · · · · · · ·
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PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY.

#### STATEMENT OF INTENT SENATE BILL 446

Senate Bill 446 requires a statement of intent because section 3 requires the Department of Health and Environmental Sciences to adopt standards for operation and licensing of personal-care facilities, and license, inspection, and patient screening fees, and in cooperation with other state agencies to adopt health and safety standards for personal-care facilities. It is the intent of the Legislature that when the Department adopts rules to implement provisions of SB 446 that it utilize the report to the 48th legislature by the Legislative advisory committee on Joint Resolution 34 and that the rules:

1. assure that licensees meet applicable fire, sanitation, building, and service standards;

2. provide as expeditious a licensing procedure as possible;

3. set inspection and patient screening fees that recover but do not exceed the costs of inspection and patient screening; and

4. include other state agencies in the development of those rules which fall in their areas of expertise and responsibility.

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Page 1, line 7 Following: "by" Insert: "Residential" Page 1, line 14-15 Strike: "to completely exclude nursing services" Page 1. line 19 Following: "Section 1." Insert: "Residential" Page 1, line 20 Following: "(1)A" Insert: "residential" Page 2, line 6 Following: "of a" Insert: "residential" Page 2, line 8 Following: line 7 Insert: "residential" Page 2, line 9 Following: "Placement in" Insert: "residential" Page 2, line 10 Following: "(1)A" Insert: "residential" Page 2, line 20 **.** . . 4.11 .... Following: line 19 Insert: "residential" Page 3, line 10 Following: "Licensing" Insert: "residential" Page 3, line 12 Following: "operation of" Insert: "residential" Page 3, line 16 Following: "types of" Insert: "residential" Page 4, line 4 Following: "residents of a" Insert: "residential" Page 4, line 23 Following: "revoke a" Insert: "residential"

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Page 10, line 12 Following: "skills" Strike: "as provided in [sections 1 through 6]" Insert: " which do not require nursing skills" Page 10, line 15 Following: "motels," Strike: "boarding homes" Page 13 Following line 9 "(32) 'Residential personal care facility' means a facility Insert: providing the services set forth in and subject to the provisions of [sections 1 through 6]" Renumber subsequent subsections. Page 14, 1ine 12 Following: "basis" Insert: "provided by the facility" Page 14, line 22 Following: line 21 Insert: "or personal care services by the facility" Page 14, line 22 Following: "prohibited." Insert: "(1) Hotels, motels, boardinghouses, roominghouses, or similar accommodations may not provide professional nursing services or personal care." Page 15, line 1 المربعة والمراج Following: "(2)" Insert: "(2)" Page 15, line 7 Following: "needed" Insert: "and cannot be appropriately provided in that setting."

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The following amendments, although not seen as being necessary to the bill, may be added:

Page 1, line 16 Following: "50-51-107," Insert: "50-51-201,"

Page 13, Line 17

Insert: "(2) "Boardinghouse" means buildings in which sleeping rooms are rented providing sleeping accommodations for three or more persons on a weekly, semimonthly, monthly, or permanent basis, and in which meals or central kitchens are provided for occupants and whose occupants do not receive professional nursing services or personal care services provided by the facility."

Renumber subsequent subsections of 50-51-102.

Page 14,

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Strike: Lines 5 through 12 in their entirety

. . . . .

Insert: "(5) "Roominghouse" means buildings in which sleeping rooms are rented providing sleeping accommodations for three or more persons on a weekly, semimonthly, monthly, or permanent basis, where no meals or central kitchens are provided, and whose occupants do not receive professional nursing services or personal care services provided by the facility." Amendments to H.B. 446 Suggested by Department of Social and Rehabilitation Services

Amendment to Section 1(2)

Consistent with the provisions of (Section-a), a A resident of a personal-care facility may have medical or nursing-related services performed for him in a personalcare facility by a third-party provider. if the resident is a recipient of medical services, as provided for under the authority of 53-6-111, and delivered by a home health agency, as defined in 50-5-101(15) or who is a recipient of medical services, as provided for under the authority of 53-6-111 and (HB 424).

Amendment to Section 3

(1) The department, in cooperation with the department of social and rehabilitation services, shall by rule adopt standards for licensing and operation of personal-care facilities to implement the provisions of (sections 1 and 2).

Amendment to Section 3.

