

MINUTES OF THE MEETING
FINANCE AND CLAIMS COMMITTEE
MONTANA STATE SENATE

March 31, 1987

The 21st meeting of the Senate Finance and Claims committee met on the above date in room 108 of the State Capitol. The meeting was called to order by Senator Regan, Chairman at 8:02 a.m. to hear Senate Bills 185, 243 and 852.

ROLL CALL: All members present.

CONSIDERATION OF HOUSE BILL 185: AN ACT APPROPRIATING FUNDING FOR THE FAMILY PRACTICE RESIDENCY TRAINING PROGRAM. Representative Manuel, chief sponsor of House Bill 185 said this program started in 1983, so it was an appropriation in '83 and '85 and we are again asking for \$85,000 to run this program. He said this program is not in the budget for the subcommittees, it is a small amount of money for the good it does for the state of Montana, and I will call on Sandy Norris to explain the program to you.

Sandy Norris, Executive Director of the Montana Family Practice Residency Satellite Program, spoke for the bill and her testimony is attached as exhibit 1, HB 185.

PROPOSERS TO HOUSE BILL 185: Paul Donaldson, President elect to the Montana Academy of Family Physicians. In June he will chair the Presidency of the organization and he asked support from the committee for this program. He said one of his charges in the Presidency in the organization was to promote quality family medicine in Montana. He said there is a glut of physicians nation wide. He said while that was probably true in the larger cities in Montana the rural areas had trouble attracting quality physicians to the smaller towns. He mentioned reasons including being on call 24 hours a day, wives who did not like the small rural areas, lower incomes, etc. He said this program let them look at the areas and help them to make a decision.

Mike Strekall, family physician in Helena, and said he could be classified as a direct product of this program. He was born and raised in Montana, pre-med in Carrol College and could see what the state had to offer. He said this program can influence residency physicians in the influential years of their training to get exposed to the area. He said he did not like small towns, knew he could not handle the time involved in a one person practice.

Jerry Leondorf, Montana Medical Association spoke for the program. He said this is a unique appropriations bill because it has never been a part of any budget. It has always had to stand on its own merits. He said this program brings people to the small towns where they work for one month as a part of their residency and learn to know what type of practice is available, know some of the people, etc.

Earl Book, a Doctor in private practice in Townsend. He said, this is a small town and I am on call at least 50% of the time, unlike the groups, and it is not that bad, and I am here directly as a product of the family practice satellite program. This program is far reaching. I was born, raised and medically trained in New Orleans and had only a vague idea of where the state of Montana was located. The opportunities this program provides for the residents that come up here and for the Doctors that host the residents after they are in practice here. He said you get to come to an area you are thinking about living in, you get to be a part of the community and interview job opportunity sites. As a doctor in private practice we have hosted a resident in Townsend, and not only do we teach, but we are taught. Medical methods change rapidly and we can exchange ideas.

Bill Leary, representing Montana Hospital Association said he was also on the Board of Trustees for the Montana Medical Practice, and said hospitals in both the larger and smaller communities are in support of the program. When a community is in need of a physician they go to the professional "head hunters" they are looking at a minimum of \$20,000 going into recruiting a physician to Montana with no guarantee that they will be receptive to living in rural America. This program is probably the most cost effective and efficient program we have in the future training of family practitioners in the state of Montana.

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

QUESTIONS FROM THE COMMITTEE: Senator Bengtson said, I would like to ask Bill Leary, on how hospitals recruit when it costs big bucks, how do you interface with this satellite program? Sandy Norris said she is working with the Billings Deaconess Hospital; do the hospitals use this as a recruitment process or what? Mr. Leary answered, I will give you an example. Right now there is a need for an additional physician in Ft. Benton, Montana. We simply make sure that the people in Ft. Benton know about the program, they can check with Sandy and she has a list of physicians that have been through the system here in the state and served a residency. She will let those physicians know there is a business opportunity. I think it only costs the hospitals \$25 to be on that list.

Senator Bengtson said she would like Sandy to elaborate a little on the interface you are having with Deaconess Medical Center in Billings. Is it the recruitment of persons on that staff? Sandy Norris said they have hired a person full time in corporate services. Her name is Dee Emerson and since March 1 we have been exploring areas she will look into. One of our frustrations is -- how far do we go in the recruiting, and our decision based on money and staff has been to stop at the exchange of lists and for people who don't have much experience in recruiting many times not much else happens. Dee will sort of take up that role. She will try to match physicians, families and interests with the community.

Senator Himsl said, I have had a problem with this ever since the first time. We were given the impression that after the program started we would not have to subsidize with general funds, and apparently that isn't the case. It seems to me now I find this is a duplication of the practice that the WAMI program carries on. We get the same type of thing. The other problem I have is if this would produce physicians for the rural area, Ekalaka, Broadus, Jordan, those kind of places where they really do need physicians instead of Whitefish, Bigfork, Kalispell -- we certainly don't need more there. I don't question that publicity suggest these people come to Montana to live, but I don't see where you are really addressing the real needs of rural medicine in Montana. Sandy Norris said she would have to pass the buck on the first question, she came into the program after the '83 session, so she could not speak for the first concern. The second in regard to the WAMI services; we compliment their services. WAMI seeks to train medical students, give them an opportunity to work in the University of Washington, we are trying to attract family physicians back to the state of Montana. We want to help WAMI pull those students back into Montana, but while there are similarities, they are at different levels. A lot of WAMI students don't go into primary care, they go into other areas and we may not want to attract some of them. The third concern is something that I have struggled with for the last couple of years, is to try to improve the distribution into the eastern rural communities. People come to Montana for a month and say would you sign me over there by Glacier Park, and then I send them a list of the places that need doctors. Now with Billings Deaconess we have a receptor in Eastern Montana. We are finally getting the break through on site development we want to do to get them into the eastern part of the state.

Senator Keating asked Jerry Leondorf, how many doctors are there in Montana? Mr. Leondorf said he would have to guess, but he thought it was between 800 and 1,000

Senator Hammond asked, prior to the beginning of this program about the only way to get Doctors in the state of Montana was to go through the executive secretary of the Montana Medical Association and find out who had shown an interest. Do you still find some of that? Jerry Leondorf said there is still a little. Senator Hammond said, but their names are given to the family practice satellite program? Mr. Leondorf said if someone called in, they are in the same building.

There were no more questions and Representative Manuel said in closing he would like to thank the proponents for their testimony.

CONSIDERATION OF HOUSE BILL 243: AN ACT TO STATUTORILY APPROPRIATE THE REVENUES RECEIVED FROM A PORTION OF CERTAIN LICENSE FEES TO PAY LOCAL BOARDS OF HEALTH FOR INSPECTIONS OF FOOD ESTABLISHMENTS LICENSED PURSUANT TO TITLE 50, CHAPTER 50, AND INSPECTION OF ACCOMMODATIONS AND CAMPING FACILITIES LICENSED PURSUANT TO TITLE 50, CHAPTERS 51 AND 52; amending certain sections and an immediate effective date.

