

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

MARCH 16, 1983

The meeting of the Public Health, Welfare and Safety Committee was called to order by Chairman Tom Hager on Wednesday, March 16, 1983 in Room 410 of the State Capitol Building.

ROLL CALL: All members were present. Woody Wright, staff attorney was also present.

Many visitors were also in attendance. See attachments.

CONSIDERATION OF YOUR BILL 782: Representative Cal Winslow of House District 65, the chief sponsor of House Bill 782, requested that the Committee table the bill because it is no longer needed.

A motion was made by Senator Hims1 that HB 782 be tabled at the request of the sponsor. Motion carried unanimously.

CONSIDERATION OF HOUSE BILL 284: Representative Cal Winslow of House District 65, the chief sponsor of House Bill 284, gave a brief resume of the bill. This bill is an act to provide for the licensing and regulation of social workers; creating a communications privilege; providing for violations and penalties and allowing disability and health insurance coverage for work done by licensed social workers.

There are between 150 and 200 social workers in Montana which would be affected by this bill. This is a licensing process.

Sharon Hanton, representing the National Association of Social Workers, stood in support of the bill. Persons with Bachelor's Degrees in Social Work and other fields who work primarily in State agencies are not included in this bill. These workers tend to use invironmental change and making the system work to relive individual and family stress. The quality controls in their work are agency policy and supervision.

Dr. Duncan Burford, a psychiatrist, stood in support of the bill. He stated that the Montana Psychiatric Association and

PUBLIC HEALTH
PAGE TWO
MARCH 16, 1983

the Mental Health Committee of the Montana Medical Association voted to support this bill. Professionally trained social workers---along with psychiatrists and psychologists--- are one of the major disciplines in the mental health delivery system. Much of their knowledge and skill in working with individuals, families, and children were developed by social workers. The services of Masters of Social Work is needed if we are to meet the needs of troubled people. Anything that will support social workers, make their services more readily available and reassure the public as to their professional qualifications will help. This bill is a more in the right direction. Dr. Burford turned in written testimony to the Committee for their review. See exhibit 1.

Bill Evans, representing the Counseling Consortium, stood in support of the bill. He offered some letters to the Committee for their consideration. See exhibit 2.

Carol Ferguson, representing herself, stood in support of the bill. Mrs. Ferguson offered written testimony for the record. See exhibit 3.

Addison Carlson, representing himself, stood in support of the bill. He stated that making available the services of those with the Masters of Social Work designation, for counseling services, as a vocered health insurance coverage will allow more people to use those services, rather than forego necessary sounseling because of inability to pay.

Gloria Hermanson, representing herself, stood in support of the bill. She told of her own personal experiences with a daughter who has tried to commit suicide on several occasions and her treatment in hospitals and with counselors. Credentialing of social workers and psychotherapists is a necessary protection for the people of this state. Her experiences indicate that without it, we are left defenseless in the face of mental/emotional diversity.

Dr. Steve Wagner, representing the Montana Psychological Association, stood in support of the bill.

Dr. Charles Horejsi, representing the Department of Social Work and the University of Montana, stood in support of the bill. He stated that there is no masters level of social work degree available in Montana. The closest school is in Eastern Washington.

MARCH 16, 1983
PAGE THREE
PUBLIC HEALTH

Andree' Delijdich, representing the National Associaal of Social Workers, stood in support of the bill.

J. D. Homes, representing the Montana Chapter of Social Workers, stood in support of the bill. He stated that more people than ever before are needing to use the services of a social worker and the state of Montana is required to see that the best possible help is available.

Bill Leary, representing the Montana Hospital Association, stated that his associaiton is on neutral ground, however, they are concerned with the protection of the people of our state. He suggested that perhaps the bill could be amended on on page 13, and on line 25.

With no further proponents, the chairman called on the opponents.

Jan VanRiper, assistant Bureau Chief with the Division of Workers' Compensation, spoke in opposition to the bill. Under the existing law insurers providing workers compenation coverage are required to pay for services rendered to an injured worker by a variety of health care providers. These include physicians, dentists and chiropractors to name a few. This bill would add social workers to that list of providers. Ms. VanRiper, handed in written testimony to the committee for their review. See exhibit 4.

Alan Kane, representing the Montana Physicians Service stood in opposition to the bill. He stated that this would put social workers under mandatory insurance coverage. In Utah this is now the case that insurance costs have increased rather drastically since the mandatory benefits have become law.

Tom Harrison, representing Blue Cross of Montana, stood in opposition to the bill. He stated that it should be clarified that this is optional coverage. If there would be an amendment offered to clear up that this is optional coverage his organization would not be opposed to the bill.

Lester Losble, ll, representing the American Council of Life Insurance, asked that the bill be amended on page 13, line 8, Strike: "or master of social work". He stated that adding additional coverage would increase the cost of medical insurance.

PAGE FOUR
PUBLIC HEALTH
MARCH 16, 1983

Glen Drake, representing the Health Insurance Association of America, stood in opposition to the bill. The Health Insurance Association is a trade organization of health insurers. One of the concerns of the industry is the problem of skyrocketing health care costs. HB 284, if enacted, will be another cause of further cost increases to the consumer. Health insurance was created to pool resources for the payment of medical bills and costs. By expanding the definition of the types of services that must be included in the offer of insurance, you necessarily increase the cost to all. Social workers, no matter how admirable a group, should not be included under health care provisions. Mr. Drake asked that Section 14 and Section 15 be struck from the bill.

With no further opponents, Representative Winslow closed. He stated that this is not a mandatory insurance. It is a provision of choice. The bill will qualify and license masters of social work.

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

Senator Norman asked Ms. VanRiper if Workman's Compensation would be satisfied if Section 14 were struck from the bill. She stated that she would be satisfied if this were to be struck from the bill.

Senator Stephens asked if social workers in hospitals are now certified and licensed.

Senator Marbut asked about the confidentiality clause. At the present time the social worker, if called into court they can tell only that part which would be ethical and not effect the ethical standards.

Senator Marbut stated that it appears that a good definition is needed for "psychosocial". Everyone agreed with this.

CONSIDERATION OF HOUSE BILL 708: Representative Joe Quilici of House District 84, the chief sponsor of HB 708, gave a brief resume of the bill. This bill is an act to establish statutory provisions relating to the low-income energy assistance program; to provide that the low-income energy assistance program and the home weatherization program be administered by community nonprofit entities representing one or more of the governor's substate planning districts, and providing for an effective date.

PAGE FIVE
PUBLIC HEALTH
MARCH 16, 1983

Dean Luptak of Billings, the energy assistance program director for District 7 Human Resources Development Council which serves High Horn, Carbon, Stillwater, Sweet Grass and Yellowstone counties, stood in support of the bill. Mr. Luptak offered written testimony to the committee for their review.

Carl J. Donovan, representing the Montana Coalition Against Poverty, stood in support of the bill. Mr. Donovan read a letter of support from Clyde Jarvis. See exhibit 5. Mr. Donovan told of some of the problems that had arisen in Great Falls with the program, however, it seems to be better now.

Mary Noonan, Mineral County Commissioner, stood in support of the bill. Mrs. Noonan offered written testimony to the record. See exhibit 6. This bill as written gives flexibility to the county commissioners to review the plan which best suits the needs of the people in their area.

Howard Schwartz, representing the Missoula County Commissioners, stood in support of the bill. He read a letter from the commissioners stated that HB 708 is important because it ensures that human resource councils would have the highest priorities in receipt of administrative and program funds for LIEAP. The human resource councils are best equipped to administer these funds as demonstrated by what is believed to be an excellent record. See exhibit 7.

Nancy Scheetz-Freymiller, representing the Montana Power Company, stood in support of the bill. She stated that Montana Power Company was worked together for three years with the HRDC's and had a very good relationship. People do not want to do on welfare.

Gene Lewwen, representing the Rocky Mountain Development Council stood in support of the bill. Lewis and Clark, Jefferson and Broadwater Counties currently operate the LIEAP program. These counties wish to be assured that HB 708 does not preclude them from continuing to operate as they have been.

Lee Tickle, representing the Social and Rehabilitation Services, stood in support of the bill.

Beverly Gibson, representing the Montana Association of Counties, stood in support of the bill. Her association supports the flexibility to allow counties to administer low income energy program if economically feasible to award the contract to the county rather than to HRDC. She suggested that the statement of intent be amended and also the title

PAGE SIX
PUBLIC HEALTH
MARCH 16, 1983

by removing the word "substate". Mrs. Gibson also stated that she supported the amendment to change the word "priority" on page 2, line 20 to "special consideration".

Bob Altmeyer, representing the Low Income Senior Citizens Association of Columbia Falls, stood in support of the bill.

Edna Frey, representing the Mineral County Senior Citizens of Superior, stood in support of the bill. She offered written testimony to the Committee for their consideration. See exhibit 8.

Wade Winkinson, representing L.I.S.C.A., stood in support of the bill.