(4) The department may provide by rule for categories of personal-care facilities differentiated by size and/or level of care. The department may adopt differing standards for these categories/

Amendment to Section 7 amending 50-5-101.

50-5-101(20) be amended on Page 9, line 25. Following: "than" Strike: "three" Insert: "four" 50-51-201. License required. (1) Each year, every person engaged in the business of conducting or operating a hotel, motel, tourist home, retirement home, or roominghouse shall procure a license issued by the department.

5B 446

(2) A separate license is required for each establishment; however, where more than one of each type of establishment is operated on the same premises and under the same management, only one license is required which shall enumerate on the certificate thereof the types of establishments licensed.

(3) Before a license may be issued by the department it must be validated by the local health officer, or if there is no local health officer the sanitarian, in the county where the establishment is located.

History: En. Sec. 3, Ch. 18, L. 1967; amd. Sec. 3, Ch. 485, L. 1973; R.C.M. 1947, 34-303(part); amd. Sec. 3, Ch. 200, L. 1979.

Ethilit 2 orm CS-34 PHIC STROPE 1611 No. \$6 439 WHOM DO YOU REPRESENT TAVEL ASS. SUPPORT X OPPOSE AMEND PLEASE LEAVE PREPARED STATEMENT WITH SECRETARY. Comments: WE RECOMMEND SB 439 AS AN OUTSTANKS IN'S SOLUTION TO A LON'S STANDING PROBLEN. WE SUGGEST THAT BE FABREDAS 48 248 BE HELIS IN SENATE UNTIL SB 439 PASSES HOUSE, IT MAY BE NEEDED TO ACCOMPLISH THE PURPOSES OF 5B27 AND 5B31 if 5B \$39 is NOT CONCURRED IN. Mai Nau Ellingsin yor City of missaula

#### STATEMENT OF INTENT FOR SENATE BILL 410

A statement of intent is necessary for Senate Bill 410 because in Section 3 it delineates the rulemaking authority of the department for licensure under this bill. It is the intent of the legislature that the department in making rules under this authority: provide procedural mechanism for licensure and operation of septic tank, cesspool, and privy cleaning businesses; establish minimum equipment requirements for licenses; timely procedures for inspection and evaluation; minimum requirements that protect the public health, safety and welfare for disposal of septage.

### STATEMENT OF INTENT SENATEBill No. 404 [LC 2190]

A statement of intent is necessary because this act gives the Department of Social and Rehabilitation Services the authority to designate area Councils on Aging for senior citizen services. It is intended that the Department establish criteria for use by area agencies or entities who apply to be area agencies that set forth the administrative and services capabilities necessary of area agencies. The rules must be in conformance with applicable federal law but recognize community needs for community services.

#### PROPOSED AMENDMENTS FOR SENATE BILL 274

l. Title, line 7,
Following: "PRIVILEGE;"
Insert: "AND"

2. Title, lines 8 through 10. Strike: "AND ALLOWING DISABILITY AND HEALTH INSURANCE COVERAGE FOR WORK DONE BY LICENSED PROFESSIONAL COUNSELORS;"

3. Page 1, lines 17 and 18. Strike: "psychologist licensed under the laws of this state" Insert: counselor educator holding a Doctorate of Philosophy

or Doctorate of Education degree in counseling"

4. Page 1, line 20.
Following: "state"
Insert: "or a psychologist licensed under the laws of this
state"

5. Page 2, line 24.

Strike: "the professional" through "methods" on line 18, page 3. Insert: "assisting an individual through the counseling relationship and counseling processes to develop understanding of personal problems, to define goals, and to plan action reflecting an individual's or group's interests, abilities, aptitudes, and needs as they relate to personal-social concerns, educational progress, occupational goals and career plans. The practice involves the application of professional counseling techniques including, but not limited to:

(a) Use of counseling and psychotherapeutic techniques with individuals, families, or groups;

(b) providing information and referral services;

(c) providing, arranging or supervising the provision of counseling services;

(d) explaining and interpreting the psychosocial aspects in the situations of individuals, families, or groups;

(e) helping communities to organize, provide, or improve counseling and health services;

(f) appraisal activities, which means selecting, administering, scoring and interpreting instruments designed to assist individuals in understanding aptitudes, abilities, achievement, interests, and personal characteristics, but does not include the use of projective techniques in the assessment of personality;

(g) counsulting, which means interpreting or reporting upon scientific fact or theory in counseling, guidance and personnel services to provide assistance in current or potential problems for individuals, groups, or organizations; and

(h) research activities, which means the reporting, designing, conducting, and interpreting of research in counseling with human subjects,

### PROPOSED AMENDMENTS FOR SENATE BILL 274:

(5) Counseling and psychoterapeutic techniques mean psychoeducational and psychosocial techniques used"

6. Page 3,

Following: line 22.

