MINUTES

MONTANA HOUSE OF REPRESENTATIVES 53rd LEGISLATURE - REGULAR SESSION

COMMITTEE ON JUDICIARY

Call to Order: By CHAIRMAN RUSSELL FAGG, on February 9, 1993, at 9:00 a.m.

ROLL CALL

Members Present:

Rep. Russ Fagg, Chairman (R) Rep. Randy Vogel, Vice Chairman (R) Rep. Dave Brown, Vice Chairman (D) Rep. Ellen Bergman (R) Rep. Jody Bird (D) Rep. Vivian Brooke (D) Rep. Bob Clark (R) Rep. Duane Grimes (R) Rep. Scott McCulloch (D) Rep. Jim Rice (R) Rep. Tim Sayles (R) Rep. Liz Smith (R) Rep. Bill Tash (R) Rep. Howard Toole (D) Rep. Tim Whalen (D) Rep. Karyl winslow (R) Rep. Diana Wyatt (D)

Members Excused: None

Members Absent: Rep. Angela Russell

- **Staff Present:** John MacMaster, Legislative Council Beth Miksche, Committee Secretary
- **Please Note:** These are summary minutes. Testimony and discussion are paraphrased and condensed.

Committee Business Summary: Hearing: HB 357, HB 346 Executive Action: HB 357, HB 94, HB 236, HB 405

HEARING ON HB 357

Opening Statement by Sponsor:

REP. RUSSELL FAGG, House District 89, Billings, said this bill expands the category of persons and entities that have an aircraft lien. He sponsored HB 357 on behalf of the Montana Airport Association. It is his understanding that in many

HOUSE JUDICIARY COMMITTEE February 9, 1993 Page 2 of 8

instances, out-of-county or out-of-state aircraft flying into rural airports have services performed and leave without paying the bill. Forty-nine states have already passed a bill similar to this which allows a lien to be filed for services rendered, and he urged the committee's support.

Proponents' Testimony:

Ron Mercer, President, Montana Airport Association and Manager, Helena Airport, stated this bill enhances airport operators' ability to collect for services rendered. Primarily, smaller airports do not have the financial capabilities nor the staff to correct this issue.

Mike Ferguson, Department of Transportation, Montana Aeronautics Division, spoke in support of the bill. However, he recommended a small amendment: On line 15, after the word "and" insert: aircraft. It is the intent of airport management, fix-based operators, and independent private operators to be able to file a lien.

Rick Griffith, Chairman, Butte Airport; Tim Phillips, Missoula International Airport; and Monte Eliason, Airport Director, Glacier Park International Airport, Kalispell, all spoke in support of the bill.

Opponents' Testimony: None.

Questions From Committee Members and Responses: None.

Closing by Sponsor: None.

HEARING ON HB 346

Opening Statement by Sponsor:

REP. STEVE BENEDICT, House District 64, Hamilton, said this bill regulates medical malpractice claims. He said it addresses specific areas of state statutes where tort reform is necessary to deter rising medical costs. He also said that not even the proponents can demonstrate beyond any doubt that this bill will reduce the escalation of preventive medicine from unnecessary procedures doctors are forced to conduct to protect themselves from threats of malpractice suits. Proponents will show that malpractice medical insurance rates show clear downward trends when this type of legislation has been introduced in other states. **EXHIBIT 1**

Proponents' Testimony:

Garry Spaeth, Liability Coalition, explained that the Liability Coalition came into existence in 1986 to deal with the liability crisis that existed in the state of Montana, and it has been in existence ever since. The Liability Coalition is composed of many businesses and individuals from throughout the state who are concerned primarily with the business atmosphere as it exists in Montana in relation to liability laws.

Jerry Loendorf, Montana Medical Association (MMA), commented on amendments drafted for sections 1 and 2.

<u>SECTION 1</u>: Limits the recovery of non-economic damages in suits against health care providers to \$250,000. What needs to be distinguished is the difference between non-economic damages and economic damages. There's no limit imposed on economic damages which include loss of wages, health care costs, damages that can be measured by a dollar amount. The limit only applies to noneconomic damages, which are damages that can't be measured easily by a dollar amount, and those include emotional distress, disfigurement, pain, suffering, and inconvenience.

Mr. Loendorf said this bill does not break new ground in limiting non-economic damages either in Montana or in other states. This particular provision places essentially the same limit, \$250,000, on non-economic damages as California does in malpractice Although they are unrelated areas, Montana has limited actions. non-economic damages in the area of Workers Compensation where the limit only applies to disfigurement which is \$2,500; and the limit on this bill is one hundred times higher. A number of states have proposed limits on non-economic damages, and the purpose of this is to control liability insurance premiums, which, in turn, could control increases in health care costs. The Liability Coalition believes the limit proposed in the bill is reasonable, and would provide greater stability in the liability insurance marketplace.

<u>SECTION 2</u>: Limits attorney's fees by placing a limit on the percentage of the amount recovered. The limits imposed by the state of California are 40 percent on the first \$50,000; 33 1/3 percent on next \$50,000; 25 percent of the next \$500,000; and 15 percent of the amount over \$600,000. Limiting the attorney fee should not be so low that it would cause attorneys not to take these types of cases. The coalition chose to follow California because it's been in existence for some time. Montana also limits its attorney's fees in other areas, e.g., probate orders, worker's compensation, and collection of installment contract are all limited by amount.

<u>SECTION 3</u>: \$100,000 or more would be paid in periodic payments, unless the court finds that periodic payments are not in the best interest of the injured person who is receiving the payments. An example would be, if a person is injured and could not work for

HOUSE JUDICIARY COMMITTEE February 9, 1993 Page 4 of 8

the next month, year, or next ten years. Existing Montana law already outlines the procedure for determining the amount of payments. The advantages to this bill are: 1) It's generally less expensive to purchase an annuity; and 2) payments are structured over a period of time or for the rest of the injured person's life.

<u>SECTION 4</u>: No substantial change in the law.

SECTION 5: Provision to be amended.

<u>SECTION 6</u>: Limited liability damages caused by gross negligence. Currently, a person can recover from damages caused by ordinary negligence. The reason for this particular provision is that in the area of children, liability insurance has increased significantly. Children are a high-risk area; if a doctor delivers babies, he/she has to pay an additional amount for insurance, which is a significant amount and has gone up. The number of people who deliver babies in Montana has declined.

STATUTE OF LIMITATIONS: If a person feels he has been wronged and doesn't bring a lawsuit within a particular period of time, then that person is not allowed to follow through with the lawsuit. This bill would set a statute of limitations for adults and malpractice actions to three years from the date of injury or one year after discovery of injury, whichever occurs first. The reason for this provision is to get people to process their claims as early as possible.