Representative Harper, House District 44, and chief sponsor of House Bill 243 said, this purpose of this bill is to save some of your time. The bill provides a statutory appropriation for the local Board Inspection Account. Now the local boards do the work in inspecting restaurants, trailer courts, motels, etc. The state is given the money and 85% of it is appropriated back to the local board inspection accounts. By law there is really no way for the legislature to deviate from the law, and this would just give the committee time to do more important things.

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

Senator Bengtson asked, you say they are statutorily appropriated rather than what? I just don't understand. Representative Harper said this bill would provide a statutory appropriation. Right now the law requires that 85% of the monies be sent back to the local board inspection account and the question is, does the department have enough authority to distribute the money without coming through the legislature. They have always come through the legislature because of that question. This would clear it up and since they can do nothing besides comply with the law there is no amount of control the legislature can exert over this without changing the law.

Senator Regan said, we are supposed to appropriate money as they review the budget as we often do on special accounts.

Senator Heating asked, what was the source of the money? Representative Harper said license fees from restaurants, hotels, trailer courts, accommodations. There is a \$30 fee in different parts of the law. 85% in each case has to be sent back to the local board inspection account. The money will vary according to how many inspections are made.

Representative Harper said he closed, and Senator Regan closed the hearing on House Bill 243.

CONSIDERATION OF HOUSE BILL 252: AN ACT TO REQUIRE THAT FUNDS DERIVED BY OFFICE OF PUBLIC INSTRUCTION FROM THE MEDIA LIBRARY AND DIVISION OF RESOURCES AND ASSESSMENT BE DEPOSITED IN ACCOUNTS IN THE STATE SPECIAL REVENUE FUND. Representative Nathe, House District 19 said, this bill came out of the education subcommittee in Appropriations. It is a housekeeping bill in that it responds to some of the exceptions that were written up on the audit by the Legislative Auditor. This bill did not get drafted and introduced, so we as a subcommittee did so. It changes two accounts in their operation from enterprise accounts to state special revenue accounts. An enterprise account is about the same as a proprietary account, which means the money that goes in there can be spent on budget amendment. If it is a state special revenue account it can only be used for that specific purpose. If the money has to be used for something else it can only be used when the Governor declares a special emergency. This tightens down the use of the money that flows into the two accounts that are mentioned on page 1 and page 2 of that bill. One is for the audiovisual library and resources and assessment account.

There were no further proponents, no opponents, and no questions from the committee. Representative Nathe said, I close. The hearing on House Bill 252 was declared closed by Chairman Regan.

DISPOSITION OF HOUSE BILL 252: Motion by Senator Himsel that House Bill 252 be concurred in. Voted, passed, unanimous.

CONSIDERATION OF HOUSE BILL 621: Senator Regan suggested House Bill 621, with is the oil overcharge bill, and said there had been an amendment proposed.

Senator Boylan proposed the amendment, exhibit 1, HB 621 as the two on the bottom of the page on the West Yellowstone Airport Roof.

Senator Regan asked if 621 had been in Long Range Building and suggested it be put aside then and we will notify the Long Range Building committee and we will act on it tomorrow morning.

DISPOSITION OF SENATE BILL 327: AN ACT TO PROVIDE FUNDING TO THE DEPARTMENT OF REVENUE FOR ADMINISTRATION OF SPECIAL REVENUE ACCOUNTS FOR TAX CHECKOFF PROGRAMS.

Senator Jacobson said, when I saw this bill, we had had this same problem in Fish and Game committee and it dealt with the checkoff. My concern was that we are setting up a sort of a special revenue account to take care of the income tax checkoff, and on the other hand the subcommittee is also funding that area and wondered whether or not there was an overlap, so I went to the fiscal analyst who had done that section of the budget and asked Pam if she would look into it and let me know how the bill fit into the subcommittee action as far as their costs for the checkoff is concerned. Exhibit 1, attached. I guess it is summarized on the front, on some of the checkoff's they are getting money through their particular bill -- I guess one of them, and that's the non-game. The other 4, and at least in one instance that was a conscious decision made by the people who were carrying the bill for the children's trust, that we not take money out of the checkoff for administration. So we are pretty inconsistent so far as financing the program. As we look back on the 3rd paragraph, Pam says there are 20 reasons why the Legislature may want to question and evaluate the expenditure authority. First, during the current biennium, the department added 2 checkoffs without adding the income tax budget authority.

Senator Jacobson said, I am not sure they are short money in this particular area, and I don't know whether you want to add this special revenue or not, but I think we ought to weigh all those factors before we pass this bill. At this point I think I would say to lay the bill on the table and try to coordinate between the subcommittee action and whether or not you want to charge the checkoff's. The other thing you want to look at is, if there is some income tax reform in this session and you do put new forms out it isn't going to be that difficult to add this portion to it and it would lower the cost quite a bit.

Motion by Senator Keating that Senate Bill 397 do not pass.

Senator Smith asked, if we kill the bill will does that allow us to address this issue later on? As far as the funding of the checkoff's or the additional duties so far as the department of Revenue is concerned? Senator Regan said, I think we are telling the administration that we feel that within their budget there is sufficient funding to do this job and of what the 3rd paragraph on the second page says the income tax division was authorized to spend -- and of this there is a difference of \$210,414. They are sufficiently funded to carry out the task.

Senator Himes said, I think I see it a little bit differently. If the state is going to have them as a collector for these different special programs it seems they ought to pay something for the collection services. The payments then come out of what they collect from you and me if we checked it off, otherwise it is coming out of the general fund.

Senator Smith said, I talked to the people on the non-game species there. They are not opposed to paying something, but all they want to pay is the actual cost. If those people ask for a way to get additional funding then they should make their fair share of contribution.

Senator Jacobson said, I am not arguing that point at all. I guess my problem is I am not sure we have a handle on what the costs really are. You are talking about the Agriculture in the schools. They collected \$8,000 and the proposed administrative funding is \$2,000 of the \$8,000. It just seems unusual to me that it would cost \$2,000 to go through those forms and see if there is a check in the box. I think we need to get a handle on what it actually costs, and charge accordingly. On the public campaign, they want to take \$500 out of \$1500. It seems to me if there are 4 checkoffs it doesn't cost that much.

Senator Jergeson said, I think I agree with that. It only takes a millisecond for a key puncher to punch whether a particular checkoff has been marked, and I certainly don't think it costs a dollar for each one. I think there is a real problem in this bill.

Senator Keating said, let's take a run at my motion that it do not pass.

Senator Bengtson said, we did pass the bill that said non-game wildlife had to put the dollar in, that was part of the bill. One of the things that came out was that if you weren't on that income tax, then I would like to ask Ken about the equity of charging for charging for the administrative costs. Do you feel a dollar is the right amount, or do you feel that this bill is too high? Ken Morrison, Department of Revenue said, we have looked at this a great deal, we have studied it and it turns out in respect to the checkoffs is about \$3500, and that is just bare storing the information. One of the things that is hard to see is that 410,000 returns have to have some sort of an entry into the computer. That is what has to occur and that is where the cost is.