Insert: "Graduate quarter hour means a quarter hour or the semester hour equivalent as defined by regional accrediting educational associations when applied only to domestic training programs."

7. Page 5, line 1 through line 4.

- Strike: "No person may represent himself to be a licensed professional counselor by adding the letters "LPC" after his name or by any other means unless licensed under [sections 2 through 13]"
- Insert: "No person may represent himself/herself to the public by any title or description of services incorporating the words "licensed professional counselor" or any other term including "clinical," "educational," "academic," "Career," "vocational," "group," "mental Health," "personal," "psychoterapeutic," "behavioral," "guidance," "placement," "marriage," "family," "sex," or "child" coupled with the term counselor, or any other similar term; and who offers to render professional counseling services to individuals, groups, corporations, institutions, government agencies or the general public for a fee or other personal gain, nor may they add the letters "LPC" after their name unless licensed under [Sections 2 through 13]"

8. Page 5, line 23.
Strike: "mental health"

9. Page 6, line 21. Following: "administered" Insert: "or designated"

10. Page 6, lines 21 through 24. Strike: "except that during the 2-year period following the effective date of [Sections 2 through 13] a license must be granted without examination if the requirements of subsection (2) are met"

11. Page 7, lines 5 through 11.
Strike: subsections a, b, and c in their entirety
Tnsert: "(a) is a resident of the state of Montana.

(b) is not in violation of any of the provisions of this act and the rules and regulations adopted hereunder;

(c) has submitted a completed application form as may be required by the Board, accompanied by the application fee set by the board;

(d) has received a doctorate degree from a regionally accredited institution of high education which is primarily professional counseling in content, and which meets the academic and training content standards as established by the board; such standards to be substantially the same as those set by the American Personnel and Guidance Association. In addition, 1,000 hours of supervised conseling experience by a Licensed Professional Counselor or the equivalent as determined by the board is required, or

has completed a total of 60 graduate guarter hours (e) in counseling and has been awarded a master's degree from a regionally accredited institution of high education from a program that is primarily professional counseling in content and which meets the academic and training content standards as established by the board. The person must also have 3,000 hours of supervised post-graduate counseling experience under the direct supervision of a Licensed Professional Counselor or the equivalent as determined by the board in a counseling setting that meets the requirements of the board. 1,500 hours of the 3,000 hours of supervised counseling experience may be substituted with an additional 25 graduate guarter hours beyond the required 60 in a program that is primarily professional counseling in content from an institution approved by the board. Similarly, holders of a master's degree as herein defined may substitute supervised experience as herein defined for credit hours at the rate of 60 supervised practice hours for each quarter credit. Up to a total of 15 credits may be so substituted;

(f) abides by the ethical standards adopted under [section 4]. Such standards to be substantially the same as those set by the American Mental Health Counselors Association."

12. Page 8, line 17 through line 18.
Strike: "or upon demonstration by a person that he is exempt
from examination and has"

Insert: "applicants who have"

13. Page 8, line 19 and 20.
Strike: "the applicant"

14. Page 9, lines 10 through 19. Strike: Section 10 in its entirety. Insert: "NEW SECTION. Section 10. Grounds for revocation, suspension, or refusal to renew license. The board may

suspension, or refusal to renew license. The board may reprimand a licensee or revoke, suspend, or refuse to renew the license of a licensee found to have committed: (1) fraud or deceit in obtaining a license or license renewal;

(2) gross negligence, incompetency, or misconduct in the practice of professional counselor or a licensed professional counselor;

(3) a felony;

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(4) a violation of the rules for licensed professional counselor adopted by the board;

(5) a misdemeanor under

(6) any of the following unprofessional acts:

(a) misrepresentation of the type or status of his license;

(b) intentionally or recklessly causing physicial or emotional harm to a client;

(c) misrepresentation of his professional qualifications, affiliations, or purposes;

(d) sexual relations with a client, solicitation of sexual relations with a client, sexual misconduct, or a sex offense if such act, offense, or solicitation is substantially related to the qualifications, functions, or duties of the licensee;

(e) performance of or representation of his ability to perform professional services beyond his field or fields of competence, as established by his education, training, and experience;

(f) failure to maintain the confidentially, except as otherwise required or permitted by law, of all information received from a client during the course of treatment and all information about the client obtained from tests or other means;

(g) prior to the commencement of treatment, failure to disclose to a client or prospective client the fee to be charged for professional services or the basis upon which such fees will be computed; or

(h) advertising in a manner that is false or misleading."

