

MINUTES

MONTANA HOUSE OF REPRESENTATIVES  
53rd LEGISLATURE - REGULAR SESSION

COMMITTEE ON HUMAN SERVICES & AGING

Call to Order: By CHAIRMAN BILL BOHARSKI, on February 17, 1993,  
at 3:00 p.m.

ROLL CALL

**Members Present:**

Rep. Bill Boharski, Chairman (R)  
Rep. Bruce Simon, Vice Chairman (R)  
Rep. Stella Jean Hansen, Vice Chair (D)  
Rep. Beverly Barnhart (D)  
Rep. Ellen Bergman (R)  
Rep. John Bohlinger (R)  
Rep. Tim Dowell (D)  
Rep. Duane Grimes (R)  
Rep. Brad Molnar (R)  
Rep. Tom Nelson (R)  
Rep. Sheila Rice (D)  
Rep. Angela Russell (D)  
Rep. Tim Sayles (R)  
Rep. Liz Smith (R)  
Rep. Carolyn Squires (D)  
Rep. Bill Strizich (D)

**Members Excused:** None

**Members Absent:** None

**Staff Present:** David Niss, Legislative Council  
Alyce Rice, Committee Secretary

**Please Note:** These are summary minutes. Testimony and  
discussion are paraphrased and condensed.

**Committee Business Summary:**

Hearing: HB 619, HB 623, HB 629, HB 614, HJR 19  
Executive Action: HB 492, HB 581, HB 355, HB 135, HB 560,  
HJR 15, HB 274, HB 614

EXECUTIVE ACTION ON HB 492

Motion: REP. DOWELL MOVED HB 492 DO PASS.

Motion: REP. DOWELL MOVED HB 492 DO PASS AS AMENDED. EXHIBITS 1  
AND 2.

Discussion:

REP. DOWELL explained the amendments.

Vote: Voice vote was taken. Motion carried unanimously.

Motion/Vote: REP. DOWELL MOVED HB 492 DO PASS AS AMENDED. Voice vote was taken. Motion carried unanimously.

EXECUTIVE ACTION ON HB 581

Motion: REP. BOHLINGER MOVED HB 581 DO PASS.

Motion/Vote: REP. SIMON moved to adopt the amendments to HB 581 with the exception of (m) and (n) in amendment 4. Voice vote was taken. Motion carried 15 to 1. REP. SQUIRES voted no.

Motion: REP. BARNHART moved to put (m) and (n) of amendment 4 back in.

Discussion:

REP. RICE said the people who helped write the bill wanted a representative of the National Association of Housing and Redevelopment Officials and a representative of the Neighborhood Housing Services in the bill. REP. RICE said she didn't want to kill the bill on the basis of (m) and (n).

REP. SIMON said it wasn't his intention to kill the bill on the basis of (m) and (n). The balance of the task force is getting tilted toward the public housing sector side of things. Montana's housing problem is broad based and doesn't affect just public housing.

Vote: Voice vote was taken. Motion carried 14 to 2. REPS. SIMON AND BERGMAN voted no.

Motion/Vote: REP. RICE MOVED HB 581 DO PASS AS AMENDED. Voice vote was taken. Motion carried unanimously.

CHAIRMAN BOHARSKI turned the chair over to VICE CHAIRMAN SIMON.

HEARING ON HB 619

Opening Statement by Sponsor:

REP. TIM WHALEN, House District 93, Billings, said HB 619 clarifies that the lien of certain medical practitioners applies only for services relating to the diagnosis and treatment of medical conditions. It is an amendment to the Health Care Lien Act. A year ago while representing an elderly lady who had

slipped and fallen in a Buttreys store, a trial deposition was taken of the medical doctor who had treated her injuries. Under law the doctor is entitled to a \$10 witness fee which was offered to him. The case was settled, and the doctor sent REP. WHALEN, who had represented the injured woman, a bill for \$500, marked for medical services, for giving his trial deposition testimony. Issues such as this are not mentioned in the Act. The purpose of the Act is to make sure that services provided by health care providers for the diagnosis and treatment of injuries or illnesses will be covered, as opposed to such things as deposition fees and collection costs of the bill.