Because of lack of time other people turned in written testimony for the Committee to consider. See exhibits 9 through 11.

Representative Quilici closed. He stated that he hoped the committee would concur on this bill with an amendment on page 2, line 20 changing the "priority" to "special consideration".

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

The meeting was recessed at 3:00 and will resume at approximately five o'clock.

The meeting was again called to order by Chairman Tom Hager with all members present. Woody Wright, staff attorney, was also present.

Senator Hager stated that the purpose of this meeting was to take executive action of HJR 8 and HJR 13. He then read a letter of his comments to the committee. See exhibit 12.

A motion was made by Senator Stephens that HJR 8 be tabled. Motion carried. See exhibit 13 for a roll call vote.

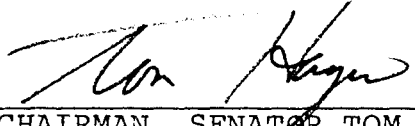
Senator Marbut stated that he would like to see both bills tabled together.

A motion was made by Senator Norman that HJR 13 be tabled. Motion carried unanimously.

PAGE SEVEN
PUBLIC HEALTH
MARCH 16, 1983

ANNOUNCEMENTS: The next meeting of the Public Health, Welfare and Safety Committee will be held on Friday, March 18, 1983 to consider HB 513, 663, 671, and 687 in Room 410 of the State Capitol Building.

ADJOURN: With no further business the meeting was adjourned.



CHAIRMAN, SENATOR TOM HAGER

eg

ROLL CALL

PUBLIC HEALTH, WELFARE, SAFETY COMMITTEE

48th LEGISLATIVE SESSION -- 1983

Date 3/14/83

[illegible]

DATE _____

COMMITTEE ON _____

VISITORS' REGISTER

NAME	REPRESENTING	BILL #	Check One	
			Support	Oppose
Conall Jack	Self	284	✓	
Hyaline J. Lehman	NWMTA	708	✓	
Addison L. Carlson	self	284	✓	
Gloria Stenmanson	self	284	✓	
Linda Slitten	legislative intern MMA	284		
Beverly Gibson	MAEO	708	—	
Carl J. Noonan	Montana Coalition Against Abuse	708	✓	
American Psychiatrist	self - Psychiatrists	284	✓	
B. M. Evans	Private Practice Group	284	✓	
Carol Peterson	self	284	✓	
Les Loble II	Am. Council of Life Ins.	284	amend	
Louis Ford	State Auditor's Dept	284		
Norma Deffert	MT Sup. Dept	284	—	
Elm W. W. W.	Am. Council of Life Ins.	284	amend	
Andrie Belaford	NASW - Great Falls	284	✓	
Linda Williams	NASW - Billings	284	✓	
J. D. Holmes	MT Chapter NASW	284	✓	
Stephen C. Wagner	Montana Psych. Assoc.	284	✓	
Kaye Jean Day	Mont. Coalition Against Abuse	708	✓	
Mary Lou Garrett	Commerce	284	✓	
" " "	"	782		✓
Shirley M. Miller	✓	284	✓	
✓	✓	782		✓
Howard Schwartz	Missoula County	708	✓	
Daniel S. Van Riper	Div. of Workers' Comp	284		✓
Mary K. Noonan	Mineral County Comm.	708	✓	

SENATE

COMMITTEE

BILL

VISITORS' REGISTER

DATE

Please note bill no.

NAME

REPRESENTING

BILL #

(check one)

SUPPORT

OPPOSE

Lillie M Kenyon

Superior Iron Council

708

✓

Sharon Nanton

National Ass. J.S.W.

284

✓

Shirley School

dist 4 HRBC

708

✓

Nancy Schoof-Frymuller

Montana Power

708

✓

Alice Morse

Self: S.W. Mental Health Center

284

✓

Charles R. Horejsi

Dept of Social Work
University of Montana

284

✓

Gloria A. Horejsi

Self - NABW

284

✓

Alice Burford

Self - N.A.S.W.

284

✓

Wilson Curcell

Self: St. Peter's Hospital
Deaconess Home for Children

284

✓

Tom Drayton

Deaconess Home

284

✓

Loree Lunden

Self

PLEASE LEAVE PREPARED STATEMENT WITH SECRETARY

NAME: DUNCAN BURFORD, M.D. DATE: 16 Mar 83

ADDRESS: 1116 No. 29th St.

PHONE: 252-6082

REPRESENTING WHOM? self - Psychiatrists

APPEARING ON WHICH PROPOSAL: House Bill 284

DO YOU: SUPPORT? ☒ AMEND? ☐ OPPOSE? ☐

COMMENTS: Written testimony attached.

PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY.

E. J. Hulst 1

I am Dr. Duncan Burford, a Physician and Psychiatrist in Billings, Montana.

I am here to speak in favor of House Bill 284.

I want you to know that the Montana Psychiatric Association and the Mental Health Committee of the Montana Medical Association voted to support this Bill.

Professionally trained Social Workers--along with psychiatrists and psychologists--are one of the major disciplines in the Mental Health Care Delivery system. Much of our knowledge and skill in working with individuals, families, and children were developed by Social Workers. We need the service of our M.S.W.'s if we are to meet the needs of troubled people. Anything that will support ^{such} workers, make their services more readily available and reassure the public as to their professional qualifications will help. This Bill is a move in this direction.

This is a time in which national political policy has said--government will do less--the private sector must do more. Agencies such as Mental Health Centers find that they must charge higher fees to make ends meet. Social Workers have found that they can offer equal or better service privately than is available through many agencies and at no greater cost. This Bill will help support the availability of this service.

Persons with Bachelor's Degrees in Social Work and other fields who work primarily in State agencies are not included in this Bill. I agree with this. These workers tend to use environmental change and making the system work to relieve individual and family stress. The quality controls in their work are agency policy and supervision.

M.S.W.'s are trained to understand feelings and developmental issues which are internal matters for their clients. They are more likely to work on these issues with their clients. Licensure is needed to say who is trained and qualified for this kind of work.

I urge your support of House Bill 284 and I thank you for your attention.

Exhibit 2

Home Federal Savings

AND LOAN ASSOCIATION

March 4, 1983

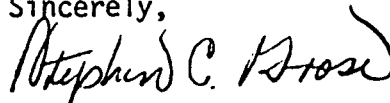
Mr. Bill Evans
Counseling Consortium
555 Fuller Avenue
Helena, Montana 59601

Dear Bill,

I have reviewed with our Board of Directors our posture on the possibility of having mental health care services as an option in designing our health care program for our employees.

We agreed that mental health care, inclusive of Psychiatrists, Psychologists, and Licensed Masters of Social Work as the providers, should be on the "menu" of available choices from which we could design our health care package.

Sincerely,



Stephen C. Grose
President

Home Federal Savings, a Division of
Western Federal Savings of Missoula



321 Fuller Avenue, P.O. Box 1726, Helena, Montana 59624, (406) 442-6142
11th & Montana Avenue, P.O. Box 1726, Helena, Montana 59624 (406) 442-0140
101 Lane Avenue, P.O. Box S, East Helena, Montana 59635 (406) 227-8164
1941 W. Main Street, P.O. Box 1027, Bozeman, Montana 59715 (406) 587-5174



LAWRENCE R. MCEVOY, M.D.
DIPLOMATE AMERICAN BOARD OF INTERNAL MEDICINE

March 14, 1983

To Whom It May Concern:

I support the concept of licensing social workers with Master's Degrees who practice psychotherapy.

I, myself, have referred patients to such therapists.

Sincerely,


Lawrence R. McEvoy, M.D.

LRM/hkm

JAN 1981

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HOW TO FIND A...



Psychotherapy has come a long way since 1895, when Freud's first patient reclined on that celebrated couch in Vienna. About 90,000 mental-health specialists, offering more than 250 types of therapy, practice in the U.S. today. They range from traditional Freudians to clergymen with advanced degrees in psychology to innovative therapists who use music and art to unlock emotions.

With so much variety to choose from, the obvious question is: Which kind of therapy is best? That depends on the problem. Behavioral modification may be able to cure in a few months such phobias as the fear of flying. Highly intellectualized psychoanalysis can change deep-seated personality disorders, although it may take several years of expensive, intensive therapy.

For most problems, however, the therapist's precise methods are not the most important thing to look for. One therapist may probe childhood difficulties while another concentrates on day-to-day behavior. But most professionals now practice eclectic treatment, fitting their style somewhat to the needs of the patient. Besides, over the long run, no one method has proved most successful.

The mechanics of treatment are remarkably mundane. You talk; the therapist listens and responds. Usually you sit in chairs facing each other; the couch is reserved for psychoanalysis. Since therapy is the "talking cure," the trust between patient and therapist can be the most critical factor of all. When looking for help, each potential patient must test this personal chemistry for himself.

Unfortunately, some of the most

convincing practitioners are charlatans. Anyone can hang out a shingle as a psychotherapist or counselor, and with a little knowledge and lots of brass can succeed at such an intangible science. Consequently, credentials are critical.