Larry E. Riley, Garlington, Lohn & Robinson, Attorneys At Law, Missoula, asked the committee whether the bill, should it pass, will withstand a constitutional challenge. The legislation being proposed is very similar to a law called the Micro Laws of California. All the provisions have been tested for constitutional standard, and it had decreased costs of malpractice insurance substantially in California. The Doctors' Company, which is a California-based, doctor-owned insurance company, manages malpractice insurance suits for 70 percent of physicians in Montana. A substantial number of health care providers are insured by the Doctors' Company which would be recipients in this change in legislation.

Mona Jamison, The Doctors' Company, presented written testimony. EXHIBIT 2

Van Kirke Nelson, Kalispell Physician, presented written testimony. EXHIBIT 3

Richard Yeagar, Family Practitioner, Jessop, commented that his associate paid \$59,000 in malpractice insurance in 1989 which has quite an impact on his income. His net income average in three years was \$71,589. These types of insurance charges are driving people to non-standard care, i.e. midwives instead of obstetricians.

HOUSE JUDICIARY COMMITTEE February 9, 1993 Page 5 of 8

Jim Smith, Montana Psychological Association (MPA), said the MPA is made up of 100 psychologists practicing within the state of Montana. This bill is an essential component to health care reform. MPA requests that "nurses" be added to the definition of heath care providers on section 1, page 3, line 4. Mr. Smith believes it's necessary to add "psychologist" to that definition also. Psychologists are named exclusively in section 7, page 10. Health care provider is defined as being a person who is licensed, certified, or otherwise authorized by the laws of this state to provide health care.

Russell Cater, Chief Counsel, Department of Social and Rehabilitation Services, stated that SRS is a sponsor of the Montana Health Care Workshop, which has taken place over the last several years throughout the state of Montana. The first phase of this programming presented several proposals to the 1991 legislature, and those proposals were adopted. Governor Racicot believes that tort reform is an important issue which needs to be discussed during this legislative session. Mr. Cater said he generally supports this bill; however, he has some reservations with certain sections of the bill. SECTION 1 involves the \$250,000 cap on economic damages. Mr. Cater supports a cap but has reservations with respect to the fact that it is set on a line basis based on the number of people, and believes that it should be an individual cap.

Jacqueline Lenmark, American Insurance Association; Tom Hopgood, Health Insurance Association of America; Larry Akey, Montana Association of Life Underwriters; James Tutwiler, Montana Chamber of Commerce; and Jim Ahrens, Montana Hospital Association, appeared as proponents.

Opponents' Testimony:

Russell Hill, Executive Director, Montana Trial Lawyers Association, presented written testimony. EXHIBIT 4

Kate Cholewa, Montana Women's Lobby (MWL), expressed concern about section 6, which restricts a women's right to collect damages should an obstetrician be negligent in child delivery. A woman's negligence in prenatal care does not change the possibility that the doctor may be negligent in delivering that baby - gross negligence or otherwise. Should a bill come up that opts to increase prenatal service and obstetricians in rural areas, the MWL will support this bill.

Zander Blewett, Attorney at Law, Great Falls, professed that caps will only help the health industry, and will not help doctors or women and children.

Mr. Karistea and Doug Hobstrom, Attorneys at Law, Butte, said they are experts in micro cases, and told the committee that these cases are difficult to bring to trial. The shifting of

HOUSE JUDICIARY COMMITTEE February 9, 1993 Page 6 of 8

funding and limitation of access for a legitimate case is a primary concern. Their two primary concerns include lack of access for the legitimate malpractice case, and the loss of the access of private funds, which is necessary to care for those individuals. Mr. Karistea and Mr. Hobstrom strongly expressed their opinion that the entire medical legal system be studied, and the 1993 Legislature should consider forming a Medical Legal Panel.

Questions From Committee Members and Responses:

REP. VOGEL asked **Mr. Loendorf** to confirm whether the cost of medical malpractice is determined by the insurance company. **Mr. Loendorf** confirmed that the cost of malpractice is determined by the insurer, and all the costs that go into insurance, including awards, are factors in determining premiums.

REP. WHALEN referred to the exhibit distributed by Ms. Jamison. The first two pages consist of graphs that say "Tort Reform Reduces Colorado OB/GYN Rates by 60%" and the second page says, "Tort Reform Reduces Colorado Medical Liability Rates by 51%." At the bottom of each page is the notation that this information comes from The Doctors' Company. He asked what underlying information was relied on by The Doctors' Company in order to draw the conclusion that rates went down and that the reduction in rates came from "tort reform." Ms. Jamison said the company looked at its rates and compared them in those areas over a span of years. The assumption as to whether or not it's correct that tort reform resulted in these differences of decreases is an overall percentage of economic and non-economic damages.

REP. WYATT asked **Mr. Hill** to explain to the committee what the charts in **EXHIBIT 2**) mean from The Doctors' Company. **Mr. Hill** said it's very easy to use charts to demonstrate or indicate that there's been a big savings. **Mr. Hill** doesn't believe the doctors in Colorado could not put a dollar amount on the chart. He said there is a real risk for any insurer who does come in and quantify the possible savings from statutes. Insurers set rates and protect losses all the time. It is not true that it is impossible to predict accurately the impact of legislation.

<u>Closing by Sponsor:</u>

SEN. BENEDICT distributed and reviewed a letter from Robert Mickey, Executive Vice President, Texas Medical Association, to the committee. EXHIBIT 5 He asked the committee not to compare Montana with Colorado. This is a Montana bill written by Montanans.

EXECUTIVE ACTION ON HB 357

Motion: REP. BROWN MOVED HB 357 DO PASS.

Motion: REP. BROWN moved two amendments. Line 15, after the word "an" and before "airport", insert: "aircraft"; and on line 17, after "airport," insert: "or agent of the airport." The purpose of this bill is to help operators in small airports.

<u>Vote</u>: REP. BROWN's amendment. The amendment carried unanimously 18-0.

Vote: HB 357 DO PASS AS AMENDED. Motion carried unanimously 18-0.

EXECUTIVE ACTION ON HB 94

Motion: REP. BROWN MOVED HB 94 DO PASS.

Discussion:

REP. BROWN distributed a gray bill replacement for the bill. **EXHIBIT 6** Everything in the original bill is printed in the gray bill. A gray bill is a vehicle that allows putting all the amendments in the bill so that it can be read the way it would look after extensive amendments are made. He then read the bill through.

Vote: HB 94 "GRAY BILL" DO PASS. Motion carried 17-1. REP. TASH abstained from voting.

EXECUTIVE ACTION ON HB 236

Motion: REP. TOOLE MOVED HB 236 DO PASS.

Discussion:

Motion/Vote: REP. TOOLE proposed amendments. See Standing Committee Report. The motion carried 17-1 with REP. SMITH voting no.