Proponents' Testimony:

None

Opponents' Testimony:

None

Informational Testimony:

None

Questions From Committee Members and Responses:

REP. SIMON said there are some things that might not fall under diagnosing and treating, but are still within the scope of practice. REP. SIMON asked REP. WHALEN if "within the scope of practice" would be more accurate terminology than "diagnosis and treatment of a medical condition." REP. WHALEN said he had no objection to the change in wording. REP. SIMON asked David Niss, Legal Counsel, for his comments. Mr. Niss said to keep in mind that there may be a statutory definition of the scope of practice for each of the professions. If there isn't, the next step would be to find out whether the kind of act, such as testifying at a deposition, is within the scope of any of those practices. If it is, nothing has been accomplished.

Closing by Sponsor:

REP. WHALEN closed.

HEARING ON HB 623

Opening Statement by Sponsor:

REP. DUANE GRIMES, House District 75, Clancy, said HB 623 requires that a person be a resident of Montana to qualify for receipt of full general relief benefits; defines a resident as a person who has lived in Montana for at least three months, and grants reduced general relief benefits to persons new to Montana. When people move into Montana, they would received \$100 less in

general assistance instead of \$50 less, when they first arrive. The second and third month they would receive \$50 less in general assistance. The \$50 reduction in general assistance for two months would result in \$400,000 savings over the biennium.

Proponents' Testimony:

None

Opponents' Testimony:

Dan Shea, Montana Low Income Coalition (MLIC), said the coalition opposes HB 623. Mr. Shea said HB 623 is basically designed to deal with the general fund. The less general funds to give to general assistance, the better off the state is going to be when you look at the ledger books. The reason there is a general fund problem has nothing to do with general assistance. The general fund is being consumed by hospitals, nursing homes, and physicians. There would not be the crisis faced today if not for the huge amount of general funds used to get matching funds from the federal government to feed the insatiable appetites of nursing homes, physicians, and hospitals. There are no caps on their costs. In 1991 the federal government, through matching funds, spent \$170,000,000 in Medicaid alone in Montana. The state of Montana had to put up nearly \$60,000,000 matching funds in order to get that money. Those matching funds came from the general fund. The problem is not general assistance, it's the state's incapability of making the physicians, nursing homes, and hospitals cap their costs.

It may sound reasonable to say people have to be in the state three months before they can get general assistance, but what are people to do for three months if they have moved here in good faith to find a job and can't find one? This law will preclude them from getting general assistance, regardless of their good faith. They won't even be able afford to go back to the state they came from. They will be completely destitute. The bill allows for no emergency situations. This bill, as presently written, is not a fair bill.

Informational Testimony:

None

Questions From Committee Members and Responses:

REP. SQUIRES asked Linda Currie, Family Assistance Division, Social and Rehabilitation Services (SRS), what percentage of people are on general assistance and their residency duration. Ms. Currie said SRS doesn't keep statistics on people coming into the state. SRS keeps statistics on the number of applications received. Thirty-one percent of applications received for general assistance were from people who had moved into the state. Out of the 31 percent, 19 percent had been in the state one month. REP.

**SQUIRES** asked **Ms. Currie** if there were work requirements for people on general assistance. **Ms. Currie** said that every person who applies for general assistance must go through an employability classification process. If they are employable, they must participate in the Participant's Work Program (PWP) for four months and are eligible for only four months of assistance. If they are employable with barriers, they are eligible for six months assistance, but must be working on those barriers in PWP to alleviate them. People who are determined unemployable receive assistance without the time limit.

**REP. SIMON** asked **REP. GRIMES** who determines when the time starts for the three months residency requirement. **REP. GRIMES** said eligibility technicians have forms that must be completed that ask among other things, when the person arrived in Montana. **REP. SIMON** deferred the question to **Ms. Currie**. **Ms. Currie** said there is a form applicants fill out that asks how long they have been in Montana. The department accepts their declaration.

**REP. RUSSELL** asked **Ms. Currie** what the age range is for people on general assistance. **Ms. Currie** said two-thirds of the people on general assistance are male and one-third are female. The average age range is 35 to 55 years old.

**REP. BARNHART** asked **REP. GRIMES** if the intent of the bill is to save money or to keep transients out of Montana. **REP. GRIMES** said he is concerned about articles he has read about other states suggesting people move to Montana, and about the state these people to move in en masse. Adding another month to the residency requirement and reducing the amount of assistance for three months will make a substantial fiscal impact in saving the state money.

**REP. BOHLINGER** asked **Linda Currie** if there are any other benefits which newcomers to the state can receive besides general assistance and food stamps. **Ms. Currie** said the only other assistance they could receive is medical.