Question was called on Senator Keating's motion. Voted, roll call vote, motion passed 9 to 7 for do not concur.

DISPOSITION OF HOUSE BILL 185: AN ACT APPROPRIATING FUNDING FOR THE FAMILY PRACTICE RESIDENCY TRAINING PROGRAM.

Senator Regan said she had some sheets she would like to give the committee on this bill. She said, I have been here long enough so that I remember when the Family Practice Satellite Program came into Finance and Claims and it started out in the Old West Region Commission, it was a program that was never authorized by the state but they just thought it was a good idea, and then when the funding dropped they came in and asked for us to pick up the funding and it was my understanding at the time that it was a one time shot and they wouldn't be back. I would like to take a minute or two and let you read that letter and digest it as you choose. Letter is attached as exhibit 1, HB 185.

Senator Boylan said, About the Doctor who came up from New Orleans and settled in Townsend, but how are you going to get one in Jordan or Ekalaka or places like that that Senator Himsel mentioned this morning. I don't know, I think it is a whole no-win deal. There is a surplus of Doctors and they are going to be looking around to get these places and they are going to pick the best place. I don't know how you are going to talk them into staying in the others.

Senator Hammond said, I have had a lot of experience in trying to get Doctors to communities. There are 7 of them that I have been active in soliciting, and this program wasn't in effect then, and we have 2 people in Glasgow now who are cooperators in this program. They bring people to Glasgow and they serve in that area and work with other doctors. I think it is going to have a real important effect down the road. In my mind WAMI has never placed a doctor in the state of Montana. This program has done it. Since this program has been here there have been a lot of WAMI students that have come back here and I asked the lady about whether there are people who still write them, being interested in Montana, because that is the only source we have to find out who might be interested. I think this program really will serve Eastern Montana as well as anyone else. We have 2 doctors in Malta who stayed long enough so they liked it. It is difficult to get them to stay, but the big problem is to get their wives to stay. Out of these 7 three of them left because their wives wouldn't stay. I wonder if this couldn't be funded through this Exxon overcharge. Agriculture and rural Montana certainly haven't got their share of what they paid into that program, and I wonder if it could be funded through that.

Senator Himsel said he would like to correct the record though, WAMI has supplied doctors in western Montana, we have a lot of them. Senator Hammond said, they supply them, but they did not place them.

Senator Regan said, you have the bill before you, I have shared with you the analysis of what we did in the past, and I would point out to you that in 1985 we gave them \$6,000 and the question is whether you want to adopt this. It will be on going and infinitum if we take this program on. That is your decision.

Senator Keating said, there was another factor that drove itself through that testimony. A number of those doctors said they didn't want to go to a rural area where they were on call 100% of the time, they wanted to be in with the groups where they could have their off hours and not be on call that much. I remember this in 1981, Senator Himsel said if we give you this money you will be back here time after time and they said oh no, we are just losing our federal funds, we just need to get started on this thing and we will run it ourselves after that. If there are 900 of them in the state, if they want others to help them not be on call 100% of the time, or if they want to serve the people in the rural areas, let the doctors assess themselves \$50 apiece and they can fund this themselves on a voluntary basis. Doctors will be helping doctors.

Senator Hammond, the young man from Townsend found out it wasn't too bad. Many of these doctors are ready to retire and they need someone to work with them for awhile, and they can place doctors in those positions. As far as doctors to help themselves and chip in, that question was asked when I carried the WICHI WAMI bill, and there wasn't a single one. They just looked at each other. These doctors are not serving doctors, they are serving rural Montana. That is what I am concerned about.

Senator Sage said, Senator Hammond has a point of funding this with the energy money. Senator Regan said, it doesn't qualify, I think. Senator Sage said, if we can qualify moths for leafy spurge and those things on the basis they will not have to go up there and spray so much and that's energy conservation, we certainly ought to justify it on the basis that if we get doctors there those people won't have to travel miles and miles to go to a doctor.

Motion by Senator Hammond that House Bill 185 do pass.

Senator Jergeson said, I guess I like the theory behind this, but I am not sure about the practice. It is not accomplishing anything. The trouble we have in Chinook is we have a beautiful clinic, and the Doctors in Havre decided they wanted to build a Taj Mahal of a clinic, called the Chinook clinic into it and no doctor can afford to stay in Chinook because they have to pay for the Taj Mahal in Havre. No doctor will even consider coming into our beautiful clinic in Chinook. I don't know how this could help us.

Senator Hammond said, I know this is true, we face the same thing in Big Sandy, but when you get to Glasgow and Malta and Ft. Benton and those areas you don't have quite that much trouble. Fort Benton is in need of one because there is a doctor retiring there, and would like to have someone come in and help. We finally solved it in Big Sandy and I think it can be solved.

Senator Haffey said, what was the funding from the state in fiscal year 1987. Taryn Purdy, fiscal analyst said, the funding was \$70,000 over the biennium. This was reduced slightly in special session and reduced slightly again in November.

Senator Bengtson said a couple of things bothered her and one of them was these young doctors who not only brought their families but went all over the state. I guess they are a spoken voice for Montana after they leave here even if they don't settle here. Maybe we could put it in the tourism bureau. The other thing, they are an educating factor themselves coming into these smaller communities with their new ideas.

Senator Regan said we have spent a lot of money in the last days and we still have the big bill coming over. They've cut out eye glasses and hearing aids and things and I realize \$70,000 isn't very much, but it will be an ongoing program we have bought.

Senator Hammond asked, are you sure this couldn't be funded under that Exxon overcharge money? Dave Hunter, Budget Office, said I don't believe that it could. We have looked at the deal we made and we have to have a real specific pay back on energy. I will be real happy to have Ben look at this to double check it, but I am confident it will not be acceptable.

Senator Hammond asked, isn't this in support of an Agricultural area? Dave Hunter said unfortunately the federal department of energy makes the decisions, we don't have a choice as to what data meets the criteria. I would be happy to make the call this afternoon or have Ben do it, and make sure it is not an eligible activity.

Senator Haffey said the doctors who are practicing in our state seem to be coming from out of state. I suggest the state should be in it. It is helping out with medical care.

Senator Hammond said he would withdraw his motion if they could have time to find out if this is a possibility. Hunter will enquire.

DISPOSITION OF HOUSE BILL 243: AN ACT TO STATUTORILY APPROPRIATE THE REVENUES RECEIVED FROM A PORTION OF CERTAIN

LICENSE FEES TO PAY LOCAL BOARDS OF HEALTH FOR INSPECTIONS OF FOOD ESTABLISHMENTS LICENSED etc.

Motion by Senator Manning that House Bill 243 be concurred in.

Senator Himsel said, this is just one of many. This is another case of statutory appropriations. When you set these into statutory appropriations you remove them from subcommittee reviews.