Vote: HB 236 DO PASS AS AMENDED. Motion carried 17-1 with REP. SMITH voting no.

EXECUTIVE ACTION ON HB 405

Motion: REP. WHALEN MOVED HB 405 DO PASS.

Discussion:

Motion/Vote: CHAIRMAN FAGG moved Mr. MacMaster's proposed

HOUSE JUDICIARY COMMITTEE February 9, 1993 Page 8 of 8

amendment. See attached Standing Committee Report. CHAIRMAN FAGG moved the amendment. Amendment passed 16-2 with REPS. BROWN and **VOGEL** voting no.

Vote: HB 405 DO PASS AS AMENDED. Motion carried 17-1 with REP. **VOGEL** voting no.

ADJOURNMENT

Adjournment: 11:00 a.m.

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REP. RUSSELL FAGG Chairman

MIKSCHE; Secretarv

RF/bcm

HOUSE OF REPRESENTATIVES

Judiciary

ROLL CALL

COMMITTEE

DATE

-9-93

NAME	PRESENT	ABSENT	EXCUSED
Rep. Russ Fagg, Chairman	· v		
Rep. Randy Vogel, Vice-Chair			
Rep. Dave Brown, Vice-Chair			
Rep. Jodi Bird			
Rep. Ellen Bergman			
Rep. Vivian Brooke		<u></u>	
Rep. Bob Clark		-	
Rep. Duane Grimes			
Rep. Scott McCulloch			
Rep. Jim Rice			
Rep. Angela Russell		·	
Rep. Tim Savles			
Rep. Liz Smith			
Rep. Bill Tash			
Rep. Howard Toole	V		
Rep. Tim Whalen	L/		
Rep. Karyl Winslow	\checkmark		
Rep. Diana Wyatt			
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HR:1993 wp.rollcall.man CS-09

HOUSE STANDING COMMITTEE REPORT

February 9, 1993 Page 1 of 1

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Mr. Speaker: We, the committee on <u>Judiciary</u> report that <u>House</u> <u>Bill 357</u> (first reading copy -- white) do pass as amended.

Signed: Thurs Fagg, Chair

4...

And, that such amendments read:

1. Page 1, line 15.
Following: "of an"
Insert: "aircraft,"
Following: "airport"
Insert: ","

-END-

Committee Vote: Via / . No X .

321409SC,HpE

HOUSE STANDING COMMITTEE REPORT

February 10, 1993

Page 1 of 2

Mr. Speaker: We, the committee on Judiciary report that House Bill 94 (first reading copy -- white) do pass as amended .

And, that such amendments read:

1. Title, lines 7 and 8. Strike: "PROHIBITING" on line 7 through "OFFICE;" on line 8

2. Title, line 9. Following: "2-2-111," Insert: "AND" Strike: "AND 5-7-103,"

3. Page 3, lines 6 through 15. Strike: "a gift" on line 6 through "taken." on line 15 Insert: "or receive, directly or indirectly, a gift or substantial economic benefit as a gratuity from a person or

entity except as provided in this section; (e) accept a gift or other gratuity if it could reasonably be inferred that the gift or gratuity is intended to influence the performance of the legislator's official duties, actions, or judgments;

(f) accept a gift or gratuity that the legislator knows or should under the circumstances know is primarily for the purpose of rewarding the legislator for official action the legislator has taken.

(2) A legislator may accept reimbursement for reasonable food, travel, lodging, and other expenses incurred to attend a meeting at which the legislator has a speaking engagement, participates in a panel discussion, or otherwise engages in an activity in the legislator's official capacity."

Renumber: subsequent subsection

4. Page 3, line 25, through line 3 of page 4. Strike: "Ethical principles" on page 3, line 25 Insert: "Conflict-of-interest rules" Strike: "(1) The" on page 3, line 25, through end of line 3 of page 4 Renumber: subsequent subsections

Committee Vote: Yes , No

331410SC.Hss

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5. Page 4, line 6. Strike: "personal or"

6. Page 4, line 22. Strike: "shall" Insert: "who elects to" Following: "disclose" Insert: "or eliminate"

7. Page 4, line 23. Following: "do so" Insert: "or who elects to abstain shall do so"

8. Page 4, line 25, through line 24 of page 5. Strike: section 4 in its entirety

-END-

HOUSE STANDING COMMITTEE REPORT

February 10, 1993

Page 1 of 1

Mr. Speaker: We, the committee on Judiciary report that House Bill 236 (first reading copy -- white) do pass as amended.

And, that such amendments read:

1. Title, line 6. Strike: "THIRD PARTY" Insert: "PATIENT OR THE PATIENT'S DESIGNEE"

2. Page 1, lines 16 and 17. Strike: "suit by the person to whom the information is disclosed for"

3. Page 1, line 17. Strike: "based upon the disclosure" Insert: "by the patient or the patient's heirs or successors in interest that is based upon delivery to the patient or the patient's designee of health care information concerning the patient that is contained in the health care provider's patient file"

4. Page 1, lines 22 through 25. Strike: ". I hereby" on line 22 through end of line 25 Insert: "for ______(purpose of the disclosure). This release is subject to revocation at any time except to the extent that the released health care provider has already acted in reliance on the release. If not revoked, the release terminates in accordance with 50-16-527."

-END-

Committee Vote: Yes: /7, No / .

331444SC,No5

HOUSE STANDING COMMITTEE REPORT

February 9, 1993 Page 1 of 1

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Mr. Speaker: We, the committee on <u>Judiciary</u> report that <u>House</u> <u>Bill 405</u> (first reading copy -- white) do pass as amended.

Signed: Russ Eagg, Chair

And, that such amendments read:

1. Page 1, line 22.
Following: "person"
Insert: "in the presence of a minor"

-END-

Committee Vote:

3214065C.HoE

	HOUSE OF REPRESENTATIVES
	Judiciary COMMITTEE
	ROLL CALL VOTE
DATE	2-9-93 BILL NO. 43357 NUMBER 18
MOTION:	Motton to pass HB357 conners unanimously 18-2

NAME	AYE	NO
Rep. Russ Fagg, Chairman	V	
Rep. Randy Vogel, Vice-Chair	V	
Rep. Dave Brown, Vice-Chair	V	
Rep. Jodi Bird	~	
Rep. Ellen Bergman		
Rep. Vivian Brooke	۲.	
Rep. Bob Clark	· V	
Rep. Duane Grimes		
Rep. Scott McCulloch		
Rep. Jim Rice		
Rep. Angela Russell	\checkmark	
Rep. Tim Sayles		
Rep. Liz Smith		
Rep. Bill Tash	~	
Rep. Howard Toole	~	
Rep. Tim Whalen	~	
Rep. Karyl Winslow		
Rep. Diana Wyatt		
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HOUSE	OF	REPRESENTATIVES	

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	Judiciary	COMMITTEE
	ROLL CALL V	OTE
DATE 2-7-93	BILL NO	4 NUMBER 17
MOTION: Hotten to	pass HB94 "	Gray Bill" carried
	17-2 hep.	Tash abstained from
Voling.		