There are five classes of accredited mental-health professionals:

► Psychiatrists are physicians with special training in mental disorders. They should be "board certified" to show that they have passed qualifying examinations. Since they are M.D.s, they can prescribe drugs.

► Psychoanalysts, most (but not all) of whom are also physicians, are trained in free association, a method first practiced by Freud.

► Clinical psychologists have Ph.D.s in psychology. Except in Florida and South Dakota, they must be licensed or certified by their state governments.

► Clinical social workers, who have at least a master's degree, are also often licensed by the state.

► Psychiatric nurses are R.N.s who have taken at least a master's degree in mental-health nursing.

Nurses, social workers and psychologists additionally must have at least two years of experience before entering practice. These professionals are trained to handle most common emotional difficulties. If they can't, they should refer you to someone who can. A therapist with an M.D. is needed to treat such severe illnesses as schizophrenia and manic depression, for which medication and perhaps hospitalization are essential.

To check credentials, first contact the state chapter of the appropriate organization—the American Psychiatric Association, for instance, or the American Nurses Association. A few professionals might not belong to their associations, but it is safer to stick with those who do.

To find a competent therapist, it's best to start by consulting your family doctor. Some symptoms of emotional trouble may be caused by such organic problems as hepatitis or diabetes. And many physical ailments, including ulcers, can be rooted in the emotions. For some of these difficulties, your doctor may be able to counsel you adequately. If you require longer-term or specialized help, a physician is the logical person

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JAN, 1981

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to match you with the right therapist.

Other referral services abound. The state offices of the professional societies give out by phone the names of members who fit a prospective patient's needs. Mental-health associations, community mental-health centers and some local clinics, notably those run by medical schools, also have lists of therapists at the ready. Self-help groups, such as Parents Anonymous (for people who abuse their children) and Theos (for the widowed), are sources for specialists. Many clergymen are experienced in making referrals; some who have taken advanced courses also offer counseling.

90 minutes for \$20

Psychotherapy is expensive, except at clinics that can scale rates according to a patient's pocketbook. A newsletter for professionals, *Psychotherapy Finances*, reports that the national median fee charged by all therapists is \$45, usually for 45 or 50 minutes. For psychiatrists, the median is \$60; for social workers \$40. Once-a-week sessions are typical.

Many therapists and clinics also run group-therapy sessions, in which several patients talk together with a professional for about 90 minutes. The median cost is \$20, but group therapy is often used in conjunction with private sessions. Medical coverage for psychotherapy can vary greatly, so it's advisable to check with your insurer about what's reimbursed before beginning treatment.

When you first meet with a therapist, remember that you are a customer as well as a patient. Ask about his or her credentials, availability and fees. Some therapists will reduce their charges if you are unable to pay the full rate. You should also feel free to get a second consultation at any time. You might even conclude that another therapist might work better with you. Psychotherapy takes time; changing therapists should not be done lightly, but it can be for the best.

Therapy is completed when you both believe it to be. The therapist should gently guide you away from dependence on him or her, so that you feel neither prematurely "cured" nor fearful and uncertain. When agreement comes, the separation should be easy.

—Sarah E. Dutton

HOUSE BILL 284
SOCIAL WORK FACT SHEET ON LICENSURE

March 1983

WHY SHOULD THE PUBLIC BE PROVIDED THE OPPORTUNITY TO RECEIVE MENTAL HEALTH CARE FROM SOCIAL WORK PROVIDERS?

Social Workers provide psychotherapy services to individuals and groups in a variety of settings including hospitals, out-patient clinics, community mental health centers, health maintenance organizations, private and public agencies, private practice and have been accepted for years by their peers in psychiatry and psychology as co-equal members of the mental health team.

Throughout the country Social Workers provide psychotherapy services to many more patients than either psychiatrists or psychologists. A 1978 survey of mental health manpower, published by NIMH found that 43% of all mental health treatment in federally funded community mental health centers was provided by social workers. (1)

"Reimbursement for services by agencies of the government or by other third party payers should be based upon the services performed and the qualifications and certification of the provider within his/her own discipline. Regulations should not favor one discipline over another when both are qualified by training and experience."(2)

ARE THE SERVICES OF A SOCIAL WORKER COST-EFFECTIVE?

The cost per unit of therapy will be lower when administered by a social worker than by a psychiatrist or psychologist. Median fees vary widely among the three core professions. In 1980 the median fee for an individual therapy session with a psychiatrist was estimated at \$55, psychologist at \$50 and a social worker at \$40.(3)

The cost of providing service is escalated when a monopoly of the services is created by arbitrarily restricting its practice to one profession. The reasons are twofold: First, shortage of the service creates an inflationary influence on the rates being charged and tends to drive up the price due to the law of supply and demand. Second, eliminating competition removes the control of the marketplace over the relationship between cost and effectiveness of service.

Standard Oil Company of California rewrote its insurance (underwritten by Equitable Life) to include social workers after they did a cost/benefit quality/effectiveness study of 5 years experience with an in-house program for employees. (4)

CHAMPUS reports, in its study on reimbursement of Social Workers, that "in applying the difference in fee profiles between social workers and physicians for the various states...an estimated cost avoidance of over \$263,000 is indicated" for the time between October 1, 1981, and March 31, 1982. (5)

DO UTILIZATION RATES INCREASE IF SERVICES OF SOCIAL WORKERS ARE INCLUDED AS REIMBURSABLE?

"This has not been the experience in California or any other state which has passed (equal access legislation.) What does seem to occur is a redistribution of patients from medical doctors to other mental health practitioners." (6)

"any increase in utilization should be offset by cost savings in two directions. First, the cost per unit of treatment would go down, to the extent that patients who must now be treated by a psychiatrist would be free to obtain treatment from a social worker whose hourly rates are significantly lower. And second, there is a substantial body of research literature documenting the inverse relationship between utilization of psychotherapy and utilization of medical and hospital care."(7)

Over 50% of the patients who go to physicians have symptoms due wholly or in part to mental or emotional factors. Blue Cross of Western Pennsylvania instituted psychiatric benefits and found a significant reduction in medical utilization. The cost per patient on a monthly basis was reduced 50%. The University of Washington Health Service Center found a 41% reduction in the use of outpatient medical services by individuals receiving mental health services. The Group Health Association of Washington, D. C., found that patients with mental health coverage reduced their medical surgical utilization by 30.7%. Equitable Life initiated an emotional health program for employees and increased productivity by \$3.00 for every \$1.00 spent. Kimberly-Clark began an Employee Assistance Program and realized a 70% reduction in accidents. These specific facts were researched by the Mental Health Association of Montana.

DO PREMIUM RATES INCREASE IF SERVICES OF SOCIAL WORKERS ARE INCLUDED AS REIMBURSABLE?

In the past some have feared that inclusion of social workers would lead to increases in insurance premiums. There is no evidence that this occurs. Within the past several years, Union Labor Life Insurance Company of New York City, a large underwriter of health policies, made the same provision without an increase in premiums.

Where social workers have been covered, there has been no single instance where premiums have had to be increased because of measureable cost increases.

In 1981, the New York State Insurance Commission reported to the National Association of Social Workers (NASW) that there had been no requests for premium increases from insurance companies in New York State where social workers had been added to the list of health care providers. (8)

DO ANY HEALTH INSURANCE CARRIERS NOW COVER SOCIAL WORKERS?

Federal Employee Health Benefit Plans (FEHBP) that recognize social workers as qualified mental health care providers are: Aetna, Blue Cross and Blue Shield, Alliance Health Benefit Plan, American Postal Workers Union Plan, Mail Handlers Benefit Plan, NAGE Health Benefit Plan, GEJA Benefit Plan, NFFE Health Benefit Plan, NTEU Health Benefit Plan, Postmasters Benefit Plan.

Other government plans: Foreign Services Beneficiaries (Mutual of Omaha), New York - New Jersey Port Authority, Howard Community Health Plan, FBI (Prudential), National Security Agency (Mutual of Omaha), Kaiser-Permanente, Health Insurance Plan of Greater New York.

Other carriers: Banker's Life, Union Labor Life of N.Y.C., Prudential Insurance Company, CHAMPUS, Travelers, Rand Corporation, Poloroid Corporation, Continental Assurance, Connecticut General, Hartford Life Insurance Company, New England Mutual Life, American Heritage, Equitable Life, Guardian Life, John Hancock, Lincoln National, New York Life, Nationwide, Metropolitan Life, Mutual of Omaha, Mutual Benefit, Occidental Life.