Senator Keating said, 62% of our revenues are statutorily appropriated now. This is a \$30 fee, then they will call in and ask for a raise in fees. They won't get it from the general fund, they will be sticking it to somebody out there and they will already have a statutory appropriation so they will not be in for review.

Senator Jergeson said, this is not a very big one and given the other major issues we have to deal with we are probably wasting our time by sticking our nose into some of these things. The purpose of government is to serve the public health welfare and safety. Is it really a benefit for public health, welfare and safety for us to have to review all these little things?

Senator Smith said, we also have a responsibility to see that those people out there are getting the service and are not solicited to the extent they cannot afford to pay it. I think it is time we review every budget.

Senator Bengtson asked, how many of ever vote against a fee increase.

Question was called. Voted, motion failed. Senator Regan said since it is not going to pass could we have a motion to that effect, and we will have a roll call vote.

Substitute motion by Senator Keating that this bill do not pass. Voted, carried, the motion passed to not concur in House Bill 242. 12-4. Senator Keating to carry the adverse committee report.

DISPOSITION OF HOUSE BILL 660: AN ACT TO PROVIDE BY STATUTE, RATHER THAN BOILER PLATE LANGUAGE IN THE GENERAL APPROPRIATION ACT, THE APPROPRIATION AUTHORIZATION FOR THE MONTANA UNIVERSITY SYSTEM; TO HAVE THE LEGISLATURE RECEIVE THE CURRENT DESIGNATED SUBFUND REPORT EACH YEAR, etc.

Senator Bengtson moved House Bill 660 do not pass.


Substitute motion by Senator Cagle, said there was concern in section 3 on page 4 that did not indicate how many copies of that should be given to the Legislative Finance Committee.

whether it be every member of the committee on one copy. I would like to submit an amendment on line 22 after "submit" to insert "one copy of".

Question was called, voted, the amendment was passed.

Motion by Senator Bengtson was to be not concurred, this was voted, roll call vote, motion as amended was passed and the bill goes out of committee as amended, do not concur in. Senator Bengtson will carry the adverse committee report.

The meeting was adjourned.



Senator Regan, Chairman

ROLL CALL

50th LEGISLATIVE SESSION - - 1987

Date 3-31-87

NAME	PRESENT	ABSENT	EXCUSED
SENATOR REGAN	✓		
SENATOR HIMSL	✓		
SENATOR JACOBSON	✓		
SENATOR BENGTSON	✓		
SENATOR STIMATZ	✓		
SENATOR HARDING	✓		
SENATOR HAFHEY	✓		
SENATOR SMITH	✓		
SENATOR KEATING	✓		
SENATOR STORY	✓		
SENATOR BOYLAN	✓		
SENATOR JERGESON	✓		
SENATOR TVEIT	✓		
SENATOR MANNING	✓		
SENATOR HAMMOND	✓		
SENATOR GAGE	✓		

As your Family Practice elective, we invite you to experience the practice of rural medicine in Montana. Our program has a limited number of one and two month rotations available in several locations throughout the state. We will match the town and hospital size to your interests, be it small (1,000 people/6 beds) or medium (80,000 people/374 beds).

During an elective period of your second or third year of residency training, you would practice with a Board-Certified Family Physician. We can also arrange rotations with specialists in other fields appropriate for the type of exposure you prefer.



This Satellite Program was initiated through the cooperative efforts of the Montana Academy of Family Physicians, the Montana Medical Association, the Montana Hospital Association, the Montana Department of Health, and Governor Ted Schwinden. The program is operated by a nonprofit foundation whose Board of Trustees is composed of representatives of and advisors from these organizations.

We offer attractive financial arrangements for you and your residency program. Our locations will help with your expenses to participate in a rotation. In most cases, travel expenses (up to \$1,000) are reimbursed, housing is provided, and a Temporary Montana Medical License is provided. In some locations, your salary for the month can be reimbursed to your residency program if required (\$2000 maximum).


Montana offers a wide variety of recreational opportunities — fishing, skiing, hiking, water sports, camping, and hunting. Yellowstone and Glacier National Parks offer spectacular sightseeing. We are also proud of our theaters and symphonies, as well as our artists, galleries and museums.

If you are interested in Montana, please contact us at 2021 11th Ave., Helena, Montana 59601, or call us at (406) 443-1618. We have some slots available this year and are taking reservations for next year. Generally, four months notice is needed before you wish to come.



If your program director is not familiar with Montana's unique Satellite Program, have him or her contact us for details at:

(406) 443-1618



SANDY B. NORRIS
EXECUTIVE DIRECTOR

MONTANA

FAMILY PRACTICE RESIDENCY SATELLITE PROGRAM
2021 Eleventh Avenue • Helena, Montana 59601 • 406-443-1618



Please send me additional information about possible openings in Montana for a one or two month Family Practice Residency .

Rotation.

NAME OF RESIDENCY PROGRAM _____

YOUR NAME _____

ADDRESS _____

MAILING ADDRESS _____

TELEPHONE NUMBER _____

TELEPHONE NUMBER _____

RESIDENCY PROGRAM DIRECTOR _____

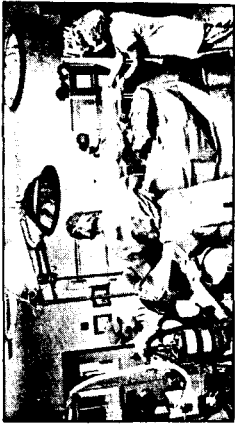
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SENATE FINANCE AND CLAIMS

You're Invited

LEGISLATIVE NO. 12

COMMITTEE NO. 1


MONTANA

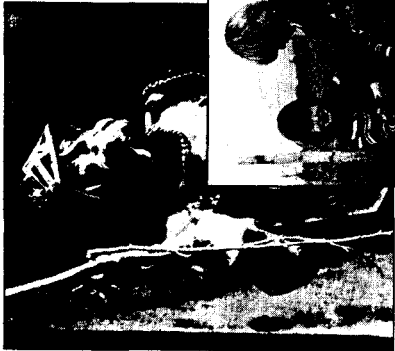
FAMILY PRACTICE RESIDENCY SATELLITE PROGRAM



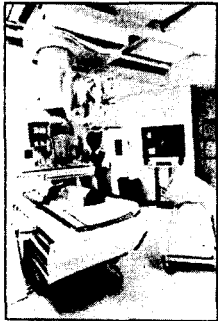
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SENATE FINANCE AND CLAIMS

EXHIBIT NO. 1

DATE 3-31-87

MONTANA FAMILY PRACTICE RESIDENCY SATELLITE PROGRAM

BILL NO. 1

STATISTICAL PROFILE

March, 1987

1. Number of Family Physician Resident rotations per year:

FY 83 -- <u>9</u>	FY86 -- <u>36</u>
FY 84 -- <u>15</u>	FY87 -- <u>27 to date</u>
FY 85 -- <u>30</u>	<u>Total - 117</u>