15. Page 10, line 9.
Strike: "seven"
Insert: "five of the six"

16. Page 12, line 3 through page 13, line 21. Strike: Sections 14 and 15 in their entirety.

Aproval

AMENDMENTS TO SB-293 (Proposed by Montana Hospital Association)

- ×1. Page 7, line 25 Following: "services" Insert: "." Delete: rest of line 25 Page 8: Delete lines 1 through 8 in their entirety ×2. Page 12, line 25 Following: "equipment" Delete: the rest of line 25 Insert: ", provided such acquisition would have required a certificate of need pursuant to subsection (1)(a) or (1)(c) of this section if it had been made by or on behalf of a health care facility." Page 13 Delete: lines 1 through 7 in their entirety **x**3. Page 16, line 11 Following: "services." Delete: "expansion of existing services," Page 17, line 11 x4. Following: "If" Insert: ", after the 15 days," Page 17, line 13 Following: "information" Insert: "within 5 working days. Upon receipt of the additional information from the application, the department shall have 15 days to determine if the application is complete. If the department fails to make a determination as to the completeness of the application within the prescribed 15 day period, the application shall be deemed to be complete." X5. Page 18, line 17 Following: "period." Insert: "If the department fails to reach a decision and notify the applicant of its decision within the deadlines established in this section, and if that delay constitutes an abuse of the department's discretion, the applicant may apply to district court for a writ of mandamus to force the department to render a decision.
- %6. Page 12, line 23
  Following: "of"
  Strike: "\$50,000"
  Insert: "\$100,000"

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#### SENATE BILL NO. 293 (MHA Proposed Amendments)

MR. CHAIRMAN:

I move to amend Senate Bill No. 293 as follows:

1. On pages 7 and 8, definition of "major medical equipment" amended

to read:

"(27) "Major medical equipment" means a single unit of medical equipment or a single system of components with related functions which is used to provide medical or other health services."

2. On page 12, subsection (1)(d) amended to read:

"(d) the acquisition by any person of major medical equipment, provided such acquisition would have required a certificate of need pursuant to subsection (1)(a) or (1)(c) of this section if it had been made by or on behalf of a health care facility."

3. On page 16, subsection (1)(e) by deleting the following:

"expansion of existing services,".

4. On page 17, subsection (4), lines 8 through "additional information"

on line 13 by substituting in lieu thereof:

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"(4) Within 15 calendar days after receipt of the application, the department shall determine whether it is complete. If the application is found incomplete the department shall request the necessary additional information within 5 calendar days. Upon receipt of the additional information from the applicant, the department shall have 15 days to determine if the application is complete. If the department fails to make a determination as to the completeness of the application within the prescribed 15 day period, the application shall be deemed to be complete."

5. On page 18, subsection (6), by adding the following:

"(6) The department shall, after considering all comments received during the review period, issue a certificate of need, with or without conditions, or reject deny the application. The department shall notify the applicant of its decision within 5 working days after termination of the review period. If the department fails to make a decision and notify the applicant of its decision by the end of the review period, the application shall be deemed to have been approved."

6. On page 12, subsection 1(c) by striking \$50,000 on line 23 and replacing it with \$100,000.

7. On page 17, by adding the following subsections to Section 13:

"(3) On July 1, 1987, Sections 50-5-301 through 50-5-308, MCA, and Section 8, Section 9 and Section 10 hereof, are repealed unless reenacted by the legislature.

(4) On July 1, 1987, Section 50-5-101, MCA is amended by deleting subsections (3), (5), (6), (8), (9), (10), (13), (14) and (27) unless reenacted by the legislature.