SOCIAL WORK FACT SHEET ON LICENSURE

FOOTNOTES

1. National Institute of Mental Health, Division of Biometry and Epidemiology: Staffing of Mental Health Facilities (Draft Report): 32 (1974), 1978.
2. President's commission on Health: II Report to the President: 1978, p. 483
3. Psychotherapy Finances: (1980 Survey Report": Vol. 7, No. 6, 1980
4. Reeb, Arvil C., Jr., MSSW; "A Background Paper on Proposed Legislation Which Would Allow Consumers Access Under Health Insurance Plans to an Additional Class of Mental Health Professional, The Clinical Social Worker"; unpublished, p. 5.
5. CHAMPUS Report to the Assistant Secretary of Defense for Health Affairs; "Report on the Experimental Study on Reimbursement of Clinical Social Workers, : October 1, 1981 Through March 31, 1982; unpublished.
6. Reeb; op. cit.
7. Roderick, Glenn, MSW; "Statement Before the House Ways and Means Committee, Cleveland, Ohio"; May 6, 1977, p. 6.
8. Evans, James, Jr., Clinical Social Work Chairman, National Federation of Social Workers, Washington, D. C.; a personal communication, August, 1982.

WRITTEN TESTIMONY FOR HOUSE BILL 284

I am an educated individual who holds a responsible job in state government. I have been employed by the state for seven years. My professional standing would be jeopardized by providing you public testimony. Consequently, I am only comfortable with providing you these comments in written form.

I want to commend you and all of the legislators for supporting this type of responsible legislation. Although I know the Bill's sponsors personally, I am reluctant to discuss it with them. There are countless others employed throughout state government that are likewise reluctant to testify in public concerning the merits of this bill.

I would like to provide written testimony FOR House Bill 284. It is my understanding that this Bill could open the door for my state employees health insurance coverage to include payment to Social Workers with a Masters Degree.

In November of 1982 I sought help for the personal problem of alcoholism. I called the head of an alcohol education program when I made the decision to seek help. He referred me to the Counseling Consortium here in Helena. I have been under treatment by a qualified Social Worker who holds a Masters Degree in his field of training. His knowledge and expertise has been quite adequate for the type of counseling that my condition requires. His rates have been reasonable; however, my expenses have been accumulating at the rate of nearly \$200 per month. I will be paying for this treatment for several years at this rate. Unfortunately my state employees health insurance will not cover any of this treatment. The services of a qualified Social Worker are considerably less expensive than residential treatment or the fees that would be charged by a doctor who could provide no better services than a social worker.

I urge you to cast a vote in favor of this Bill as I would urge all of your fellow legislators.

Signed: One anonymous state employee representing a single voice speaking for the sentiments of many.

NAME: Carolyn Ligon DATE: 3/16/83

ADDRESS: P.O. Box 16, Clancy MT 59634

PHONE: 933 5316

REPRESENTING WHOM? Self

APPEARING ON WHICH PROPOSAL: HB284

DO YOU: SUPPORT? X AMEND? _____ OPPOSE? _____

COMMENTS: See attached testimony

PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY.

March 16, 1983

TESTIMONY IN SUPPORT OF HB284

For the record, my name is Carol Ferguson. I am a state employee but I am testifying today on my own time and on my own behalf -- and on behalf of my children. I'd like to make just a few points, separately, and then draw them together for you.

First, a friend of mine who is a medical doctor here in Helena says that he feels most of his patients' illnesses result from or are aggravated by severe stress. He also says that most of his patients are -- or were -- state employees. The State can be a very stressful place to work, especially for capable and conscientious persons.

Second, there are a large number of single parents in Helena. Whatever the cause, a person doesn't become a single parent without stress and, however good and loved one's children are, one doesn't survive being a parent, particularly a single parent, without stress. I have been raising four children by myself since they were 2, 4, 6, and just turned 9 years old. I have also been working full time for the State since they were 2, 4, 6 and just turned 9 years old. As with any family, there have been some tough times. There have been some overwhelmingly tough times when all the crises both at home and at work seem to erupt at once. One copes as well as possible with what one can and -- if one is to survive and to care responsibly for one's family -- one learns to turn, as appropriate, to a friend, a minister, a pediatrician, or a professional counsellor to say,

"This is what's happening. This is what I've tried to do. I don't know what else to try. Can you help?"

My children are healthy, generally happy people. They are warm, compassionate, loving and very capable people. I want to help them to continue to grow that way. I want us to learn as individuals and as a family to deal with pain without being consumed by it or by the anger or fear it generates.

The State is sponsoring a "Wellness" program to promote the maintenance of good health among State employees. This is intended to reduce absenteeism and costly loss of experience through staff turnover; it is intended to improve productivity. Employees are encouraged to eat nutritious foods, avoid harmful substances, exercise regularly, and learn to deal with stress. Wonderful -- and one constructive way of dealing with potentially overwhelming stress is to seek professional help before the breaking point is reached.

However, there is a problem, a built-in irony: the State's insurance policies will cover part of the cost of services of a pediatrician or a dentist, but the insurance will not cover the cost of services of a professional counsellor whose degree is in social work, however experienced and capable that person may be. To me that is nonsense. For an individual, a couple or a family in pain it is inexcusable and very expensive nonsense. The excuse offered by insurance companies and consequently by the State for their failure to include coverage for counselling services provided by social work professionals is that these professionals are not licensed in Montana.

In many other states they are licensed and are included in insurance coverage, as they should be in Montana and as they could be under HB284.

These professionals' services are needed; they are used; they are beneficial; and they should be reimbursable through insurance as are the services of other health care professionals in the State.

I would urge your support of HB284.

Thank you.

Carol L. Ferguson

NAME: Liddison L. Carlson DATE: 3.16.83

ADDRESS: 770 Notsiff Rd. Helena, MT

PHONE: (h) 442-4166 (w) 443-0851

REPRESENTING WHOM? self

APPEARING ON WHICH PROPOSAL: HB 284

DO YOU: SUPPORT? X AMEND? OPPOSE?

COMMENTS: Making available the services of those with
the MSW designation, for counseling services, as a
covered health insurance coverage will allow more
people to use those services, rather than forego necessary
counseling because of inability to pay.

PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY.

NAME: Shahid Akmal Khan

DATE: 5-2-65

ADDRESS: *518 Stewart*

PHONE: 443 7726

REPRESENTING WHOM?

APPEARING ON WHICH PROPOSAL: *5000*

DO YOU: SUPPORT? 6.

AMEND?

OPPOSE?

COMMENTS:

Insurance of a sound welfare and
prosperity is a necessary
protection for the people of this
state. This experience indicates that
without us we are left defenseless
in the face of social conditions
threatening.

PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY.

NAME: CHARLES HORETSI, PhD DATE: _____

ADDRESS: 3028 QUEEN, MISSOULA

PHONE: 549-7903 243-2841

REPRESENTING WHOM? DEPT OF SOCIAL WORK
UNIV OF MONTANA

APPEARING ON WHICH PROPOSAL: HB 284

DO YOU: SUPPORT? ☒ AMEND? _____ OPPOSE? _____

COMMENTS: _____

PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY.

E. Thibault #



**DIVISION OF
WORKERS'
COMPENSATION**



TED SCHWINDEN, GOVERNOR

815 FRONT STREET

STATE OF MONTANA

HELENA, MONTANA 59604

TESTIMONY BY JAN VANRIPER ON HOUSE BILL 284, BEFORE THE SENATE PUBLIC HEALTH
COMMITTEE, MARCH 15, 1983.

I am Jan VanRiper, Assistant Bureau Chief with the Division of Workers' Compensation, speaking in opposition to House Bill 284 which proposes to amend Section 33-22-111 allowing disability and health insurance coverage for work done by social workers.

Under the existing law insurers providing workers' compensation coverage are required to pay for services rendered to an injured worker by a variety of health care providers. These include physicians, dentists and chiropractors to name a few. This bill would add "social workers" to that list of providers.

It is obvious that each time required services are added to insurance coverage the cost of that coverage potentially goes up. As drafted and amended, this bill causes the Division concern that a rise in premiums may be necessitated. Although there have been some amendments, the definition of the services to be rendered is still quite broad (perhaps necessarily so due to the nature of the profession). We see still that, for example, one of the services to be provided is designed to "help people achieve more adequate satisfying and productive social adjustments".

The Division's concern here is perhaps best explained by use of an illustration. Consider a typical work-related injury, namely a broken leg.

Division Telephones:

Administration
406-449-2047

Insurance Compliance
406-449-3721

Safety & Health
406-449-3402

When workers suffer a broken leg on the job, it is relatively easy to determine that the leg was caused by a work-related situation, and it is additionally relatively easy to determine what the appropriate treatment is, and when the treatment has been successful (healing has occurred). On the other hand, how does one answer these very same questions when referring to the kinds of "injuries" the social worker is to treat? How does one determine whether the "injury" arose out of the employment ? How does one determine what the proper treatment is for the work-related injury if it is emotional or psychological? And finally, how does one determine when the treatment period has ended and healing has occurred?

The Division wishes to remind this committee that some "social work" is already addressed specifically in the Workers' Compensation Act in Section 39-71-1001, MCA. That section provides for referral of certain disabled workers to the Rehabilitative Services Division of SRS. Employers in this state, through their workers' compensation, are currently paying approximately \$380,000 annually for this service. Such costs would potentially be duplicated if this bill passes.