2. Number of Family Practice Residencies allowing their resident physicians to participate (cumulative):

FY 83 -- <u>7</u>	FY86 -- <u>117</u>
FY 84 -- <u>67</u>	FY87 -- <u>122 to date</u>
FY 85 -- <u>95</u>	

3. Number of Montana community rotation sites (satellite units) willing to host family practice resident rotations per year:

FY 83 -- <u>5</u>	FY86 -- <u>32</u>
FY 84 -- <u>10</u>	FY87 -- <u>36</u>
FY 85 -- <u>20</u>	

4. Number of Montana physician volunteers willing to serve as teachers (preceptors) for the resident rotations (cumulative):

FY 83 -- <u>11</u>	FY86 -- <u>95</u>
FY 84 -- <u>32</u>	FY87 -- <u>119</u>
FY 85 -- <u>67</u>	

5. Number of Family Physicians who have contacted our program regarding Montana practice opportunities: 102 total
53 current list

6. Number of Montana Opportunities/Locations which have contacted our program to list their need for family physicians: 69 total
27 current list (does not include IHS or PHS)

7. Number of Family Physicians who have settled in Montana or have made commitments to return this July, 1987 upon completion of their training program: 17

Communities: Conrad	Sheridan	Billings
Deer Lodge	Helena	Crow Agency
Big Timber	Hamilton	Libby
Whitefish (2)	Boulder (2)	Lolo
Townsend	St. Ignatius	Bigfork

8. Number of additional physicians who have chosen Montana practices from our listing of Locations Seeking Family Physicians: 8

Communities: Butte	Missoula	Kalispell
Big Timber	Dillon	Townsend
Billings	Glendive	

9. Number of resident rotations in process for the remainder of this postgraduate year and for next year: 36 to date

CLAIMS

EXHIBIT NO. 1

DATE 3-3-88

BILL NO. 188

ROTATION OBJECTIVES

- To allow the resident to experience practice characteristics and responsibilities in a rural area
- To enable the resident's family members to experience living in a rural area
- To observe the role of the rural family physician as a primary care provider
- To participate in a volume practice and observe methods of practice management
- To realize the role of the family physician in providing leadership in assessing the needs, goals, objectives, values, and resources relative to community health
- To contrast the characteristics appropriate to rural medical practice versus practices established in communities with easy access to large medical centers and subspecialists
- To learn the skills and roles of rural health care team members as they relate to the health needs of the community
- To observe small group practice dynamics
- To observe the operation of the rural hospital as a primary or secondary care provider
- To observe on-going, long-term family and patient care
- To offer opportunities to become familiar with Montana's rural medical needs



FAMILY PRACTICE RESIDENCY
SATELLITE PROGRAM

2021 Eleventh Avenue • Helena, Montana 59601 • 406-443-1

Information Sheet

Montana Family Practice Residency Satellite Program

DATE AND CLAIMS

BILL NO. 13

I. Annual Budget

Administrative Office	\$70,000
Resident Expenses	\$100,000
Physician Faculty Time	Donated

Source:

State, Fees, Donations, Fed?
Local Community
Montana physicians

A \$70,000 appropriation from the State of Montana would provide approximately 20% of the program costs annually. It is a crucial 20% without which the other funds would not be applicable.

We have applied for a federal grant for Graduate Training in Family Medicine which would fund improvement of our evaluation system, preceptor training, and site development. If received, this grant would fund about 10% of the total budget.

II. Physician needs in Montana

Twenty-seven openings for Family Physicians are listed with our office currently. These do not include the openings in the Indian Health service (5 in July at Crow Agency) or the National Health Service Corps sites. There are 18 NHSC physicians in Montana currently with 6 more expected this summer. By 1989, the scholarship physicians program will have completed placements and most of the current NHSC physicians in Montana will have finished their obligations. Since most NHSC assignees do not stay in those sites historically after completion of their obligation, it is anticipated that the need for Family Physicians in rural, underserved areas will increase dramatically.

III. Return on the State's Investment from FY83 through FY87

For the \$141,000 appropriated during the last two sessions, 117 resident family physicians have received at least one month of postgraduate medical training in Montana, and 17 Family Physicians have returned to Montana to practice (or will be here 7/1/87) after their rotations.

These two figures illustrated that our program is indeed meeting its objectives:

- 1) For Montana to participate in postgraduate medical training in a high-quality, economical approach
- 2) To expose newly trained family physicians to practice opportunities and lifestyles in rural areas, and to increase their awareness of Montana opportunities

3/22/87 SN



Montana State University
Bozeman, Montana 59717

WAMI Program/Medical Science

Telephone (406) 994-4411

SENATE FINANCE AND CLAIMS

EXHIBIT NO. 185 January 20, 1987

DATE 3-31-87

BILL NO. 03

Gene Donaldson, Chairman
House Appropriations Committee
Capitol Station
Helena, MT 59620

Dear Mr. Donaldson:

I am writing in support of House Bill 185 which would provide funding for family practice residency training in Montana through the Family Practice Residency Satellite Program. Montana is one of the only states in the nation that does not have any complete residency programs and therefore the Family Practice Residency Satellite Program is an essential link in the medical education system of the State of Montana. Like the WAMI program it is a flexible, relatively low cost mechanism by which Montanans and others interested in non-metropolitan medical practice can be given encouragement, education and experience in Montana primary care medical practice. Not only does this program give physicians an opportunity to learn about the medical needs and medical opportunities in Montana, but it also helps them structure the remainder of their education in such a way as to be appropriate for the medical needs of Montana.

It may well be some decades before Montana is ready to develop a complete primary care residency program. In the meantime the Family Practice Residency Satellite Program is exactly what we need at this stage in the evolution of medical education in Montana.

Sincerely,

Stephen J. Guggenheim, M.D.
Director

SJG:jf

✓cc: Sandy Norris



Regionalized Medical School for Washington, Alaska, Montana & Idaho



Pondera Medical Center

406-278-3211 805 Sunset Blvd. Conrad, MT 59425

January 19, 1987

Honorable Gene Donaldson
Chairman, Appropriations Committee
House of Representatives
State of Montana
Capitol Station
Helena, MT 59620

SENATE FINANCE AND CLAIMS

EXHIBIT NO. 1-185

DATE 1-19-87

BILL NO. 185

Dear Representative Donaldson:


I am writing to you in support of the House Bill 185 which appropriates \$70,000 for family physician resident training in Montana. This program has had very good results and is money well spent.

When a physician settles in a community such as ours, there are several positive results. Not only does hospital revenue increase since patients can be seen in their hometown, but also at least two new jobs are created. More jobs mean more taxes, and even without the "filter-down" effect, I estimate that at least \$100,000 per year in salaries, hospital revenues, and community purchases is spent for each new physician practice.

In July, we look forward to welcoming Dr. Patsy Vargo, a family physician who has participated in a rotation here in Conrad through the Montana Family Practice Residency Satellite Program. Dr. Vargo is finishing her last year of Residency training currently in Denver, Colorado. Her husband is a rancher who is also looking forward to settling in Montana.

