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

February 2, 1987

The meeting of the Senate Public Health, Welfare and Safety Committee was called to order by Chairman Dorothy Eck on February 2, 1987, at 1 P.M. in Room 410 of the State capitol.

ROLL CALL: All members of the committee were present.

CONSIDERATION OF HOUSE BILL NO. 88: Representative Rex Manuel, District # 11, sponsor of the legislation, testified that, at present, there is nothing in state statutes that allows hospitals to have a capital replacement fund. Thus, when hospitals have a major piece of equipment wear out, they often have no fund set aside to pay for replacement. This bill would give hospitals the right to have a capital replacement fund. The cost of any capital equipment replaced would have to exceed \$5000.00 and have a lifeexpectancy of five years or more. Money for the fund could come from bonds, volunteer work, or everyday operating budgets.

DISCUSSION OF HOUSE BILL NO. 88: Sen. Norman: How high could the fund go?

Ans: Rep. Manuel: As high as a board wants it to go, in my hospital's case, about \$20,000.

Sen. Himsl: Could you explain the financing of the fund again? Rep. Manuel: Hospitals would be limited to four ways of building the fund through statutes now in the codes.

ACTION TAKEN ON SENATE BILL NO. 170: Sen. Rassmussen moved that the amendments DO PASS. He then explained the amendment to Page 4, Line 2 of the bill, which would limit treatment to the anterior segment of the eye and the adnexa. This means that drugs would be used on the front segment of the eyeball and it would allow for treatment of simple glaucoma. Secondary glaucoma would be referred to an opthamologist. Adnexa is the tissue surrounding the eye, and the bill allows treatment of infections in this area, also.

Sen. Himsl: Does this allow for treatment of disease processes in the eye? Ans: Sen. Rassmussen: That would be a surgical procedure and would be referred to an opthamologist. Sen. Himsl: You don't want to use "surface" as opposed to "segment"? Sen. Rassmussen: "Surface" would eliminate treatment for glaucoma. Optometrists want to treat simple glaucoma, but they would not want to overstep treatment boundaries because of the possibility of malpracitce suits. Page 3, Sec. 3, is that definition restrictive enough, Sen. Himsl: so that optometrists are not and would not be working in the eye interior? Sen. Rassmussen: That is present law, and yes, it would restrict. Is there a difference in treating simple and secondary Sen. Eck: glaucoma?

Ans: Dr. Simons : We use a variety of measures and examinations

Public Health, Welfare and Safety Committee February 2, 1987 Page 2

to diagnose simple or secondary glaucoma, including testing of the optic nerve and perpheral vision. Untreated glaucoma is a leading cause of blindness. It is not always a simple disease, nor is it always easy to distinguish between primary and secondary glaucoma.

Sen. Eck: Sen Rassmussen, are you intending that optometrists make the initial glaucoma diagnosis? Ans: Yes, We take the same measurements and have the same instruments to do the same tests. Optometrists would refer patients if they felt they did not have simple glaucoma.

Sen. Vaughn: Are initial exams strong enough to determine if tumors exist? Would your exam show such an abnormality? Ans: Sen. Rassmussen: The bill doesn't change current practice, and we would refer out any abnormality. Sen. Eck: Would you detect a more deep-seated tumor? Sen. Rassmussen: We wouldn't be treating anything that abnormal. Sen. Eck: Would you recogmize this condition as well as an opthamologist? Sen Rassmussen: Yes, we would run the same visual field tests.

Sen. Himsl: Explain again the difference in treatment between the surface and the anterior segment. Ans: There is a notable difference between the two. Current law excludes the use of surgery; and the only way into the anterior chamber is by surgery. Some diagnostic drugs now affect inside the eye. (Drugs used in vision diagnosis) They can have a greater systemic effect than drugs that this bill is talking about. Dr. Simons: Some glaucoma drugs can have extremely serious sideeffects.

Sen. Rassmussen: Page 6, Lines 1-4, concern the testing of applicants by the Montana Board. The course in drugs will be conducted by a reputable institution and by responsible, educated people. It will be out of the hands of the state board.

There being no further questions, Sen. Rasssmussen moved the bill as amended. The vote was DO NOT PASS AS AMENDED. Yes votes were Williams, Vaughn, Rasmussen, and McLane. No votes were Eck, Norman, Meyer, Jacobson, Himsl, and Hager. Sen, Eck recommended an adverse committee report to the Senate.

CONSIDERATION OF HOUSE BILL NO. 51: Rep. Ray Peck, District # 15, sponsor of the bill, covered the changes that the bill provides from current law, which amkes oral interviews with dental candidates up to board's discretion.