NAME	AYE	NO
Rep. Russ Fagg, Chairman	V	
Rep. Randy Vogel, Vice-Chair	V	
Rep. Dave Brown, Vice-Chair	~	
Rep. Jodi Bird	~	
Rep. Ellen Bergman	V	
Rep. Vivian Brooke	~	
Rep. Bob Clark	· L-	
Rep. Duane Grimes	L	
Rep. Scott McCulloch	~	
Rep. Jim Rice	V	
Rep. Angela Russell	~	
Rep. Tim Sayles	V	
Rep. Liz Smith	\checkmark	
Rep. Bill Tash	1001	10 TE
Rep. Howard Toole	\checkmark	
Rep. Tim Whalen	V	
Rep. Karyl Winslow	L/	
Rep. Diana Wyatt	/	
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	HOUSE	OF REPRESENTATI	IVES	
	Judicia	iry	COMMITTEE	
	R	OLL CALL VOTE		
DATE 2-	<u>-9-9.3</u> BILL	NO. <u>HB 236</u>	NUMBER 18	
MOTION:	Motion to pas	5 HB 236 Ca	rried 17-1	
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NAME	AYE	NO
Rep. Russ Fagg, Chairman		
Rep. Randy Vogel, Vice-Chair	V	
Rep. Dave Brown, Vice-Chair	<i>L</i>	
Rep. Jodi Bird	./	
Rep. Ellen Bergman		
Rep. Vivian Brooke	<i>V</i>	
Rep. Bob Clark		
Rep. Duane Grimes		
Rep. Scott McCulloch	V	
Rep. Jim Rice		
Rep. Angela Russell		
Rep. Tim Sayles		
Rep. Liz Smith		<u> </u>
Rep. Bill Tash		
Rep. Howard Toole	i	
Rep. Tim Whalen	L'	
Rep. Karyl Winslow		
Rep. Diana Wyatt		
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HOUSE OF REPRESENTATIV	'ES
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		Judiciary		_COMMITTEE	
		ROLL	CALL VOTE		
DATE	1-9-93	BILL NO.	HB 405	NUMBER	18
MOTION:	Hoticn	to pass Hi	340,5 Car	med 17-	1,
- <u><u>-</u>-<u>-</u></u>],

NAME	AYE	NO
Rep. Russ Fagg, Chairman	V	
Rep. Randy Vogel, Vice-Chair		V
Rep. Dave Brown, Vice-Chair	~	
Rep. Jodi Bird	V	
Rep. Ellen Bergman		
Rep. Vivian Brooke	V	
Rep. Bob Clark	· V	
Rep. Duane Grimes	V	
Rep. Scott McCulloch	V	
Rep. Jim Rice		
Rep. Angela Russell		
Rep. Tim Sayles	V	
Rep. Liz Smith	L.	
Rep. Bill Tash	V	
Rep. Howard Toole	V	
Rep. Tim Whalen	\checkmark	
Rep. Karyl Winslow	V	
Rep. Diana Wyatt	/	
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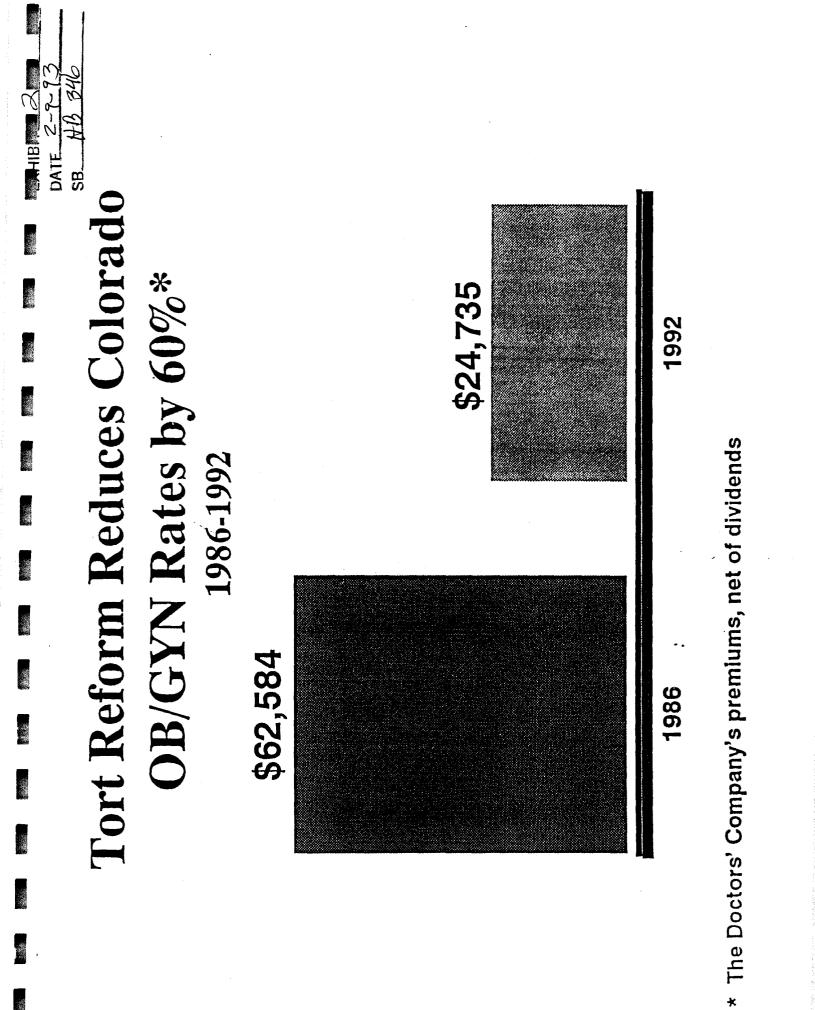
EXHIB	IT	1	
DATE	2-	9-93	
SB	HB	BHG	

· • .