In summary, the Division is concerned that this proposed amendment to Section 33-22-111 is inappropriate with respect to workers' compensation coverage, and threatens to raise the costs of workers' compensation premiums for Montana employers. The Division of Workers' Compensation urges that you do not pass the third-party payor portions of this bill.

NAME :

DATE :

ADDRESS :

PHONE :

REPRESENTING WHOM?

APPEARING ON WHICH PROPOSAL:

DO YOU :

SUPPORT?

AMEND?

OPPOSE?

COMMENTS:

PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY..

NAME: Tom Harrison DATE: 3/16/83

ADDRESS: 2225 Eleventh Ave.

PHONE: 442-6350

REPRESENTING WHOM? Blue Cross

APPEARING ON WHICH PROPOSAL: HB 284

DO YOU: SUPPORT? AMEND? OPPOSE? ✓

COMMENTS: It should be clarified
that this is optional
coverage

PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY.

NAME: LESTER H. LOGUE, II DATE: 3/16/83

ADDRESS: PDB 176 Helena MT 59624

PHONE: 4420070

REPRESENTING WHOM? American Council of Life Insurance

APPEARING ON WHICH PROPOSAL: HTS 285

DO YOU: SUPPORT? _____ AMEND? L OPPOSE? _____

COMMENTS: On page 13, line 8,
delete: "or master of social work"

Adding additional practitioners not subject to a
physician's direction would increase the cost of
medical insurance.

PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY.

STATEMENT OF GLEN L. DRAKE
IN BEHALF OF THE HEALTH INSURANCE ASSOCIATION
OF AMERICA IN OPPOSITION TO H.B. 284

The Health Insurance Association of America is a trade organization of Health Insurers.

One of the concerns of the industry is the problem of skyrocketing health care costs.

H.B. 284, if enacted, will be another cause of further cost increases to the consumer.

Health insurance was created to pool resources for the payment of medical bills and costs. By expanding the definition of the types of services that must be included in the offer of insurance, you necessarily increase the cost to all.

Social workers, no matter how admirable a group, should not be included under health care provisions.

We, therefore, urge you to strike Section 14 and Section 15 from the bill.

Page 14, line 5, following the word "hospitals." Insert the sentence
"Employers holding their own licenses for provision of health care
services shall not be required to employ licensed social workers as a
result of the adoption of this act."

HB 284

Presented by
William E. Leary
Montana Hospital Assn.

TESTIMONY ON HB708

BEFORE THE SENATE

PUBLIC HEALTH, WELFARE AND SAFETY COMMITTEE

MARCH 16, 1983

MISTER CHAIRMAN AND DISTINGUISHED COMMITTEE MEMBERS:

MY NAME IS DEAN LUPTAK OF 22 GATEWOOD DRIVE, BILLINGS. I AM THE ENERGY ASSISTANCE PROGRAM DIRECTOR FOR DISTRICT 7 HUMAN RESOURCES DEVELOPMENT COUNCIL WHICH SERVES BIG HORN, CARBON, STILLWATER, SWEET GRASS AND YELLOWSTONE COUNTIES. I AM HERE TODAY TO TESTIFY IN SUPPORT OF HB708 SPONSORED BY REPRESENTATIVE JOE QUILICI, SENATOR RICHARD MANNING AND MANY OTHER HONORABLE LEGISLATORS.

AT ISSUE IN HB708 IS TWO ESSENTIAL ELEMENTS OF RESPONSIBLE, COST-EFFECTIVE HUMAN SERVICE PROGRAM DELIVERY. THESE ELEMENTS ARE THE COORDINATION OF SERVICES AND THE ACCESSIBILITY OF THE PROGRAM TO PARTICIPANTS.

THE IMPORTANCE OF ENERGY PROGRAM COORDINATION IS BEST EXPRESSED IN THIS QUOTATION FROM THE NATIONAL CONSUMER LAW CENTER (MODEL PLAN FOR FUEL ASSISTANCE PROGRAMS, AUGUST 20, 1982):

"IT IS IMPORTANT TO TAKE FULL ADVANTAGE OF THE FRUITS OF EFFECTIVE OUTREACH EFFORTS AT THE FIRST OPPORTUNITY, E.G., WHEN AN APPLICANT MAKES INITIAL CONTACT. THIS MEANS THAT ONCE A PERSON IS IN THE OFFICE TO APPLY FOR ENERGY ASSISTANCE THE PROGRAM SHOULD MAKE AVAILABLE ANY OTHER PROGRAM INFORMATION RELATING TO OTHER FORMS OF ENERGY ASSISTANCE, E.G., WEATHERIZATION OR HOME ENERGY AUDITS. A ONE-STOP INFORMATION AND/OR APPLICATION CENTER FOR ALL RELEVANT ENERGY PROGRAMS WILL INCREASE THE POTENTIAL FOR SUCCESS IN ANY ENERGY PROGRAM SIMPLY BECAUSE IT DOESN'T REQUIRE DUPLICATIVE OUTREACH EFFORTS. ADDITIONALLY, THIS SHOULD CUT DOWN THE STATE'S OVERALL ADMINISTRATIVE COSTS FOR ITS ENERGY PROGRAM."

THE HUMAN RESOURCES DEVELOPMENT COUNCILS MULTI-COUNTY DELIVERY SYSTEM FOR ENERGY PROGRAMS HAS AND DOES INCLUDE THE FOLLOWING PROGRAMS:

- 1) ENERGY ASSISTANCE,
- 2) ENERGY CRISIS FUNDS,
- 3) WEATHERIZATION,
- 4) ENERGY CONSERVATION WORKSHOPS,
- 5) ENERGY CONSERVATION EDUCATIONAL MATERIALS,
- 6) HOUSING/ENERGY COUNSELING,
- 7) INVOLVEMENT IN LOCAL ENERGY CONSCIOUS GROUPS, SUCH AS BiCEP (BILLINGS COMMUNITY ENERGY PROGRAM), MONTANA POWER TO THE PEOPLE AND LOCAL ENERGY SHARE OF MONTANA POLICY COMMITTEES,
- 8) WOOD AND FUEL COOPERATIVES, AND
- 9) ALTERNATIVE ENERGY GRANTS AND PROJECTS TO DEMONSTRATE AND/OR INSTALL:
 - a.) WOOD STOVES
 - b.) SOLAR PANELS,
 - c.) SOLAR HOT WATER HEATERS, AND
 - d). WEATHERIZING MATERIALS.

THE POLICY COMMITTEES RESPONSIBLE FOR THE NEW PRIVATE FUND, ENERGY SHARE OF MONTANA, ALSO VIEWED THE MULTI-COUNTY APPROACH AS THE MOST EFFECTIVE WAY TO SERVE THE STATE AND THIS PROGRAM IS NOW ADDED TO THE PRECEEDING LIST OF ENERGY RELATED PROGRAMS OPERATED BY THE HUMAN RESOURCES DEVELOPMENT COUNCILS. HB708 WILL ENSURE THAT EVERY EFFORT IS MADE TO KEEP THESE INTER-RELATED ENERGY PROGRAMS AVAILABLE AS A PACKAGE TO THE LOCAL PARTICIPANT. IN COMBINATION, THESE EFFORTS RESULT IN INCREASED ENERGY CONSERVATION AND SELF-SUFFICIENCY OF LOW-INCOME HOUSEHOLDS WHILE CONCURRENTLY REDUCING THE DEPENDENCY ON THE FUEL ASSISTANCE PROGRAM.

AN IMPORTANT STEP HAS BEEN TAKEN TO COORDINATE THE FUEL ASSISTANCE PROGRAM WITH THE WEATHERIZATION PROGRAM. THE SAME APPLICATION FORM IS USED TO APPLY FOR BOTH PROGRAMS AT THE SAME TIME. THIS PROCESS RESULTS IN ACCESSIBILITY TO THE WEATHERIZATION PROGRAM AS A DIRECT RESULT OF A CONTACT FOR FUEL ASSISTANCE. THIS WEATHERIZATION PROGRAM ACCESSIBILITY HAS BEEN REDUCED IN AREAS WHERE THESE TWO PROGRAMS HAVE BEEN SEPARATED.

AN AGENCY THAT DISTRIBUTES FUEL ASSISTANCE DOLLARS AND NEVER WEATHERIZES A HOUSE CANNOT BE EXPECTED TO DO EFFECTIVE OUTREACH FOR THE WEATHERIZATION PROGRAM OR ANY OF THE OTHER ENERGY RELATED PROGRAMS ALREADY DISCUSSED. THESE PROGRAMS BELONG TOGETHER.