Even if this program attracted only one physician per year to Montana, I would feel that the \$70,000 expenditure for the years would be worthwhile. With 15 physicians attracted in the past four years, the productivity of this program is self-evident. I hope that you and your committee members will look favorably on House Bill 185.

Yours truly,


Norman Campeau
Administrator
Pondera Medical Center

THE WESTERN MONTANA CLINIC

515 WEST FRONT STREET
MISSOULA, MONTANA
59802

TELEPHONE (406) 721-5600



January 20, 1987

INTERNAL MEDICINE

CARDIOLOGY

H.A. BRAUN, M.D.
G.A. DIETERT, M.D.
J.F. KNAPP, JR., M.D.

DIAGNOSTIC

C.G. MCCARTHY, M.D.
T.H. ROBERTS, M.D.
M.C. LANGENDERFER, M.D.
A.M. MURPHY, M.D.
H.E. HUGHSON, M.D.
W.W. WILSON, M.D.
B.E. THOMPSON, M.D.

ENDOCRINOLOGY

W.A. REYNOLDS, M.D.

GASTROENTEROLOGY

R.G. MURNEY, JR., M.D.

HEMATOLOGY-ONCOLOGY

J.M. TRAUSSCHT, M.D.

NEPHROLOGY

J.H. REITER, M.D.

PULMONOLOGY

W.B. BEKEMEYER, M.D.

RHEUMATOLOGY

H.W. BUSEY, M.D.
K. FREMONT-SMITH, M.D.

NEUROLOGY

ADULT AND PEDIATRIC

S.F. JOHNSON, M.D.
E.B. RUSSO, M.D.

PEDIATRICS

C.E. BELL, M.D.
S. WERNER, M.D.
J.W. JANTZEN, M.D.

SURGERY

D.H. FARNHAM, M.D.
P.C. NATURALE, M.D.
G.C. ROTH, JR., M.D.

OBSTETRICS AND GYNECOLOGY

INFERTILITY

T.J. CAMPBELL, M.D.
O.S. SOHLBERG, M.D.
L.A. RICHARDS, M.D.
V.A. KNUDSEN, M.D.

OTOLARYNGOLOGY

B.T. MORRIS, M.D.

DERMATOLOGY

P.E. WATSON, M.D.

UROLOGY

R.S. MUNRO, M.D.

ORTHOPAEDIC SURGERY

L.J. TODER, M.D.
D.L. WOOLLEY, M.D.

RADIOLOGY

G.E. GRAN, M.D.

CLINICAL PSYCHOLOGY

P.J. BACH, Ph.D.
C.L. MILLER, Ph.D.

PODIATRIC MEDICINE

N.R. WILLIAMS, D.P.M.

LOLO FAMILY PRACTICE

N.F. VASQUEZ, M.D.

SOUTHGATE MALL NOW CARE

R.W. SWEATMAN, M.D.
M.S. WOLTANSKI, M.D.

ADMINISTRATION

J.F. SCHWERING

Gene Donaldson
Chairman, Appropriations Committee
Montana House of Representatives

Dear Mr. Donaldson:

I am writing to urge your support of Health Bill #185 which is scheduled to come before the Appropriations Committee on the twenty-second of this month. I would have liked to have been present to testify on the behalf of this bill in person, but this was not possible.

I am writing this letter from the perspective of a recent participant in this program. I am a Family Practice physician who began working in Montana in August of last year. In August of 1985, I spent a month with the Family Practice physicians in Red Lodge as part of the Family Practice Satellite Residency Program. Although my wife and I had seriously considered coming to Montana prior to our stay in Red Lodge, this experience helped make this a definite decision in several ways. A very important facet of our experience was simply to come in contact with Montanans and with Family Practice in Montana. It gave me a unique opportunity to visit numerous communities in the state and talk to physicians in those communities about practice opportunities in their areas. I was made aware of many of these opportunities through information that the Family Practice Satellite Program provided.

Montana is a unique state from a medical standpoint. The larger communities in the state have an abundance of sub-specialists. In fact, in some communities I was surprised that so many sub-specialists could have viable practices. In contrast, cities such as Missoula have a small number of Board Certified Family Practitioners in proportion to the total number of physicians that are present. Likewise, there are certainly many smaller communities in the state which can only be served adequately by a family physician. Only

SERATE FINANCE AND CLAIMS

EXHIBIT NO. 1

DATE 3-21-87

BILL NO. HB 185

Gene Donaldson, Chairman
Appropriations Committee
Re: Health Bill #185
January 20, 1987
Page 2

SENATE FINANCE AND CLAIMS

EXHIBIT NO. 1225

DATE 3-5-87

BILL NO. 185

individuals who are residency trained in Family Practice are taught a wide enough range of skills to provide medical care as a single practitioner or a member of a small family practice group as one might find in smaller Montana communities.

My intention in mentioning the above, is to impress upon you the need that Montana has at this time and in the future for family physicians. This need may become even more acute as HMOs come into the state. Most HMO systems in the United States rely heavily on primary care physicians and in many cases this means Family Practitioners.

States such as Iowa or Wisconsin, where I have done my training, have a large number of Family Practice Residency Programs. These programs not only train family physicians, but their very existence in those states tends to keep the physicians in those areas. It is a well-known fact that physicians tend to practice in the area where they do their post-graduate training. Likewise, without a medical school in the state, Montana is again at some disadvantage when it comes to making physicians aware of practice opportunities that are available here.

The Family Practice Satellite Residency Program therefore, provides a number of important functions. It provides young Family Physicians outside of the state with an opportunity to spend some concentrated time here and learn what medicine in Montana is like. For me and for my family it also meant an opportunity for my wife to look at areas where we were considering as potential homes. The program provides excellent information on opportunities that are available in Montana and makes one's search for a practice much more efficient. The program also provides a chance for Montana physicians to come in contact with potential partners and to work with them for a month and scrutinize them in a way that otherwise would be impossible.

My overall impression of the Montana Family Practice Satellite Residency Program has been an excellent one. The program seems to be very well-run and coordinated. Loss of this program is going to mean decreased exposure of the state of Montana to Family Practice physicians. This may result in fewer good quality Family Practitioners coming into the state at a time

Gene Dolandson, Chairman
Appropriations Committee
Re: Health Bill #185
January 20, 1987
Page 3

SENATE FINANCE AND CLAIMS
EXHIBIT NO. 1-185
DATE 2-3-87
BILL NO. HB 185

when they may be the most appropriate source of medical care for many Montanans.

Again, I strongly urge your support of Health Bill #185.

Thank you for your time in reviewing this letter.

Respectfully,

Ned F. Vasquez M.D.

Ned F. Vasquez, M.D.

NFV/bd

THE FAMILY PRACTICE CENTER OF HELENA
HAWKINS-LINDSTROM CLINIC, P.C.