(5) On July 1, 1987, Section 50-5-106, MCA is amended to read as follows, unless reenacted by the legislature:

"50-5-106. Records and reports required of health care facilities - confidentiality. Health care facilities shall keep records and make reports as required by the department. Before February 1 of each year, every licensed health care facility shall submit an annual report for the preceding calendar year to the department. The report shall be on forms and contain information specified by the department. Information received by the department or board through reports, inspections, or provisions of parts 1 and 2 may not be disclosed in a way which would identify patients. A department employee who discloses information which would identify a patient shall be dismissed from employment and subject to the provision of 45-7-401, unless the disclosure was authorized in writing by the patient, his guardian, or his agent. Information and statistical reports from health care facilities which are considered necessary by the department for health planning and resource development activities will be made available to the public and the health planning agencies within the state. Applications-by-health-care-facilities-for-certificates-of-need and-any-information-relevent-to-review-of-these-applications, pursuant-to-part-3,-shall-be-accessible-to-the-public-"

(6) On July 1, 1987, Section 50-5-206, MCA is amended to delete subsection (3), which provides:

"(3)-The-denial,-suspension,-or-revocation-of-ahealth-care facility-license-is-not-subject-to-the-certificate-of-need requirements-of-part-3."

Moved Page 21, line 24.

AMENDMENT TO SB-293

Following: "need."

Insert: "The department may adopt rules for the imposition of such conditions, but only if the secretary of the United States department of health and human services has approved an amendment to the state's medicaid plan, adopted pursuant to 42 USC 1396a, allowing for the imposition of such conditions."

# STANDING COMMITTEE REPORT

FEBRUARY 13. 19.83....

MR. PRESIDENT:

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1. Title, line 11. Following: "DATE" Insert: "AND DELAYED EFFECTIVE DATES"

and the second reason of

2. Page 7, line 25. Following: "services" Strike: remainder of line 25 through "act" on line 8, page 8.

3. Page 12, line 25. Following: "equipment" Strike: remainder of line 25 through "value." on line 7, page 13. Insert: ", provided such acquisition would have required a certificate of need pursuant to subsection (1)(a) or (1) (c) of this section if it had been made by or on behalf of a health care facility."

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CONTINUED

Chairman.

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FEBRUARY 18, 19.83

PUBLIC HEALTH PAGE TWO SENATE BILL 293 4. Page 16, line 11. Following: "services," Strike: "expansion of existing services," 5. Page 17, line 11. Following: "If" Insert: ", after the 15 days," 6. Page 17, line 13.
Following: "information" Insert: "within 5 working days. Upon receipt of the additional information from the application, the department shall have 15 days to determine if the application is complete. If the department fails to make a determination as to the completeness of the application within the prescribed 15 day period, the application shall be deemed to be complete." 7. Page 18, line 17. Following: "period." Insert: If the department fails to reach a decision and notify the applicant of its decision within the deadlines established in this section, and if that delay constitutes an abuse of the department's discretion, the applicant may apply to district court for a writ of mandamus to force the department to render a decision." 8. Page 12, line 23. Following: "<u>of</u>" Strike: "\$50,000" Insert: "\$100,000" 9. Page 21, line 24. Following: "need." Insert: "The department may adopt rules for the imposition of such conditions, but only if the secretary of the United • States department of health and human services has approved an amendment to the state's medicaid plan, adopted pursuant to 42 USC 1396a, allowing for the imposition of such conditions." 10. Page 29, line 13. Strike: "date" Insert: "dates"

STATE PUB. CO. Helena, Mont,

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Chairman.

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FEBRUARY 18, 19.83

PUBLIC HEALTH PAGE THREE SENATE BILL 293

11. Page 29, line 14. Following: "Approval" "with delayed effective dates" Insert: Following: **H** H

"On July 1, 1987, Sections 50-5-301, 50-5-302, 50-5-304 Insert: through 50-5-308, MCA, and Section 8, Section 9 and Section 10 hereof, are repealed unless reenacted by the legislature. (3) On July 1, 1987, Section 50-5-101, MCA, is amended by deleting subsections (3), (5), (6), (8), (9), (10), (13), (14), and (27) unless reenacted by the legislature. (4) On July 1, 1987, Section 50-5-106, MCA, is amended to read as follows, unless reenacted by the legislature: "50-5-106. Records and reports required of health care facilities confidentially. Health care facilities shall keep records and make reports as required by the department. Before February 1 of each year, every licensed health care facility shall submit an annual report for the preceding calendar year to the depart-The report shall be on forms and contain information ment. specified by the department. Information received by the department or board through reports, inspections, or provisions of parts 1 and 2 may not be disclosed in an way which would identify patients. A department employee who discloses information which would identify a patient shall be dismissed from employment and subject to the provision of 45-7-401, unless the disclosure was authorized in writing by the patient, his guardian, or his agent, Information and statistical reports from health care facilities which are considered necessary by the department for health planning and resource development activities will be made available to the public and the health planning agencies within the Applications-by-health-care-facilities-for-certificates state. of-need-and-any-information-relevent-to-review-of-these-applications,---pursuant-to-part-3,-shall-be-accessible-to-the-public.\*\*