ACCESSIBILITY TO THESE PROGRAMS MUST ALSO BE CONSIDERED FROM TWO OTHER VIEWPOINTS. FIRST OF ALL, THE SENIOR CITIZENS IN MANY AREAS RESENT APPLYING FOR ENERGY PROGRAMS THROUGH A COUNTY WELFARE OFFICE. THE REDUCTION OF ENERGY BILLS, (THROUGH SUBSIDIZING FOLLOWED BY CONSERVATION EFFORTS) IS NOT AN INCOME ASSISTANCE PROGRAM LIKE WELFARE PAYMENTS, NOR DO MOST ENERGY ASSISTANCE APPLICANTS PARTICIPATE IN WELFARE PROGRAMS. A SURVEY (27% OF YELLOWSTONE COUNTY PARTICIPANTS RESPONDED) AT THE CLOSE OF THE 1981-82 FUEL ASSISTANCE PROGRAM SHOWED:

- a.) 50% OF ALL LIEAP HOUSEHOLDS IN YELLOWSTONE COUNTY HAD NEVER BEEN IN A WELFARE OFFICE.
- b.) 60% OF ALL SENIOR HEADED HOUSEHOLDS HAD NEVER BEEN IN A WELFARE OFFICE.
- c.) OF ALL LIEAP HOUSEHOLDS:
 - 1. ONLY 17% ALSO RECEIVED AFDC,
 - 2. ONLY 27% HAD RECEIVED FOOD STAMPS AT SOME POINT DURING THE YEAR OF ELIGIBILITY (ONLY 11% OF SENIOR HEAD HOUSEHOLDS HAD RECEIVED FOOD STAMPS).
 - 3. IT IS INTERESTING TO NOTE THAT 65% OF NON-SENIOR HOUSEHOLDS HAD RECEIVED WAGES OR SELF-EMPLOYMENT INCOME DURING THAT YEAR. ALSO, 53% OF LIEAP HOUSEHOLDS OWN THEIR OWN HOME.

HB708 WOULD DIRECT SRS TO GIVE CONTRACTUAL PRIORITY TO NON-PROFIT AGENCIES IN THE LOCAL DELIVERY OF THE FUEL ASSISTANCE PROGRAM AND THUS AGAIN REMOVE THE "WELFARE STIGMA" FROM THE PROGRAM.

THE SECOND VIEW POINT OF ACCESSIBILITY IS FROM THAT OF LOCAL GOVERNMENT. HB708 CALLS FOR LOCAL GOVERNMENT REVIEW AND COMMENT OF ENERGY PROGRAM PLANS. THIS PROCESS ALLOWS FOR THE LOCAL INPUT OF OFFICIALS AND, THROUGH THEM, PROGRAM PARTICIPANTS AND

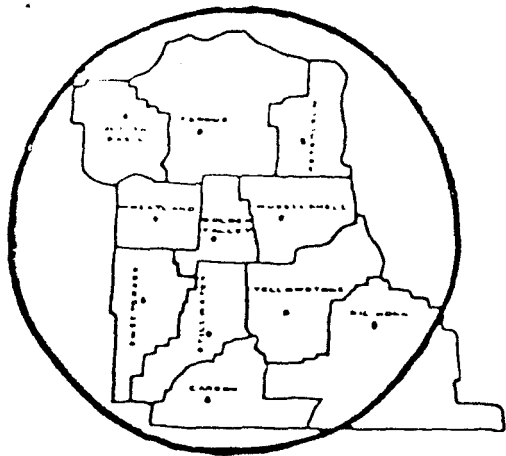
OTHER INTERESTED PARTIES.

IN CONCLUSION, I WOULD LIKE TO POINT OUT THAT THE FUEL ASSISTANCE PROGRAMS OF 1977 THROUGH 1981-82 WAS OPERATED BY 10 HUMAN RESOURCES DEVELOPMENT COUNCILS. IN 1982-83 THE FUEL ASSISTANCE PROGRAM IS BEING OPERATED IN 33 DIFFERENT LOCAL ENTITIES. INHERENT IN THIS PROCESS HAS BEEN MUCH HARDSHIP, CAUSED BY CONFUSION, ON THE PART OF PROGRAM PARTICIPANTS. I ASK YOU TO QUESTION THE OVERALL EFFECTIVENESS OF THE STATE ADMINISTRATION OF SUCH A MOTLEY DELIVERY SYSTEM.

I FEEL PASSAGE OF HB708 WILL CORRECT MANY PROBLEMS OF THE PRESENT ADMINISTRATIVE SYSTEM. HB708 WILL RESPOND TO THE MANDATES OF THE PROGRAM PARTICIPANTS AND WILL PROVIDE A VEHICLE FOR LOCAL COMMUNITY INPUT.

I HAVE BEEN INVOLVED IN ALL SIX PROGRAM YEARS OF FUEL ASSISTANCE IN MONTANA AND WILL GLADLY ANSWER ANY QUESTIONS TO THE BEST OF MY ABILITY.

THANK YOU.



AREA AGENCY ON AGING MONTANA - AREA II

2031 Hewitt Drive
Billings, Montana 59102

March 16, 1983

Senator Judy Jacobson
Senate Office Building
Public Health, Welfare & Safety
Committee
Capitol Station
Helena, MT 59620.

Dear Senator Jacobson:

As the Area II Agency on Aging Advocate for Senior Citizens, I would appreciate very much your support of HB-708 introduced by Representative Joe Quilici of Butte. Area II comprises an eleven county area and my position as a volunteer is an appointed one. HB-708 provides for the administration of the Low-Income Energy Assistance Program and the Weatherization Program by community non-profit entities representing one or more of the Governor's substate planning district.

During the past four (4) years as an advocate for senior citizens, I have worked very closely with District 7 Human Resources Development Council in Billings doing outreach work such as visiting senior citizen centers, senior groups, organizations, etc. providing information of services available, who is eligible, how and where to apply, etc. In this capacity, I have had the opportunity to work very closely with various HRDC personnel and observed first hand that the elderly, as well as others, were treated by Human Resources with dignity and respect and served with privacy. In addition, I can honestly say without hesitation that once a person made application for either fuel or weatherization assistance, appropriate action was taken within a reasonable time. It is very important for seniors to know whether or not they are eligible.

As you know, the weatherization program has been administered by the Human Resources Development Councils throughout the state during the past 8 years. In addition, the fuel assistance program has also been carried out by Human Resources Development Councils since its inception six (6) years ago. During this program year, however, some of the County Welfare Departments chose to administer the fuel assistance program. The weatherization and fuel assistance programs fit like hand and glove, in other words, usually if you are eligible for one you are also eligible for the other. Therefore, it makes sense to administer both programs by one agency to simplify application, processing, follow-up contact, etc.

Senator Judy Jacobson
Public Health, Welfare & Safety
Committee
Page 2

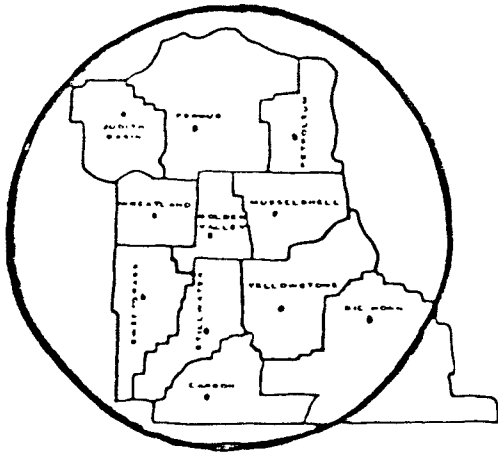
The Human Resources Development Councils, because of their experience administering both the fuel assistance and weatherization programs, were able to develop a rapport between vendor, staff and prospective clients. That kind of rapport isn't accomplished overnight. In addition, because of this rapport less and less educating, advertising, promoting, etc. has to be done since the majority of the clients are already knowledgeable of the availability of the programs and the procedures to follow. This provides for a much smoother operation and for efficient management.

On behalf of all the senior citizens who I represent that are potential recipients of these services, I strongly recommend that you approve HB-708. This is a good bill and is designed to serve the elderly, handicapped and low-income people in a more dignified and human manner but should also provide for an efficient operation.

Sincerely,


S. J. "Stan" Rogers
Area II, Senior Citizens Advocate

SR/mac



AREA AGENCY ON AGING MONTANA - AREA II

2031 Hewitt Drive
Billings, Montana 59102

March 16, 1983

Senator Tom Hager, Chairman
Public Health, Welfare and
Safety Committee
Capitol Station
Helena, Montana 59620

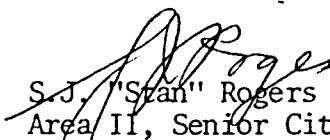
Dear Chairman Hager:

I understand that your committee will be holding hearings on HB-663 which was introduced by Representative Esther Bengston of Yellowstone County. This bill provides for a minimum and maximum number of Area Agencies on Aging and Planning Service Areas.

As the Area II Agency on Aging Advocate for Senior Citizens, I would appreciate your support of HB-663 as amended. Area II covers an eleven (11) county area with a resident population of approximately 24,200 senior citizens, 60 years of age and over.