Amend HB 346, as follows:

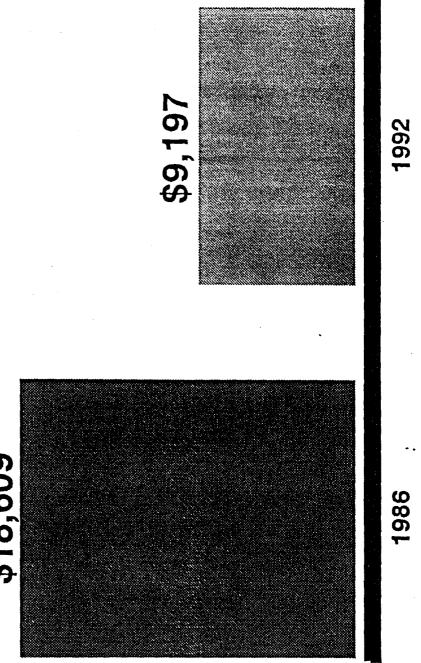
Section 1, page 3, line 5 Following: "27-6-103" Insert: "and a nurse licensed under Title 37, chapter 8"

Section 2, page 3, line 19 Following: "27-6-103" Insert: "and a nurse licensed under Title 37, chapter 8"



Medical Liability Rates by 51%* **Tort Reform Reduces Colorado** 1986-1992



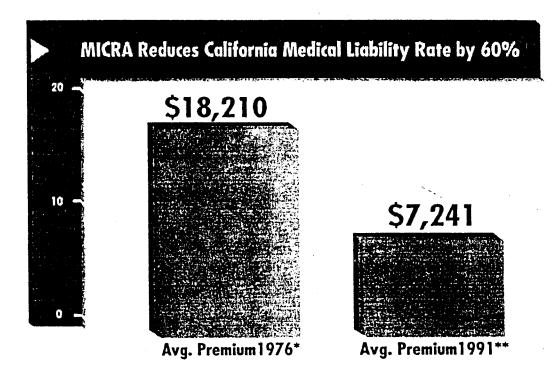


The Doctors' Company's average of all specialties, net of dividends *



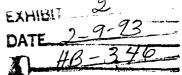
MICRA Has Cut Medical Liability Insurance Rates by 60%

Before MICRA took full effect, California physicians paid an average \$18,210 for liability insurance in 1976. By 1991, MICRA had reduced the average liability premium to \$7,241 --- a 60% savings.



---- Shown in 1991 dollars * \$7,241 average premium adjusted to 1991 dollars on the December

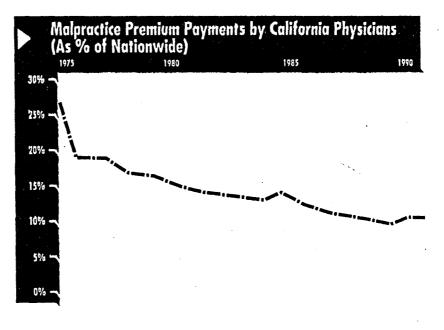
* \$7,241 average premium adjusted to 1991 dollars on the December Urban CPI Index ** Dividends from 1990 deducted from 1991 average premium



Malpractice Premium Payments for Physicians, California and Nationwide 1975 - 1990

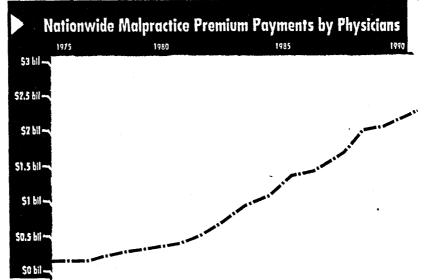
Although medical malpractice premium payments for physicians nationwide have continued increasing since 1975, those costs for California physicians decreased over that same period. The only definite factor which can account for the difference is MICRA.

MICRA has reduced malpractice premium costs for California physicians...



... while nationwide malpractice premium costs for physicians have soared.

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EXHIBIT_ DATE 2-9-93 B-341,

February 9, 1993

Exhibit No. 3 is a report from The American College of Obstetricians and Gynecologists called "RURAL HEALTH ACCESS--1992, <u>"You have a chance to make a difference"</u>. The original is stored at the Historical Society at 225 North Roberts Street, Helena, MT 59620-1201. The phone number is 444-2694.

Montana Tria

SSOCIAT

Directors:

Wade Dahood **Director Emeritus** Monte D. Beck Thomas J. Beers Michael D. Cok Michael W. Cotter Karl J. Englund Robert S. Fain, Jr. Victor R. Halverson, Jr. Gene R. Jarussi Peter M. Melov John M. Morrison Gregory S. Munro David R. Paoli Paul M. Warren Michael E. Wheat

Executive Office #1 Last Chance Gulch Helena, Montana 59601 Tel: 443-3124

February 9, 1993

Officers: Thomas J. Beers President Monte D. Beck President-Elect Gregory S. Munro Vice President Michael E. Wheat Secretary-Treasurer William A. Rossbach Governor Paul M. Warren Governor

Rep. Russell Fagg, Chair House Judiciary Committee Room 325, State Capitol Helena, MT 59620

RE: HB 346

Mr. Chair, Members of the Committee:

Thank you for this opportunity to express MTLA's opposition to HB 346, which restricts medical malpractice claims by limiting non-economic damages, contingency fees, statutes of limitations, and the liability of health-care providers. MTLA opposes the bill for the numerous reasons. Because HB 346 combines six separate, major, and controversial proposals within a single bill subject to a single hearing before this committee, MTLA summarizes its objections as briefly as possible here and welcomes any opportunity to provide additional explanation, verification, or documentation.

THE NEED FOR HOUSE BILL 346

1. Medical malpractice accounts for less than one percent of Montana's \$2 billion annual health care bill.

2. The absence of doctors in rural areas of Montana is not attributable to medical liability premiums. HB 346, by benefitting far more urban doctors and specialists than rural doctors, will not improve rural access.

3. The number of Montana doctors, including family physicians and OB-GYNs, is increasing. Unlike most other Montana industries, the health-care industry in Montana is growing vigorously.

4. The median net income of Montana doctors--after they pay liability premiums and other expenses--exceeded \$100,000 last year. Montana doctors pay a smaller proportion of their net income for liability insurance than Montana truckers do.

DATE 2-9-93 AL_#B-346

5. Two factors more than any other influence the liability premiums paid by Montana doctors: first, the potentially catastrophic nature of injuries caused by medical malpractice; second, the small pool of doctors among which to spread the insurance costs of those injuries.

6. Only one in 16 victims of medical malpractice receive compensation for their injuries. In fact, even in cases where the liability insurer labels the doctor's conduct indefensible, victims who go to trial lose as often as they win.

7. The costs of medical malpractice insurance are determined by the costs of medical malpractice. More Montanans die every year because of medical malpractice than because of traffic accidents.

8. Montana doctors and their insurance companies choose to settle the vast majority of malpractice claims, often in order to keep those settlements confidential. Since 1984, fewer than 5 percent of Montana doctors have paid multiple malpractice claims, yet that minority has accounted for more than 40 percent of all malpractice settlements and nearly 60 percent of all payments to malpractice victims. For example, one doctor--identified by the Montana Board of Medical Examiners only as Doctor 43--settled with malpractice victims for \$600,000 in 1986, \$391,000 in 1989, and \$105,000 in 1992. Yet the patients of Doctor 46 have no right to that information.