And, as so amended,

#### DO PASS

STATE PUB. CO. Helena, Mont.

Chairman.

All.

### SENATE COMMITTEE PUBLIC HEALTH, WELFARE, AND SAFETY

Date FEBRUARY 18, 1983 SENATE Bill No. 274 Time

NAME	YES	NO
SENATOR TOM HAGER		
SENATOR REED MARBUT		
SENATOR MATT HIMSL		
SENATOR STAN STEPHENS		-
SENATOR CHRIS CHRISTIAENS		
SENATOR JUDY JACOBSON		~
SENATOR BILL NORMAN	~	-
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Chairman

Motion: A motion was made by Senator Himsl that Senate Bill 274 receive a DO NOT PASS recommendation from the Committee. Motion carried.

(include enough information on motion--put with yellow copy of committee report.)

FEBRUARY 18 19.83

PRESIDENT: MR. ..... We, your committee on \_\_\_\_\_ PUBLIC HEALTH, WELFARE AND SAFETY States and the second 

DO NOT PASS

SENATOR TOM HAGER

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FEBRUARY 18, 1983

MR. PRESIDENT:

We, your committee on PUBLIC HEALTH, WELFARE AND SAFETY

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Statement of Intent Attached

DO PASS

STATE PUB. CO. Helena, Mont.

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February 18 19 83

MR. PRESIDENT:

We, your committee on \_\_\_\_\_ PUBLIC HEALTH, WELFARE AND SAFETY

Statement of Intent SENATE Bill No. 446

#### STATEMENT OF INTENT RE: SB 446

Senate Bill 446 requires a statement of intent because section 3 requires the Department of Health and Environmental Sciences to adopt standards for operation and licensing of personal-care facilities, and license, inspection, and patient screening fees, and in cooperation with other state agencies to adopt health and safety standards for personal-care facilities. It is the intent of the Legislature that when the Department adopts rules to implement provisions of SB446 that it utilize the report to the 48th Legislature by the Legislative advisory committee on Joint Resolution 34 and that the rules:

- assure that licensees meet applicable fire, sanitation, building, and service standards;
- 2. provide as expeditious a licensing procedure as possible;

CONTINUED ON PAGE 2 DOLRASSX

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February 18 19 83 Senate Committee on Public Health, Welfare and Safety

Senate Committee on Public Health, Welfare and Safety Page 2 Senate Bill No. 446

- 3. set inspection and patient screening fees that recover but do not exceed the costs of inspection and patient screening; and
- 4. include other state agencies in the development of those rules which fall in their areas of expertise and responsibility.

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### SENATE COMMITTEE PUBLIC HEALTH, WELFARE, AND SAFETY

Date\_\_\_\_\_Bill No.\_\_\_\_\_

NAME	YES	NO
SENATOR TOM HAGER		V
SENATOR REED MARBUT		
SENATOR MATT HIMSL		
SENATOR STAN STEPHENS		
SENATOR CHRIS CHRISTIAENS		
SENATOR JUDY JACOBSON		
SENATOR BILL NORMAN		
Claire Acavelin	An H	hym
Secretary	nairman' /	Y
Motion: A motion was made by SEnator	Norman that Sena	te Bill
410 receive a DO PASS RECOMMENDAT	ION. Motion carr	ied.

(include enough information on motion--put with yellow copy of committee report.)

**February 18** 19 83

MR. PRESIDENT:

We, your committee on \_\_\_\_\_ PUBLIC HEALTH, WELFARE AND SAFETY

having had under consideration Statement of Intent, SENATE Bill No. 410

#### STATEMENT OF INTENT RE: SB 410

A statement of intent is necessary for Senate Bill 410 because in Section 3 it delineates the rulemaking authority of the department for licensure under this bill. It is the intent of the legislature that the department in making rules under this authority; provide procedural mechanism for licensure and operation of septic tank, cesspool, and privy cleaning businesses; establish minimum equipment requirements for licenses; timely procedures for inspection and evaluation; minimum requirements that protect the public health, safety and welfare for disposal of septage.