<u>PROPONENTS:</u> Jim Fraser, staff attorney for the Department of Commerce, stated that the bill protects the public by maintaining proficiency and preventing unlicensed practices, but it does allow applicants to take licensure tests at the board's office, and it allows the board to determine if an oral interview is necessary. P.4 Line 13 allows the board to adopt necessary rules to govern malSENATE PUBLIC HEALTH, WELFARE AND SAFETY COMMITTEE FEBRUARY 2, 1987 Page 3

practice and raises the standards to comply with the standards of other boards.

<u>PROPONENTS</u>: Roger Tippy, Montana Dental Association, stated that eleven districts have concurred in this bill. Exhibit # 1.

Mary Lou Abbott, Montana Dental Hygienists Association, stated that the bill should make the license fees regular and provide for regular renewal and overview.

DISCUSSION OF H.B. NO. 51: Sen. Hager: Has the board had the power to fine before? Jim Fraser: No, the Board has looked at disciplinary procedures in the past, but has been looking at this for the past four years.

Sen. Eck: How many boards use this kind of disciplinary action? Mr. Frazier: Only one county.

Rep. Peck closed by stating that the profession will be given better tools to police its own profession and give the public a better practice of dentistry in Montana.

CONSIDERATION OF HOUSE BILL NO. 116: Rep. Jan Brown, District # 46, sponsor of the bill, stated that there is no continued state funding for this center and it is not needed.

PROPONENTS: Bill Opitz, Deputy Director of the Deaprtment of Health, stated that the department had received no funds to administer this agency in 1985 and has not carried out the provisions of the statute. They support the bill. Exhibit # 2.

ACTION ON H.B. 116: Sen. Jacobson moved that H.B. 116 DO PASS. The motion carried unanimously. Sen. Jacobson will carry the bill.

ACTION ON HOUSE BILL NO. 51: Sen. Jacobson moved that H.B. 51 BE CONSURRED IN. The motion carried unanimously.

FURTHER DISCUSSION OF SENATE BILL NO. 176: Sen. Hager took over as chairman. Sen. Eck moved the amendments and asked Karen Renne to discuss them. The first amendment clarifies that only nursing services will be reimbursed. The second amendment are changes to conform to the intent of the bill, and P. 2, Line 24 clarifies the reimbursement to the specific practitioners.

Sen. Himsl: Will the change in Line 21 have any effect on the possibilities of HMO's? Bill Opitz: The change is consistent with current Montana law. The motion to pass the amendments carried unanimously. Sen. Eck moved that the bill DO PASS AS AMENDED. The motion carried unanimously. Sen. Eck will carry the bill. SENATE PUBLIC HEALTH, WELFARE AND SAFETY COMMITTEE FEBRUARY 2, 1987 Page 4

CONSIDERATION OF HOUSE BILL NO. 88.- Rep. Rex Manuel, District # 11, stated that the purpose of the bill is to authorize hospital districts to establish capital replacement funds to be used for the replacement of property, plant facilities and equipment. The cost of such capital equipment must exceed \$5,000 and have a life expectancy of five years or more. The bill is to allow hospitals to have available funds to replace such items as furnaces when they suddenly break down. Many hospitals do not have a source of funds available to meet these emergencies.

DISCUSSION OF H.B. 88: Sen. Norman: There is no lid on the amount of reserves that a hospital can biuld up in this bill. A hospital could put on a three-mill levy whenever they want. Rep. Manuel: We could go for a one-mill cap. Sen. Hager: What would a one-mill levy bring in? Would Karen Renne check that. Sen. Williams: Could the fund be a certain percentage of the plant? Replacement of property could cover a wide area. The purpose of the bill is not provide a slush fund.

Sen. Hager and Himsl: The fund should be capped. We need additional information on this bill.

The meeting adjourned at 3 P.M.

the Esh

CHAIRMAN

### ROLL CALL

50th LEGISLATIVE SESSION 1987 Date 2-2				
NAME	PRESENT	ABSENT	EXCUSED	
Dorothy Eck	/			
Bill Norman				
Bob Williams	1			
Darryl Meyer				
Eleanor Vaughn				
Tom Rasmussen	/			
Judy Jacobson				
Harry H. "Doc" McLane				
Matt Hims]				
Tom Hager				

Each day attach to minutes.

COMMITTEE ON\_\_\_\_\_

(	VISITOR9' REGISTER			4
NAME	REPRESENTING	BILL #	Check Support	One Oppo:
know a Group in	Lonsumer	170		
Jorn harok	Oftometry	170	~	
Mary Lou abbott	MT Destal Hyguenists Ussa	HB51		
Bie Simons ap	QD	170		
Merry J. Schlenker	Gallatin watching	)		
Rocy Jippy	Mont Dental Ason	HB 51		
Affilms Op	00	170	~	
ABill Opitz	DHES	HB-114		<b>_</b>
Aone Light	MSCA	HB 116		ļ
				<b>_</b>
(				ļ
1				
		-		
••••				
· · · · · · · · · · · · · · · · · · ·			4	- <u> </u>
		_	-	
			<b>_</b>	- <b> </b>
<u>(</u>				<b>_</b>

DATE 2-2-87

(Please leave prepared statement with Socretary)

SENATE HEALTH & WELFARE (This sheet to be used by those testifying on a built) DATE 2 811 DATE: NAME : ontana ADDRESS: Ó  $^{\prime}O$ PHONE : lssociation )ental n tana REPRESENTING WHOM? APPEARING ON WHICH PROPOSAL: HB51 DO YOU: SUPPORT?\_ AMEND? OPPOSE? bill was presented to the Board COMMENT: nectors of the Dental Association in 64 obtained a unanimous Mm on coment en

PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY.