405 Saddle Drive • Helena, Montana 59601
(406) 442-0120

Reginald J.O. Goodwin, M.D.
Thomas E. Norris, M.D.
Paul S. Donaldson, M.D.
Kurt E. Werner, M.D.
Michael S. Strekall, M.D.

Founded 1943

John H. Gordon, M.B.A.
Business Manager

January 21, 1987

Appropriations Committee
c/o Sandy Norris
Montana Family Practice
Residency Satellite Program
2021 11th Avenue
Helena, MT 59601

SENATE FINANCE AND CLAIMS

EXHIBIT NO. 1-2-10

DATE 3-31-87

BILL NO. 185

To Whom It May Concern:

This is a letter in support of continuing monies for the Montana Family Practice Residency Satellite Program. I am a Board Certified Family Physician currently practicing in Helena, Montana. As a Montana native, born in Billings, I am a Montana WAMI graduate of the University of Washington School of Medicine. Prior to coming back to Montana, I entered practice in Yakima, Washington because of the difficulties I had in evaluating practice opportunities within the state of Montana.

The main barriers that kept me from returning to my home state were:

1. Lack of information about practice opportunities in Montana during the final months of residency training;
2. Inadequate exposure to medical communities that were seeking new physicians;
3. The fiscal ability needed to travel with my spouse and children while looking for practice opportunities that were a 1,000 miles from my residency.
4. The allure of well advertised and accessible practice opportunities near my residency.

Fortunately I have been able to fulfill my dream of returning to the state of Montana when I joined a group of family physicians in Helena, June 1, 1985. I can honestly say that this change would not have occurred if it had not been for my very positive experience with the Satellite Training Program. Through the efforts of St. Peter's Community Hospital and the Family Practice Satellite Training Program, I spent one month, (March, 1984), working with physicians in Helena. This one month

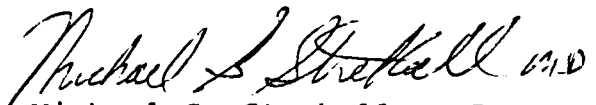
rotation broke down the barriers that had kept me out of the state, and allowed my wife and I to have additional time to explore eight communities that were seeking physicians.

In summary, the Family Practice Residency Satellite Program is a viable operation and addresses the needs of a medically underserved State.

Since beginning practice in Helena, in June of 1985, I have had the opportunity to work with several of the residents that have rotated through this community. Each and every one of these residents have found ample opportunity to evaluate practice opportunities in towns in western and central Montana and I am aware of at least two of them who are back in the state because of the program exposure. During the latter year of residency training, experience in a community is very influential upon practice location choice. I believe that this program provides that type of exposure in a very essential manner. I strongly support continuation of funding for the Residency Satellite Program. It provides the only opportunity for continuing an essential length between the WAMI Medical School Program and the successful return of M.D.'s into our state after residency training.

If you have any questions please feel free to contact me at my office, 442-0120.

Yours truly,



Michael S. Strekall, M.D.
American Academy of
Family Practice, Diplomate

SENATE FINANCE AND CLAIMS
EXHIBIT NO. 10-0011
DATE 10-31-85
BILL NO. 185

Montana Academy of Family Physicians

501 North 7th Avenue, Suite 10

Helena, Montana 59601

January 21, 1987

Representative Gene Donaldson
Chairman
Appropriations Committee
House of Representatives
Helena, MT 59601

SENATE HOUSE AND LABOR
COMMITTEE
CHIEF
BILL NO.

Dear Chairman Donaldson:

I am writing this letter in support of House Bill 186, "training for family physician residents". I am a Montana native who went to medical school under the WICMG program in the 1970's. After my training, I relocated in Montana to practice medicine. However, I soon found how difficult it was to influence new physicians to come to Montana. New physicians are just not trained to practice in the rural, medically isolated areas of Montana. Not until young physicians can see that they can function in a practice setting that does not contain every medical luxury will they be willing to provide medical care for the rural areas that need them the most.

The Montana Family Practice Satellite Program provides such an opportunity for the young physician in training. Not only has the Satellite Program provided a new arena for medical training outside the medical center but it has also shown during its short existence that it is a viable medium for recruiting physicians to rural Montana. In addition, in comparing the costs of operating the WICMG and WICMG programs to the number of participants that eventually return to Montana to practice medicine versus the same statistics for the Satellite Program, I think your committee will see the financial economy of this program.

I sincerely hope your committee will consider this appropriation favorably.

I appreciate your time and your consideration.

Sincerely,

Jimmie L. Anderson

Jimmie L. Anderson, M.D.
714 14th Avenue SW #116
Edison, Montana 59370
President, Montana Academy of
Family Physicians

DATE _____

COMMITTEE ON _____ BILL NO. _____

BILL NO.

VISITOR'S REGISTER

[illegible]

(Please leave prepared statement with Secretary)

Boylan
with
N B 621

Admendments to HB 621:

Fix or repeal the "Addy" admendment

Repeal

- 1) Page: 3
Lines: 3-19
Strike: Section 5

Page: 7
Line: 25
Strike: 1,900,000
Insert: 2,000,000

Page: 8
Line: 5
Strike: 900,000
Insert: 1,000,000

Fix

- 1) Page: 3
Line: 14
Strike: 1,550,000
Insert: 1,650,000
- 2) Page: 3
Line: 17
Strike: 950,000
Insert: 850,000

Repair the West Yellowstone Airport Roof:

- 1) Page: 9
Line: 13
Insert : New Section: Section 9. There is appropriated from the Stripper Well Payment contained in the Federal Special Revenue Fund to the Department of Commerce 65,000 for repair of the roof at the West Yellowstone Airport.
- 2) Page: 7
Line: 25
Strike: 1,900,000
Insert: 1,985,000



JUDY RIPPINGALE
LEGISLATIVE FISCAL ANALYST

STATE OF MONTANA

Office of the Legislative Fiscal Analyst

STATE CAPITOL
HELENA, MONTANA 59620
406/444-2986

March 13, 1987

SENATE FINANCE AND CLAIMS
EXHIBIT NO. 1
DATE 3-27-87
BILL NO. 397

Senator Judy Jacobson
Seat #16
Montana State Senate

Dear Senator Jacobson:

This responds to your request concerning income tax checkoff administrative funds requested by the Department of Revenue. Specifically you wanted my thoughts on whether the Department needed additional funds to administer the checkoffs.

My thoughts can be summarized into four areas:

1. The department currently administers five checkoffs and receives special administrative funding for one;
2. The costs of administering the remaining four checkoffs are funded from general fund;
3. The costs of implementing at least two of the remaining four checkoffs were accomplished without adding to the income tax division's current level expenditure base; and
4. The cost of adding a new checkoff on the income tax form could be minimal if the department makes modifications to reflect legislative changes in other income tax areas which is typical following a legislative session. The necessity of adding expenditure authority may be questionable.

Existing Checkoffs

The Department of Revenue currently administers five different checkoffs, including Homeowner or Renter Credit, Nongame Wildlife, Child Abuse Prevention, Agriculture in Montana Schools, and Public Campaigns. The department is authorized to receive administrative funds from only one of these checkoffs: Nongame Wildlife. This funding source is included in the department's current level budget reviewed by the legislature.