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SENATOR TOM HAGER

Chairman.

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MR. .....PRESIDENT:

1. Page 2, line 22. Strike: "but not limited to"

2. Page 6, lines 12 through 14. Strike: ", imprisoned for a term not to exceed 39 days, or both. Each day of violation constitutes a separate offense"

And, as so amended, DO PASS Statement of Intent Attached STATE PUB. CO. Helena, Mont. SENATOR TOM HAGER Chairman.

		FEBRUARY 18,	
MR PRESIDENT :			
We, your committee on <b>PUBLIC</b>	IEALTH, WELFARE A	ND SAFETY	·
having had under consideration	SENATE	В	ill No <b>446</b>
	X		an she an an she <b>see</b> re
Respectfully report as follows: That	SENATE	В	ill No <b>446</b> ,
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### Statement of Intent Attached

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Chairman.

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February 18 19.83

MR. PRESIDENT:

having had under consideration Statement of Intent, Senate Bill No. 404

#### STATEMENT OF INTENT RE: SB 404

A statement of intent is necessary because this act gives the Department of Social and Rehabilitation Services the authority to designate area Councils on Aging for senior citizen services. It is intended that the Department establish criteria for use by area agencies or entities who apply to be area agencies that set forth the administrative and services capabilities necessary of area agencies. The rules must be in conformance with applicable federal law but recognize community needs for community services.

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SENATOR TOM HAGER

FEBRUARY 18 19 83

PRESIDENT MR. .... .....

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We, your committee on \_\_\_\_\_ PUBLIC HEALTH, WELFARE AND SAFETY

DO PASS

SENATOR TOM HAGER

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February 18 19 83

MR. PRESIDENT

We, your committee on	PUBLIC H	HEALTH,	WELFARE	AND	SAFETY	•• •
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having had under consideration Statement of Intent SENATE Bill No. 447

Respectfully report as follows: That Statement of Intent, Senate Bill No. 447 be adopted

STATEMENT OF INTENT RE: SB 447

Senate Bill 447 requires a statement of intent because it authorizes the departments of health and enviromental sciences, social and rehabilitation services, and institutions to adopt joint rules which would enable the agencies to coordinate their reviews of certain residential facilities over which they have jurisdiction. The intent of the legislature is that such rules will address cooperative review mechanisms, utilization of personnel, qualifications of inspectors, and delegation of review authority to other agencies. These ruleiswill not affect the substantive standards or criteria under which the regulated facilities operate.

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SENATOR TOM HAGER

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FEBRUARY 18 19 83

MR. PRESIDENT:

We, your committee on \_\_\_\_\_ PUBLIC HEALTH, WELFARE AND SAFETY

Respectfully report as follows: That......Bill No....447,.... introduced copy, be amended as follows:

1. Page 1, line 20. Following: "impatient" Insert: "free-standing"

2. Page 2, Following: line 16. Insert: "(3) "Inspecting authority" means the department or agency authorized by statue to perform a given inspection necessary for certification for licensure. (4) "Licensing agency" means the agency that is authorized by statute to issue the license."

And, as so anonded,

DO PASS Statement of Intent Attached

SENATOR TOM HAGER

Chairman.

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February 18 19 83

MR. PRESIDENT

We, your committee on PUBLIC, HEALTH, WELFARE AND SAFETY

having had under consideration .... Statement of Intent SENATE Bill No. 418

#### STATEMENT OF INTENT RE: SB 419

The Department of Social and Rehabilitation Services is currently required to adopt rules to implement a program of financial assistance for chronic renal diseased patients by rule. The Legislature considers it to be appropriate to provide guidance for the Department of Health and Environmental Sciences after transfer of this program.

It is the express intent of the Legislature that some financial sistance for treatment of chronic renal diseases be available to persons with end stage renal diseases. The amount of money provided must be dependent upon the effect that would be caused to the economic stability of the family if the diseased person and his family were to assume all of the expenses of treatment itself. Under the bill, the Department must examine not the "absolute" income levels of the person needing treatment and his family, but the degree to which that level of income, whatever it may be, would be affected by treatment expenses. For these purposes, the Legislature intends that the Department not involve itself in major subjective judgments as to the ability of a GARMAGEX patient and his family to do without property or services which they consider essential.