9. Doctors grossly misperceive the threat of malpractice suits.

10. HB 346 will not reduce "defensive medicine" which results from doctors' misperceptions about legal liability. To the extent that doctors' complaints about "defensive medicine" actually result from cost-containment efforts by insurers, preferred-provider organizations, managed-care organizations, and the like, HB 346 will not reduce those complaints.

11. Medical malpractice statutes in California differ significantly from those proposed by HB 346. The proposals contained in HB 346 have not reduced medical liability premiums or payments to malpractice victims, restrained overall health care costs, or improved access to medical care in California.

12. Montana has already enacted numerous so-called tort reform proposals at the request of health care providers, including drastic reductions in the statutes of limitations applicable to children (1987 and 1989); mandatory screening panels which require victims to await action by an administrative panel before filing suit (1977); immunity for negligent providers when the victim happens to be the patient of a direct-entry midwife (1989); and immunity for providers who render negligent emergency care in emergencies without compensation (1987).

THE PROVISIONS OF HOUSE BILL 346

1. Section 1, which caps non-economic damages, abandons the recommendation of the Governor's Health Care for Montanans Committee that any such caps exclude noneconomic damages for physical impairment and disfigurement. Additionally:

A. This proposal actually reduces those damages far below \$250,000 whenever multiple victims or multiple health-care providers are involved.

B. Most patients are women or children, and this proposal particularly disadvantages them. Women and children often cannot demonstrate the economic damages associated with loss of long-term, high-paying employment,

and they suffer more from such non-economic injuries as disfigurement, humiliation, emotional distress, and sterility.

C. Since this section prevents a jury from considering caps on noneconomic damages, the different statutory reductions prescribed by 27-1-702 and 27-1-703, MCA, should be deducted from any award <u>before</u>, not after, application of any \$250,000 cap.

2. Sections 2 and 4, which regulate contingency fees, interfere with private contracts which allow many low- and middle-income victims their only hope of recovery for medical malpractice. Additionally:

A. Contingency fees, unlike the fees paid to defense attorneys, do not increase malpractice awards or settlements. Plaintiffs deduct contingency fees from their recovery, while defendants and their insurers <u>add</u> attorney fees to the total cost of awards and settlements, which must then be passed on to policyholders and consumers. For example, if this proposal applied equally to all attorneys involved in medical malpractice cases and still permitted those attorneys to freely contract regarding zero-recovery cases:

Total Recovery	<u>Victim</u>	Victim Atty	Defense Atty	Policyholders
0	0	By contract	By contract	0
\$50,000	\$30,000	\$20,000	\$20,000	\$70,000
\$100,000	\$63,000	\$37,000	\$37,000	\$137,000
\$600,000	\$363,000	\$137,000	\$137,000	*************
\$1 million	\$803,000	\$197,000	\$197,000	\$1,197,000

B. This section should be amended to require <u>all</u> attorneys who receive fees in connection with medical malpractice cases to report those fees to the Montana Department of Insurance, Montana Board of Medical Examiners, and any other agency (such as the health care authorities proposed by other bills before this Legislature) responsible for evaluating health care and medical liability insurance.

3. Section 3, which mandates periodic payment of future damages, imposes additional burdens on those few victims of medical malpractice who survive litigation. Montana law already permits judges to order periodic payments when they are in the best interest of the victim.

4. Section 5, which limits liability for negligent emergency care, stands in dramatic contrast to California law, which expressly excludes hospital emergency rooms "and other places where medical care is usually offered" from the definition of a scene of an emergency. Additionally:

A. Emergency patients, almost by definition, cannot select their own physician, yet this proposal immunizes negligent emergency providers unless they have seen the patient before.

B. When negligence occurs in medical emergency, this proposal encourages hospitals, doctors, and other providers to limit their liability by refusing payment.

#8-34

C. The subcommittee of the Governor's Health Care for Montanans Project which considered this issue expressly rejected a gross-negligence standard for emergency room personnel.

5. Section 6, which limits liability for obstetric care and statutorily prescribes prenatal care, disadvantages rural women, who will find it difficult to meet the schedule of doctor visits; low-income women, who will find it difficult to afford doctor visits; and any woman refused prenatal care by a doctor for any reason.

6. Sections 7 and 8, which shorten statutes of limitations in medical malpractice cases, will actually encourage litigation by forcing attorneys to file suit on behalf of victims before completing an investigation of the facts and merits of the case. Additionally:

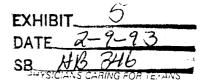
A. Most patients rely on a doctor precisely because they <u>don't</u> understand their own medical condition, and no victim can prove medical malpractice without the testimony of another doctor regarding appropriate standards of care. Yet this proposal imposes on patients a hair-trigger one-year statute of limitation, no matter how dormant the injury, no matter how gross the doctor's negligence, no matter how clear the link becomes later.

B. This proposal completely abolishes the humane exception in current law for senile or mentally ill patients, patients as incapable as children of detecting medical malpractice but much less likely to have parents or guardians protecting their interests.

Thank you for considering these comments. If I can provide additional information or assistance, please contact me.

With best regards,

Russell B. Hill Executive Director



TexasMedical Association

December 18, 1992

Mr. G. Brian Zins **Executive Vice President** Montana Medical Association 2021 11th Avenue Helena, Montana 59601

Dear Brian:

TMA President Dr. William G. Gamel told me yesterday that you have requested information on the liability study report (aka the "Tonn Report").

Enclosed is a copy of the report, plus a copy of the letter we mailed to all TMA members in early November.

Should you have specific questions about the report, please contact Kim Ross, TMA's Director of Public Affairs.

Best regards.

Sincerely,

Robert G. Mickey Executive Vice President

RGM:st Enclosures c: Kim Ross



PHYS CLANS CARING FOR TEVANS

November 1992

Dear Doctor:

A number of recent "news" articles, initiated by plaintiff attorneys, have sought to report an "absolute" conclusion from a recent preliminary report of Texas' medical liability system. The Board of Trustees wishes to provide TMA members with accurate information on the study's conclusions, its limitations, and the Association's efforts to achieve meaningful tort reform in Texas.

Formally named the "Medical and Hospital Professional Liability" report, the study is better known as the "Tonn" report, referencing the name of the consultant who prepared it.

In 1991 the Governor appointed a Health Policy Task Force to study health care in Texas and to make recommendations that could be considered by the 1993 Texas Legislature. (For a summary of the Task Force's recommendations, and TMA's positions, see pages 30-31 of the November issue of *Texas Medicine*.) Because the Task Force had no funds to conduct a study of the liability system in Texas, it asked TMA, the Texas Hospital Association and the Texas Trial Lawyers Association to underwrite an independent study. The product was the Tonn report.