We feel to protect and preserve the interest of the present administrative structure of Aging Programs this proposed bill, as amended, will provide an adequate and efficient management system for the delivery of services to the elderly. I would appreciate very much having a copy of this letter made available to each member of your committee. Again, your favorable support of this bill will be very much appreciated.

Sincerely,


S.J. "Stan" Rogers
Area II, Senior Citizens Advocate

cc: Committee Members
Representative Esther Bengston
Area II, Agency on Aging
State Aging Coordinator

SR/mac

NAME: Carl J. Donovan DATE: 3/16/83

ADDRESS: Box 1201 G.T. Falls, MT 59403

PHONE: 453-3763

REPRESENTING WHOM? Montana Coalition Against Poverty

APPEARING ON WHICH PROPOSAL: HB 708

DO YOU: SUPPORT? X AMEND? OPPOSE?

COMMENTS: Pass HB 708

in Cascade County 1981-82 when Op. Inc had program we
saved 2653 welfare in 82-83 1638

also some 37% fewer people saved in Cascade Co. in
1982-83

34% fewer people saved in Co. County in 82-83

PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY.

Exhibit 5

TESTIMONY BEFORE

SENATE PUBLIC HEALTH, WELFARE AND
SAFETY COMMITTEE

By

Clyde Jarvis
Public Service Commissioner
District #3

March 16, 1983

Mr. Chairman and Members of the Committee:

My name is Clyde Jarvis, Public Service Commissioner representing District #3, which is composed of Lewis and Clark, Cascade, Jefferson, Broadwater, Meagher, Wheatland, Judith Basin and Teton Counties. I wish to utilize this prepared statement as my endorsement of and support for House Bill 708. I would prefer to appear in person, but the press of Public Service Commission business makes it impossible.

As background for my support of HB708, it is important to note that I recently completed a period of several years service on the Governor's Advisory Council on Aging. I am a former board member of Opportunity, Inc., and have worked closely with it for a number of years as well as with Montana's Power to the People and the Human Resource Development Councils around Montana.

As a Public Service Commissioner I have become intimately familiar with both the Federally funded Low Income Energy Assistance program, referred to as LIEAP, and the Low Income Home Weatherization program, referred to as WEATHERIZATION. I learned from personal experience that these programs provide the greatest benefits with the greatest expedition, at the lowest possible cost when administered by community non-profit entities, such as Human Resource Development Councils, without the onerous connotations of being welfare programs. Neither is a welfare program, and to place either into the hands of a welfare agency for administration is a tragedy.

The funding of the Low Income Energy Assistance program is not a welfare program. It is funded by the Federal government out of the excess profits tax on crude oil. Thus, these funds should not be

and must not be administered by a welfare agency.

Many senior citizens who have lived their lives with dignity and who have added much to Montana's past, present and will add to the future, look with disdain on welfare. Many of these senior citizens are attempting to survive on their meager Social Security incomes, thus, they are definitely low-income people. They, and other low-income citizens, critically need energy assistance to meet the precipitous rate increase brought about by the excess profits accumulated through the exorbitant prices charged by the crude oil companies.

I sincerely believe you will be striking a blow for freedom and carrying on with an American tradition in giving a "do pass" to House Bill 708.

Mr. Chairman, and members of the Committee, thank you for your courtesy in permitting my statement to be read into the record.

Clyde Jarvis,
Commissioner

CJ:imb

37% fewer people served
in Cascade Co.
in 1982-83

thru
March 10

31% fewer people served
in six counties in 1982-83

	1981-82	1982-83
Cascade County	2452	1658
Chouteau County	110	127
Glacier County	95	88
Pondera County	200	145
Teton County	137	139
Toole County	153	120
Total	3398	2277

HB 708

Good afternoon ~~Chairman Hayes~~ members
of the Committee.

I am Mary Noonan, I live in St. Regis
~~in Mineral County.~~

I am Mineral County Commissioner
and Chairman of the Board of Dist #1
Human Resources - comprising Missoula,
Kootenai & Mineral Counties.

I was Treasurer of Mineral County
for nearly 15 years -

Obviously, I am a Senior Citizen
I am an active member of three
Senior Citizen Centers, Missoula, Superior
& St. Regis. I was co-director of the
First Senior Citizen Center in St. Regis
when it was organized the Human
Resources in the late 60's.

The emancipation of senior citizens
from the "dark age" extinction has been
largely through the efforts of the Human
Resources - Senior Citizens have learned
to depend on their centers for help &
support in any problem they have -
they have realized a confidence & pride
in themselves and their Human Resource
Councils.

Weatherization & fuel assistance has
been a boon to seniors & low income
families whose homes are deteriorating
because the high cost of repairs, and
32% unemployment ^{in Mineral} has left them no choice.
Please support HB 708 - the Human
Resource program allows for better
referral & coordination with local governments

As County Commissioners I feel the wording of the bill gives flexibility to SRS for administration. In addition, the Bill required County Commissioners to review the plans.

NB 708 removed the stigma that the elderly have in going to the Welfare Office for fuel assistance - they just won't go!

Commissioners of our Districts are supportive of N.B. 708.

Thank you. I do appreciate your consideration.

HB 708

HB 708



MISSOULA COUNTY

BOARD OF COUNTY COMMISSIONERS

• Missoula County Courthouse • Missoula, Montana 59802
(406) 721-5700

BCC-83-100

February 17, 1983

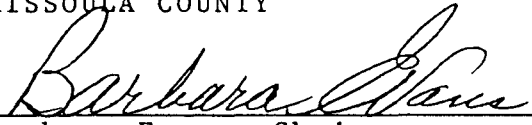
The Honorable Marjorie Hart, Chairman
House Human Services Committee
House of Representatives
Capitol Station
Helena, Montana 59620

Dear Representative Hart and Other Members of the Committee:

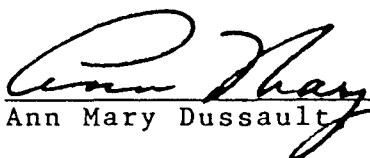
We are writing in support of HB 708, which establishes priorities for distribution of Low Income Energy Assistance Program Funds. We believe this Bill is important because it ensures that human resource councils would have the highest priorities in receipt of administrative and program funds for LIEAP. We believe that human resource councils are best equipped to administer these funds as demonstrated by what we believe is an excellent record. We have complete faith in the board and the staff of District XI Human Resource Council to administer this program efficiently and with empathy towards the needs of low income Montanans.

Sincerely,

BOARD OF COUNTY COMMISSIONERS
MISSOULA COUNTY


Barbara Evans, Chairman


Bob Palmer, Commissioner


Ann Mary Dussault, Commissioner

BCC/HS/lis

cc: All Missoula Legislators

cc. Senate Health + Human Services committee

NAME: Nancy Scheel-Freyermüller DATE: _____

ADDRESS: 40 E Broadway - Butte

PHONE: 723-5421

REPRESENTING WHOM? Montana Power

APPEARING ON WHICH PROPOSAL: 708

DO YOU: SUPPORT? ☒ AMEND? _____ OPPOSE? _____

COMMENTS: _____

- Bill boards to increased efficiency.
- MPC has good relationships with HRDC's and have worked together for 3 years.
- Feel people don't want to go to welfare

PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY.

NAME: Gene LEWIS DATE: 3/16/82

ADDRESS: 1522 W. Main St., Mont. 59001

PHONE: 442-1552

REPRESENTING WHOM? Rocky Mountain Development Council

APPEARING ON WHICH PROPOSAL: HB 708

DO YOU: SUPPORT? ☒ AMEND? ☒ OPPOSE? ☐

COMMENTS: Four Lewis & Clark, Jefferson, and Beaufort Counties
currently operate the LEAP program. These counties
wish to assure that HB 708 does not preclude
them from continuing to operate the LEAP program.
It is my understanding that SRS's current
interpretation is that the B.II would prohibit
anyone other than HRDC's from operating the program.
Need to assure that county operation is at the
counties' discretion.

PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY.

NAME: Beverly Gibson

DATE: 3-16-83

ADDRESS: MT. Assoc. of Counties, 1802 11th Ave. Helena

PHONE: 442-5209

REPRESENTING WHOM? MACO

APPEARING ON WHICH PROPOSAL: HR 708

DO YOU: SUPPORT? ☒ AMEND? ☐ OPPOSE? ☐

COMMENTS: Support flexibility to allow counties to
administer low income energy program
if economically feasible to award contract to
county rather than HRDC.
Amend statement of intent, ^{and title} to reflect
the above statement by removing the word "substanti"
from statement of intent - and amend title in similar
fashion
Suggest amendment p. 2 line 20: change "priority"
to "special consideration"

PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY.

6741118
Box 464
Superior Ind.
3/16/83

I am Edna Honef
Chairman + Com. Members,

Re HB 708 Energy

I represent the Mineral
Co Senior Citizens, ^{also} We have
32% unemployment.

I married a rancher
in 1932 and we farmed
40 years. We got assistance
from the US Dept. of Agri.
It was not welfare.
That same assistance
made cheaper food for
consumers.