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SENATOR TOM HAGER

Chairman.

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February 18, 19.83

MR. ...PRESIDENT:

We, your committee on \_\_\_\_\_\_\_PUBLIC\_HEALTH, NELFARE & SAFETY

1. Title, line 4.
Following: "ACT"
Insert: "TRANSFERRING THE END STAGE RENAL DISEASE
PROGRAM TO THE DEPARTMENT OF HEALTH AND ENVIROMENTAL SCIENCES;"

2. Title, line 7.
 Strike: "and"
 Insert: ";"

3. Title, line 9. Following: "MCA;" Insert: "ADOPTING NEW RULES GOVERNING THE END-STAGE RENAL DISEASE PROGRAM UNTIL SUCH TIME AS RULES ARE ADOPTED BY THE DEPARTMENT;"

4. Page 1, line 21.
Strike: "social and rehabilitation services" Insert: "health and environmental sciences"

(Continued)

Chairman.

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STATE PUB. CO. Helena, Mont.

Public Health, Welfare & Safety Committee Senate Bill No. 418 Page 2

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- 5. Page 2, line 2. Strike: "all"
- 6. Page 2, lines 15 through 17. Strike: "but...earned"

7. Page 2.

Following: line 21

Insert: "NEW SECTION. Section 3. Renal program rules adopted -- expiration. (1) The department of health and enviromental sciences shall extend financial assistance to persons with chronic renal diseases under 53-6-202 in accordance with the following:

PROGRAM FOR NON-VOCATIONAL REHABILITATION CLIENTS SUFFERING FROM CHRONIC END STAGE RENAL DISEASE (1) The appropriate division shall extend financial assistance to eligible persons suffering from chronic renal diseases in obtaining the medical, nursing, pharmaceutical, and technical services necessary to care for such diseases; other services include but are not limited to kidney transplantation, surgery, hospitalization, psychological treatment, transportation for applicant, donor, or attendant, attendant training and attendant salary.

(a) Services shall not exclude the rental or purchase of home dialysis equipment supplies, plumbing, wells, rewiring and other adaptive equipment and supplies.

(2) Eligibility requirements:

(a) Applicants who are not financially able to obtain care and treatment on a continuing basis without causing severe economic imbalance to their family economic unit are eligible.
(i) Maximum or minimum income levels of the applicant or his or her family shall not be considered.

(b) Vocational Rehabilitation clients are not eligible unless:

(i) a reasonable period of time has elapsed (generally six months) during which evaluative services were provided; and,

(ii) a medical determination of nonfeasibility can be shown at the close of the six month evaluation period.

(c) Applicants must be medically described as suffering from "chronic" End Stage Renal disease, which does not include those persons with conditions which could potentially lead to the "chronic" state, and does not include those persons with conditions medically defined as acute renal failure.
(d) Applicants eligible for Medicare may be eligible if they meet the standards of this program, providing Medicare benefits are fully utilized.

(e) Applicants eligible for the appropriate Medicaid or Medically Needy Programs are not eligible for this program until the Medicaid and Medically Needy Program benefits are exhausted.

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Public Health, Welfare & Safety Committee Senate Bill No. 418 February 18, 1983 Page 3 (f) Eligibility as to financial need shall be determined by the economic need test as set forth in sub-chapter 4 of the social and rehabilitation services rules. Such standards shall be established without reference to maximum and minimum income levels. (3) Priorities of service: (a) Only the following services will be provided: (i) training for dialysis (including transportation, room and board); (ii) transplant costs; (iii) center dialysis (when justified); (iv) medications, for treatment of end stage renal medical conditions; (v) surgery (fistual, etc.); (vi) dialysis machine rent, supplies and repairs; (vii) costs to install dialysis machine at home, such as necessary; (viii) plumbing, wiring, etc.; (ix) attendant. (2) The rule provided in subsection (1) is effective until such time as the department adopts appropriate rules under the Montana Administrative Procedure Act to implement the

Renumber: subsequent sections accordingly

provisions of 53-6-202."

And, as so amended, DO PASS

#### Statement of Intent Attached

#### TOM HAGER, Chairman

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