One observation of the Tonn report was that total medical liability premiums are a small fraction of total health care costs. That observation is neither new nor relevant. But, using that, some plaintiff attorneys have proclaimed that liability reforms therefore are not needed. Nothing could be further from the truth. In fact, the Tonn report <u>also</u> found that:

- The existing liability "system" has little to do with efficiency or justice.
- The "system" punishes the innocent along with those who commit malpractice. The majority of medical liability claims filed in the last decade were settled without indemnity, at great personal, legal and administrative expense.
- The "system" provides no deterrence to malicious and frivolous suits.
- The "system" imposes perverse incentives to settle marginal and non-meritorious cases. Data show that many cases are settled precisely at policy limits.

Letter to the membership November 1992 Page 2

- The study found that the most reliable variable predicting if or when a physician will be sued is <u>where</u> the physician practices. Physicians in Texarkana, Beaumont/Port Arthur and the Valley have a keen appreciation of this finding. The other most reliable variable predicting a lawsuit is the physician's specialty.
- Attorneys, not patients, receive most of the money involved in a settlement or judgment. The report calculated that a third or less of the monies expended actually are awarded to the injured patients. Two-thirds goes to the lawyers on both sides and administration. Legal defense costs were estimated to be comparable to the plaintiff's legal costs. TMA has numerous field reports that the 33% contingency fee is dated -- many fees are much higher.

Without question, the Tonn study is incomplete. Further research is needed to document the following:

- Obstetric and pediatric liability: The data on the age and disposition of OB-related claims needs to be analyzed to determine an optimal statute of limitations on minors. The current 20-year liability exposure is untenable. The actuarial soundness of a no-fault approach also can be tested.
- Frivolous and non-meritorious suits: Given the unexplained variances and frequency and severity of lawsuits by jurisdiction, a careful evaluation of the cases inside these jurisdictions should lead to strategies for screening suits that are filed without merit, and alternatives to the present system for sanctioning malicious and frivolous suits. Similarly, "special relationships" between lawyers and judges should be carefully examined, along with evidence of venue shopping.
- Cost of defensive medicine: Referencing existing literature, the report says physicians' "defensive" practices add 5-15% to the cost of health care attributable to physicians. A 1992 TMA survey shows more than one-half of Texas physicians believe that as much as 29% of physician-controlled costs are to protect against litigation. Although national studies have not been able to accurately quantify these costs, TMA will continue its efforts to identify them.
- Joint and several liability: The report noted variances in levels of insurance by physician and hospital, but did not evaluate the larger cases to measure the influence the TMA-sponsored 1987 statute has had on non-meritorious settlements and judgments.
- Emergency care: The size and frequency of suits, settlements and judgments for care rendered in the emergency room, by diagnosis, should be studied.

- Role of expert witnesses: The qualifications and licenses of experts should be reviewed to determine if the 1989 TMA-sponsored statute is working, non-functional, or not being enforced.
- Mediation models: After review of the Tonn report, the Governor's Task Force encouraged the broader use of mediation, but limited it to smaller claims. Given the high legal costs associated with assessing fault, the efficacy of mediation techniques across all categories of claims should be evaluated.

Despite its limitations, the Tonn report does provide a framework for further studies, which TMA will pursue.

TMA's agenda for the 1993 session of the Texas Legislature will be the most challenging in our history. In addition to responding to the recommendations of the Governor's Health Policy Task Force, TMA will be a major participant in the sunset review of the Medical Practice Act under which the Texas State Board of Medical Examiners operates (see pages 34-37 of the November issue of *Texas Medicine*), the sunset review process of other health licensing boards (including psychologists, chiropractors and nurses) and liability reform in the areas cited above.

An aggressive, full scale TMA offense and defense is planned and funded. The political (House and Senate) and judicial (Supreme Court) environment will be a major factor in determining our success.

What TMA needs now is the full commitment of each member and each county medical society to cover all the bases next spring when the 73rd Legislature contemplates major surgery on the practice of medicine. In the interim, do not be misled by the politically motivated interpretations of personal injury lawyers who conveniently ignore both the preponderance of the study's findings and TMA's resolve to correct our state's liability "system."

Sincerely,

William & Samel und

William G. Gamel, MD President

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Alan C. Baum, MD Chairman, Board of Trustees

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CAHIBIT H HB 94 - Grav

This is a "Gray Bill". It is not an official version of the bill and is solely for purposes of showing the House Judiciary Committee what the Subcommittee on the bill recommends.

HOUSE BILL NO. 94 INTRODUCED BY HARPER

A BILL FOR AN ACT ENTITLED: "AN ACT GENERALLY REVISING THE DISCLOSURE OF CONFLICT OF INTEREST LAW AND RULES OF CONDUCT FOR LEGISLATORS; REQUIRING DISCLOSURE OF A CONFLICT OF INTEREST; PROHIBITING A LEGISLATOR FROM LOBBYING WITHIN 2 YEARS OF LEAVING OFFICE; AND AMENDING SECTIONS 2-2-104, 2-2-111, AND 2-2-112, AND 5-7-103, MCA."

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

Section 1. Section 2-2-104, MCA, is amended to read:

"2-2-104. Rules of conduct for all public officers, legislators, and employees. (1) Proof of commission of any act enumerated in this section is proof that the actor has breached his <u>a</u> fiduciary duty. A public officer, legislator, or employee may not:

(a) disclose or use confidential information acquired in the
 course of his the officer's or employee's official duties in order
 to further substantially his the officer's or employee's personal

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HB 94

1 economic interests; or

2 (b) accept a gift of substantial value or a substantial 3 economic benefit tantamount to a gift:

4 (i) which that would tend improperly to influence a 5 reasonable person in his that position to depart from the faithful 6 and impartial discharge of his the officer's or employee's public 7 duties; or

8 (ii) which he that the officer or employee knows or which that 9 a reasonable person in his that position should know under the 10 circumstances is primarily for the purpose of rewarding him the 11 officer or employee for official action he has taken.

12 (2) An economic benefit tantamount to a gift includes without 13 limitation a loan at a rate of interest substantially lower than 14 the commercial rate then currently prevalent for similar loans and 15 compensation received for private services rendered at a rate 16 substantially exceeding the fair market value of such services. 17 Campaign contributions reported as required by statute are not 18 gifts or economic benefits tantamount to gifts."