SENATE HEALTH & WELFARE (This sheet to be used by those testifying on a bill.) 2 DATE\_ NAME: Bill & Building, Hulena, MA ADDRESS: 444-2544 PHONE : REPRESENTING WHOM? Dept of Health & Env. Sciences (DHE) APPEARING ON WHICH PROPOSAL: HB-116 DO YOU: SUPPORT? AMEND? OPPOSE? HB-116 would delete the requirem COMMENT: DHES operate a health information This provision, was enacted mately 90,000 183 session, when the Dept 40 1 In issoula (unter ou no funde during the 85 session received. subseauntly. carnama. The U statuto sourcions of the is ative Auditor. No funds were asked no "provided to the pot during this MADIA

PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY.

### ROLL CALL VOTE

SENATE COMMITTEE Public Health, Welfare and Safety

Date 2-2-87 \_\_\_\_\_ Bill No. 170 Time 1145

ME	YES	NO
Dorothy Eck		×
Bill Norman		×
Bob Williams	×	
Darryl Meyer		×
Eleanor Vaughn		
Tom Rasmussen		
Judy Jacobson		$\bigtriangledown$
Harry H. "Doc" McLane	X	
Matt Himsl		$\mathbf{X}$
Tom Hager		X

Ellen Nehring

Secretary

Dorothy	<u>Eck</u>
Chairman	

Motion:

1987

1

)

### ROLL CALL

Public Health, Welfare and Safety COMMITTEE

50th LEGISLATIVE SESSION -- 1987 Date 2-2-8

NAME	PRESENT	ABSENT	EXCUSED
Dorothy Eck	X		
Bill Norman	<u> </u>		
Bob Williams			
Darryl Meyer	×		
Eleanor Vaughn	X		
Tom Rasmussen	$\lambda$		
Judy Jacobson	×		
Harry H. "Doc" McLane	X		
Matt Himsl	. ×		
Tom Hager	X		
		· · · · · · · · · · · · · · · · · · ·	
		<i>i</i>	

Each day attach to minutes.

FEBRUARY 2 1987

MR. PRESIDENT

We your committee on SENATE PUBLIC HEALTH, WELFARE AND SAPSTY

having had under consideration. SEMATE BILL No.170

(<u>%nite</u> color

# ALLOW OPTOMETRIST TO TREAT EYE DISEASE WITH DRUGS; ESTABLISH COMPETENCY

Be amended as follows:

1. Page 4, line 2. Following: "treatment" Insert: "limited to the anterior segment of the eye and adnexa"

2. Pgge 6, lines 1 through 4. Following: "must be? in line 1 Strike: remainder of subsection (2)(a)(ii) in its entirety Insert: "conducted by an institution accredited by a regional or professional accreditation organization which is recognized or approved by the national commission on accrediting or the United States commissioner of education. The course and examination must also be approved by the board.

AND AS AMENDED "

DO PASS

DO NOT PASS

FEBRUARY 2 19.87

Be amended as follows:

1. Page 1, line 21.
Following: "(f)"
Insert: "nursing"

2. Page 2, line 21. Following: "Health" Strike: "insurance" Insert: "service"

3. Page 2, line 24. Following: "37-8-202(5)" Insert: ", if health care services that nurse specialists are licensed to perform are covered by the contract"

#### AND AS AMENDED .

DO PASS

DOXNOXXXXXX

FEBRUARY 2 19.57...

MR. PRESIDENT

THIRD reading copy ( BLUE )

### MAKING ORAL INTERVIEWS OF DENTRISTRY LICENSE APPLICANTS DISCRETIONARY

### PECK (ECK)

a an agradient start a start and

#### BE CONCURRED IN

DO PASS

DO NOT PASS

SEMATOR ECK

February 2 MR. PRESIDENT We, your committee on SENATE PUBLIC HEALTH, WELFARE AND SAFETY .... \_\_\_\_ reading copy (\_\_\_\_\_\_) THERA color

### ELIMINATING THE REQUIREMENT THAT DHES OPERATE A HEALTH INFORMATION CENTER

### J. BROWN (JACOBSON)

1 1 1 1 a.S. .

#### BE CONCURRED IN

DO PASS

ø

DO NOT PASS

Chairman.