The Energy program
money comes from
Windfall profits tax &
is a return ~~not~~ a welfare
payment. It gives
assistance.

It makes sense to
help Seniors stay in
their ^{own} homes by
giving them fuel bill
assistance & weatherizing.

In our County the
Seniors feel comfortable
about going to Human
Resources for assistance.

HB 708 does allow SRS
the final decision about
who runs the program
& does involve local
officials. This is a

bill, & I hope you do
pass it.

Thank you

I would like to submit
written testimony for Pearl
Goss - who is a member
of the Darby Town Council
and President of the Darby
Senior Citizens. Her testimony
is in favor of H B 708. She
is from Ravalli County,

March 31/83

Ladies & Gentlemen:

I am Rose Goss, I represent the Pavilli Co. Commissioners on the Distr Human Resource Council Board of Directors.

I am: a member of the Darby Town Council; chairperson of the Pavilli Co. Planning Board; Vice Chairperson of the Pavilli Co. Council on Aging; and Chairperson of the Darby Senior Citizens.

In working with seniors I find that no matter how much they need the assistance many refuse to go to the welfare department.

Therefore: I ask that you pass H.B. 708 with out amendments.

This bill continues the existing law which states weatherization programs will be administered in multicounty planning districts.

through such organizations as
HRDC's. Additionally this bill
provides that HRDC's will be
given priority for administration
of fuel bill assistance programs.
This bill gives priority. It does
not circumvent the Dept. of Social
and Rehabilitation Services.

Currently, 32 HRDC's administer
fuel bill assistance.

Thank you for your serious
consideration and "do pass" vote
for H.B. 708.

Pete Goss,
Barby, MT.



Exhibit 10

Chairman Hager and members
of the committee.

I am Lillie McKinnon
from Superior. I am a
member of the Town Council
of Superior and I am
here to support H.B. 708.
I have had the opportunity
to observe the Low Income
Energy Program as administered
by our Human Resource
Council. I think the
Human Resources Council
has done a very good job.
As a Senior Citizen I
know the concerns seniors
have about going to the
Welfare Department. Fuel
Bill assistance is not
welfare. It is just what
it says, it is assistance.
It allows people to
stay off of welfare. In
our area the majority

of the clients are working people. By giving them a little assistance we can help them to be independent of welfare. That is why I support Human Resource Councils administering the program. The current bill does give SRS the flexibility to choose local contractors. Additionally the Human Resource Council have to present their plan to local officials for review and comment.

I urge you to support H.B. 708

Lillie McKeenan

Box 872

Superior, TN 39872

Great Falls, Montana
March 14, 1983

Senator Tom Hager
Chairman--Senate Public Health & Welfare Committee
Helena, Montana

Dear Sir:

Pertaining to HB 708--I would ask that you give your support to having this measure passed in the Senate.

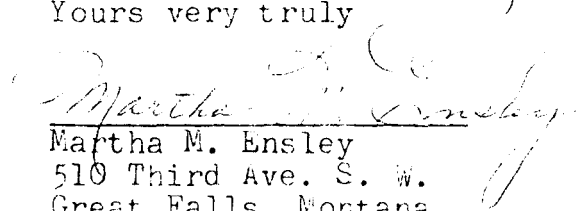
My experience with Opportunities, Inc. has been very satisfactory. Last year, when I applied for Energy Assistance, "Ramona" from Opps., came to my home and assisted me in making my application and the results were immediate.

In October of 1982, I immediately called the Welfare Dept. in Great Falls and asked that an application be sent to me. I repeatedly called them and, finally, after about 5 or 6 calls, I received the application. This application was filled in and returned to the Welfare Dept. the following day. I made at least 5 more calls and one of these calls was answered by "Bill" who laughed and said "Don't worry about it, we have so many people coming in the front door of this place that we don't have time to work on these applications." Then a Mrs. Snell told me that my application was the next one on her desk. About two weeks later, in desperation, I called Mr. Dick Gasvoda, Cascade County Commissioner and told him of the treatment I had received from the Welfare Dept. He acted immediately and in December, I finally received notification that the amount of assistance would be given to the Montana Power Co.

My family and I have been taxpayers and voters in Cascade Co. for over 65 years and it is humiliating to have to go to the Welfare Dept. for this assistance. These people are Public servants and there is no reason why we, the Public, should be subjected to their treatment. My personal experience is that Opps., Inc. handled this in a much more efficient manner.

Please use your influence in having this bill passed.

Yours very truly


Martha M. Ensley
510 Third Ave. S. W.
Great Falls, Montana
59404

10/2/82

COMMENTS ON THE NUCLEAR WEAPONS BILLS

THE MOST IMPORTANT ISSUE IN REGARDS TO HJR 8 AND HJR 13 IS THAT THIS IS SOMETHING THAT SHOULD BE ADDRESSED BY THE CONGRESS AND THE PRESIDENT OF THE UNITED STATES. IT IS AN IMPORTANT ISSUE FOR THE PEOPLE OF MONTANA TO ADDRESS WHICH THEY DID VERY DIRECTLY IN INITIATIVE 92 THAT WAS PASSED IN THE 1982 BALLOT ELECTION.

THERE IS A REAL QUESTION WHETHER IT IS NOW NECESSARY FOR THE MONTANA LEGISLATURE TO ONCE AGAIN ADDRESS THIS SAME ISSUE. DEALING WITH WHAT HAS BEEN CALLED THE NUCLEAR FREEZE ISSUE MUST BE PUT IN THE PERSPECTIVE OF WHAT IN FACT THIS OR ANY LEGISLATURE IS CHARGED TO DO. WITH ONLY 90 DAYS IN WHICH TO WORK, OUR FIRST RESPONSIBILITY IS TO DO OUR SPECIFIC JOB OF MANAGING THE AFFAIRS OF THE STATE OF MONTANA AND NOT TRY TO MANAGE THE FOREIGN AFFAIRS OF THE UNITED STATES. THE RESPONSIBILITY WHICH WAS SPECIFICALLY GIVEN TO THE FEDERAL GOVERNMENT IN THE CONSTITUTION.

NUCLEAR WEAPONS ARE NOT OUR PRINCIPLE FUNCTION, ESPECIALLY AFTER THE PEOPLE OF OUR STATE HAVE ALREADY EXPRESSED THEIR OPINIONS ABOUT THEIR DEVELOPMENT AND DEPLOYMENT. THE DEBATE ON THIS ISSUE CONSUMED HUGE AMOUNTS OF TIME IN THE HOUSE OF REPRESENTATIVES AND YET THEY STILL PASSED CONFLICTING RESOLUTIONS. AS A RESULT THE HOUSE LEADERSHIP NEGLECTED A NUMBER OF BILLS WHICH ENDED UP DYING IN COMMITTEE BECAUSE OF LACK OF TIME FOR CONSIDERATION. THESE BILLS ADDRESSED ISSUES THAT THE HOUSE COULD HAVE AND SHOULD HAVE CONSIDERED. WE DO NOT WANT A SIMILAR THING TO HAPPEN IN THE SENATE NOW THAT WE HAVE ALL THE HOUSE BILLS OVER HERE AND RELATIVELY LESS TIME TO DEAL WITH THEM.

(SHOULD WE IN FACT SPEND TIME ON THE IMMEDIATE PROBLEMS OF THE STATE OF MONTANA - PROBLEMS WHICH CAN ONLY BE ADDRESSED HERE AND WHICH EVERYONE IS ACUTELY AWARE OF - ~~OR DO WE PASS THESE TWO CONFLICTING RESOLUTIONS JUST TO PLEASE THE VANITY OF THE HOUSE DEMOCRATS.~~

THE SENATE HAS ALREADY ADDRESSED THIS PARTICULAR ISSUE IN THE FORM OF SJR 10 BY SENATOR VANVALKENBERG. WE PASSED THIS ISSUE TO THE HOUSE AND IT INCLUDES ALL THE ELEMENTS OF THE TWO BILLS BEFORE US. IT IS TIME TO MOVE ON TO THE VERY PRESSING ISSUES OF IMMEDIATE CONCERN TO THE PEOPLE OF OUR STATE.

IN CONCLUSION, IT IS IMPORTANT TO NOTE THAT WE DO NOT UNDER- RATE THE ISSUE OF NUCLEAR WEAPONS AND THEIR DANGER NOR DO WE UNDERESTIMATE THE CONCERN OF THE PEOPLE. WE FEEL THAT CONCERN CAN BEST BE ADDRESSED BY OUR CONGRESS AND THE PRESIDENT WHO'S MAIN CONCERN THIS IS.

SENATE COMMITTEE PUBLIC HEALTH, WELFARE, AND SAFETY

Date MARCH 16, 1983 HJR () Bill No. 8 Time 5:15

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

Clare Gravelly
Secretary

Tom Hager
Chairman

Motion: A motion was made by Senator Stephens that HJR be tabled.

Motion carried.

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