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Section 2. Section 2-2-111, MCA, is amended to read:

20 "2-2-111. Rules of conduct for legislators. (1) Proof of 21 commission of any act enumerated in this section subsection is 22 proof that the legislator committing the act has breached his <u>a</u> 23 fiduciary duty. A legislator may not:

24 (1)(a) accept a fee, contingent fee, or any other 25 compensation, except his the legislator's official compensation 26 provided by statute, for promoting or opposing the passage of

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EXHIBIT_#6 DATE 2-9-93 1 <u>HB-94</u>

HB 94 - Gray

1 legislation;

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2 (2) (b) seek other employment for himself or solicit a
3 contract for his the legislator's services by the use of his the
4 legislator's office;

5 (c) disclose or use confidential information acquired in the 6 course of the legislator's official duties in order to further the 7 legislator's personal economic interest;

8 <u>(D) ACCEPT A CIFT OF MORE THAN \$50 OR A SUBSTANTIAL ECONOMIC</u> 9 BENEFIT TANTAMOUNT TO A CIFT:

10 <u>(I) THAT WOULD TEND IMPROPERLY TO INFLUENCE A REASONABLE</u> 11 <u>PERSON IN THE LEGISLATOR'S POSITION TO DEPART FROM THE FAITHFUL AND</u> 12 <u>IMPARTIAL DISCHARGE OF THE LEGISLATOR'S PUBLIC DUTIES; OR</u>

13 <u>(II) THAT THE LEGISLATOR KNOWS OR THAT A REASONABLE PERSON IN</u> 14 <u>THE LEGISLATOR'S POSITION SHOULD KNOW UNDER THE CIRCUMSTANCES IS</u> 15 <u>PRIMARILY FOR THE PURPOSE OF REWARDING THE LEGISLATOR FOR OFFICIAL</u> 16 <u>ACTION THE LEGISLATOR HAS TAKEN:</u>

17 (D) ACCEPT OR RECEIVE, DIRECTLY OR INDIRECTLY, A GIFT OR
 18 SUBSTANTIAL ECONOMIC BENEFIT AS A GRATUITY FROM A PERSON OR ENTITY
 19 EXCEPT AS PROVIDED IN THIS SECTION;

(E) ACCEPT A GIFT OR OTHER GRATUITY IF IT COULD REASONABLY BE
 INFERRED THAT THE GIFT OR GRATUITY IS INTENDED TO INFLUENCE THE
 PERFORMANCE OF THE LEGISLATOR'S OFFICIAL DUTIES, ACTIONS, OR
 JUDGMENTS;

(F) ACCEPT A GIFT OR GRATUITY THAT THE LEGISLATOR KNOWS OR
 SHOULD KNOW UNDER THE CIRCUMSTANCES IS PRIMARILY FOR THE PURPOSE OF
 REWARDING THE LEGISLATOR FOR OFFICIAL ACTION THE LEGISLATOR HAS

TAKEN.

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(2) A LEGISLATOR MAY ACCEPT REIMBURSEMENT FOR REASONABLE

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7 (2) (3) An economic benefit tantamount to a gift includes 8 without limitation a loan at a rate of interest substantially lower 9 than the commercial rate then currently prevalent for similar loans 10 and compensation received for private services rendered at a rate 11 substantially exceeding the fair market value of the services. 12 Campaign contributions reported as required by statute are not 13 gifts or economic benefits tantamount to gifts."

14

Section 3. Section 2-2-112, MCA, is amended to read:

15 "2-2-112. ETHICAL PRINCIPLES CONFLICT OF INTEREST RULES for
 16 legislators. (1) THE PRINCIPLES IN THIS SECTION ARE INTENDED ONLY
 17 AS GUIDES TO LEGISLATOR CONDUCT AND DO NOT CONSTITUTE VIOLATIONS AS
 18 SUCH OF THE PUBLIC TRUST OF LEGISLATIVE OFFICE.

19 (2) (1) When a legislator must take official action on a 20 legislative matter as to which he the legislator has a conflict 21 created by a PERSONAL OR financial interest which that would be 22 directly and substantially affected by the legislative matter, he 23 should consider disclosing the legislator shall disclose or 24 eliminating eliminate the interest creating the conflict or 25 abstaining abstain from the official action. In making his this 26 decision, he the legislator should further consider:

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EXHIBIT #6 DATE 2-9-93 HB-7-

HB 94 - Gray

(a) whether the conflict impedes his the legislator's independence of judgment;

(b) the effect of his the legislator's participation on public confidence in the integrity of the legislature; and

(c) whether his the legislator's participation is likely to have any significant effect on the disposition of the matter.

(3) (2) A conflict situation does not arise from legislation affecting the entire membership of a class.

(4) If a (3) A legislator elects to SHALL WHO ELECTS TO disclose OR ELIMINATE the interest creating the conflict, he shall do so OR TO ABSTAIN, SHALL DO SO as provided in the joint rules of the legislature."

SECTION 4. SECTION 5-7-103, MCA, IS AMENDED TO READ:

14 "5-7-103. LICENSES -- FEES -- ELIGIBILITY. (1) (A) ANY EXCEPT 15 AS PROVIDED IN SUBSECTION (1) (B), AN ADULT OF GOOD MORAL CHARACTER WHO IS OTHERWISE QUALIFIED UNDER THIS CHAPTER MAY BE LICENSED AS A 16 LOBBYIST. THE COMMISSIONER SHALL PROVIDE A LICENSE APPLICATION 17 18 FORM. THE APPLICATION FORM MAY BE OBTAINED IN THE OFFICE OF THE COMMISSIONER AND FILED THEREIN IN THE OFFICE. UPON APPROVAL OF THE 19 20 APPLICATION AND RECEIPT OF THE LICENSE FEE OF \$10 BY THE COMMISSIONER, A LICENSE SHALL MUST BE ISSUED WHICH THAT ENTITLES 21 22 THE LICENSEE TO PRACTICE LOBBYING ON BEHALF OF ONE OR MORE 23 ENUMERATED PRINCIPALS. EACH LICENSE SHALL EXPIRE EXPIRES ON 24 DECEMBER 31 OF EACH EVEN NUMBERED YEAR OR MAY BE TERMINATED AT THE 25 REQUEST OF THE LOBBYIST.

(B) A LEGISLATOR MAY NOT WITHIN 2 YEARS OF LEAVING OFFICE BE

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EXHIBIT_<u>#6</u> DATE_<u>2-9-93</u> _____<u>#B-94</u>

HB 94 - Gray

1 <u>LICENSED AS A LOBBYIST.</u>

(2) (A) EXCEPT AS PROVIDED IN SUBSECTION (2) (B), AN
 APPLICATION MAY NOT BE DISAPPROVED WITHOUT AFFORDING THE APPLICANT
 A HEARING. THE HEARING MUST BE HELD AND THE DECISION ENTERED WITHIN
 10 DAYS OF THE DATE OF THE FILING OF THE APPLICATION.

6 (B) AN APPLICATION MAY NOT BE APPROVED IF A PRINCIPAL HAS
 7 FAILED TO FILE REPORTS REQUIRED UNDER 5 7 208.

8 (3) THE FINES AND LICENSE FEES COLLECTED UNDER THIS CHAPTER 9 SHALL <u>MUST</u> BE DEPOSITED IN THE STATE TREASURY."

-End-

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