The costs of changing computer programs and administering the other checkoffs have been accomplished without additional checkoff funds; in effect, the administration of the remaining checkoffs is subsidized by the general fund.

The legislation proposed by the Senate Taxation Committee, via the Director of the Department of Revenue, would allow the Department of

Revenue to charge each state special revenue account \$1 per checkoff contribution or \$2,000, whichever is greater, to administer the special revenue accounts for tax checkoff programs. Because the costs of administering the existing checkoffs are included in the current level expenditure base, the legislature may want to consider using these funds to offset the general fund now used to support the administration of the checkoffs.

New Checkoffs

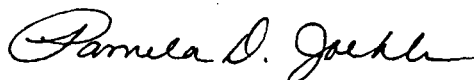
The proposed legislation would also allow the Department of Revenue to add expenditure authority above current level for administrative costs incurred with any new checkoff authorized by the legislature after January 1, 1987, such as the veteran's cemetery checkoff proposed in House Bill 523.

There are two reasons why the legislature may want to question the necessity of adding expenditure authority. First, in the current biennium, the department added two checkoffs to the income tax form without adding to the income tax division's budgeted expenditures authorized by the legislature even though the department indicated additional costs would be incurred. The income tax division was authorized to spend \$2,832,487 in fiscal 1986 and actually spent \$2,622,073, a difference of \$210,414. Of this difference, \$93,400, was used for the division's 2 percent cut, \$113,852 was transferred to other divisions, and \$3,162 was unspent authority.

The second reason the legislature may want to question the necessity of adding expenditure authority to the department's budget is that the actual cost of adding a checkoff to the income tax form may be very small, and therefore easily absorbed into the current level expenditure base. The income tax division administrator informed me if the department makes other modifications to the income tax system resulting from other legislative changes as they did in fiscal year 1986, the cost of adding a checkoff could be much smaller than originally anticipated. The division administrator indicated the computer charges to add two checkoffs to the income tax form in the current biennium were approximately \$1,800 compared to the \$4,500 estimated in the 1985 session for one checkoff. Assuming the additional data processing costs would be \$1,000 in the 1989 biennium, the legislature may want to evaluate the necessity of adding authority for an expenditure that could represent less than five-hundredths of one percent of the division's total fiscal 1988 current level budget.

If you have further questions or any concerns, please contact me.

Sincerely,



Pamela D. Joehler

PJ1:bn:sj3-13.

SENATE FINANCE AND CLAIMS
EXHIBIT NO. 1-16-87
DATE 1/16/87
BILL NO. 523

ROLL CALL VOTE

SENATE COMMITTEE

FINANCE AND CLAIMS

DATE

3-31

Senate

Bill No.

397

Time

9:

NAME

YES

NO

SENATOR HIMSL

SENATOR JACOBSON

SENATOR BENGTON

SENATOR STIMATZ

SENATOR HARDING

SENATOR HAFLEY

SENATOR SMITH

SENATOR KEATING

SENATOR STORY

SENATOR BOYLAN

SENATOR JERGSON

SENATOR TVEIT

SENATOR MANNING

SENATOR HAMMOND

SENATOR GAGE

SENATOR REGAN

9 7

Sylvia Kinsey

Secretary

Senator Regan

Chairman

MOTION:

Keating

Roll Call

6

ROLL CALL VOTE

SENATE COMMITTEE

FINANCE AND CLAIMS

DATE

3-31

Bill No.

243

~~245~~

Time

9:

NAME

YES

NO

SENATOR HIMSL

✓

SENATOR JACOBSON

✓

SENATOR BENGTON

✓

SENATOR STIMATZ

✓

SENATOR HARDING

✓

SENATOR HAFLEY

✓

SENATOR SMITH

✓

SENATOR KEATING

✓

SENATOR STORY

✓

SENATOR BOYLAN

✓

SENATOR JERGSON

✓

SENATOR TVEIT

✓

SENATOR MANNING

✓

SENATOR HAMMOND

✓

SENATOR GAGE

✓

SENATOR REGAN

✓

12 4

Sylvia Kinsey

Secretary

Senator Regan

Chairman

MOTION:

Keating case

Keating case

ROLL CALL VOTE

SENATE COMMITTEE

FINANCE AND CLAIMS

DATE 3-31 H Bill No. 660 Time 9:

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

8 7

Sylvia Kinsey
Secretary

Senator Regan
Chairman

MOTION: Con - Benz
9

STANDING COMMITTEE REPORT

..... March 31 1987

MR. PRESIDENT

We, your committee on FINANCE AND CLAIMS

having had under consideration HOUSE BILL No. 243

third reading copy (blue)
color

STATUTORY APPROPRIATION OF PART OF LICENSE FEES FOR LOCAL HEALTH
INSPECTIONS

HARPER (Keating)

Respectfully report as follows: That HOUSE BILL No. 243

BE NOT CONCURRED IN

.....
SENATOR REGAN

.....
Chairman.

STANDING COMMITTEE REPORT

March 31

19 37

MR. PRESIDENT

We, your committee on FINANCE AND CLAIMS

having had under consideration Senate Bill No. 397

second reading copy (yellow)
color

PROVIDE FOR ADMINISTRATIVE COSTS OF INCOME TAX CHECKOFF PROGRAM

MCCALLUM (Keating)

Respectfully report as follows: That Senate Bill No. 397

BE NOT CONCURRED IN

~~DO PASS~~

~~DO NOT PASS~~

SENATOR REGAN

Chairman.

STANDING COMMITTEE REPORT

March 31

19 27

MR. PRESIDENT

We, your committee on FINANCE AND CLAIMS

having had under consideration House Bill No. 660

third reading copy (blue)
color

UNIVERSITY FUND SPENDING AUTHORITY

PECK (Bengtson)

Respectfully report as follows: That House Bill No. 660
be amended as follows:

1. Title, line 7.

Strike: "LEGISLATURE"

Insert: "LEGISLATIVE FINANCE COMMITTEE"

2. Page 4, line 22.

Following: "SUBMIT"

Insert: "one copy of"

AND AS AMENDED

BE NOT CONCURRED IN

~~XXXXXX~~

~~XXXXXXXXXX~~

SENATOR REGAN

Chairman.

STANDING COMMITTEE REPORT

...March 31..... 1987.....

MR. PRESIDENT

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

having had under consideration..... **HOUSE BILL** No. **852**

third reading copy (blue)
color

ESTABLISH STATE SPECIAL REVENUE ACCOUNT FOR OPI LIBRARY AND RESOURCES FUNDS

WATHE (Hinsl)

Respectfully report as follows: That..... **HOUSE BILL** No. **852**

BE CONCURRED IN

~~DO PASS~~

~~XXXXXXXXXX~~
~~DO NOT PASS~~

.....
SENATOR REGAN

Chairman.