Closing by Sponsor:

**REP. GRIMES** closed.

HEARING ON HB 629

Opening Statement by Sponsor:

**REP. HOWARD TOOLE**, House District 60, Missoula, said HB 629 gives the Department of Health and Environmental Sciences the responsibility of design, oversight, and monitoring of construction for medical facilities construction in the state. The need for the bill is based upon the ambiguity of who is responsible for construction of medical facilities.

Proponents' Testimony:

Denzel Davis, Administrator, Health Facilities Division, Department of Health and Environmental Sciences (DHES), presented and explained a chart listing the authorities that currently deal with health care construction and the proposed changes. EXHIBIT 3.

Opponents' Testimony:

Jim Kembel, Administrator, Public Safety Division, Department of Commerce. Written testimony. EXHIBIT 4.

Jim Ahrens, President, Montana Hospital Association, said the idea of centralization makes sense, but the bill needs to be more specific than it is. The association is concerned about who will be doing the inspections and approving the plans. If centralization takes place, local reviews are still going to be needed.

Bill Egan, Montana State Conference of Electrical Workers (MSCEW), said the original intent of the medical facilities licensing bill was to create cost containment by avoiding duplication. Dealing with two different authorities in the same area, can cause problems. To create another department to handle these responsibilities is a big mistake. Mr. Egan asked the committee to give HB 629 a DO NOT PASS recommendation.

Gordon Bronson, President, Montana Society of Hospital Engineers, said the society opposes HB 629.

Robert Anderson, Department of Corrections and Human Services, said the department opposes the 1% fee tied to the administration of the process that is in the intent of the bill.

Richard Nisbet, Director, Public Works, City of Helena, read testimony from Brandt Salo, Building Director, City of Helena, EXHIBIT 5.

Tom McNab, Montana Technical Council, opposes HB 629.

Informational Testimony:

None

Questions From Committee Members and Responses:

REP. BOHLINGER asked Denzel Davis if "health care facilities" include facilities other than hospitals, such as clinics. Mr. Davis said the definition of health care facilities does not include clinics or doctors' offices. It includes long term care facilities such as hospitals, out-patient surgical centers, and medical assistance facilities.

**Closing by Sponsor:**

REP. TOOLE said the expertise of the Department of Health and Environmental Sciences is the reason for the bill. The failure of the system to provide the inspections, design work and continuity is the problem. HB 629 has the flexibility built in to enable the department to work as needed to continue the basic inspection services that everyone wants to occur. REP. TOOLE urged the committee's support of the bill.

**HEARING ON HB 614****Opening Statement by Sponsor:**

REP. WILLIAM BOHARSKI, House District 4, Kalispell, said sections 1 through 12 and section 15 will be stricken from HB 614. All of the language regarding retirement benefits is gone from the bill, and it won't come back before this committee or the floor of the House. There was a lot of discussion in the Appropriations Subcommittee on Human Services in an attempt to balance the state budget. One of the proposals was to require AFDC mothers to live with their parents if they are under the age of 18. By doing so, in most cases, they would end up ineligible for AFDC, thereby saving the state AFDC and Medicaid benefits. One of the problems associated with this is that some of the mothers have had a rough time at home, and there is documented evidence that some of these mothers have become pregnant in an effort to get out of the home. Although there would have been a provision allowing them to appeal to the department so they wouldn't be subject to that rule, it could create a time lag where the mother and child could be in a very unhealthy situation. In order to compromise, there is an option for an added provision for grandparent liability. If the father is of legal age, he is liable for child support; the mother's parents could also be liable for child support. If both the mother and father are under age, his parents and her parents could both be held liable for child support payments. The parents will be held liable for any amount of child support incurred while the mother was under 18 years of age. If the child is born as a result of a sex crime, the mother's parents would not be held liable for child support. Section 14 allows for repayment of money issued in error. Section 16 requires insurance companies to withhold certain debt payments in the amount of \$5,000 or more, if the claimant is in arrears on child support payments.

**Proponents' Testimony:**

Mary Ann Wellbank, Administrator, Child Support Enforcement Division (CSED), Social and Rehabilitation Services, said in Montana 25% of all children are born out of wedlock. Child support is the cornerstone of welfare reform. The more money CSED can collect on behalf of families, the more money the state saves on welfare benefits. Basically, HB 614 is another tool to

tighten child support and save the state money.

Opponents' Testimony:

None

Informational Testimony:

None

Questions From Committee Members and Responses:

REP. SIMON said he could envision a medical insurance payment meant to pay the doctor with the client's name on it; he asked **Mary Ann Wellbank** how that would be handled. **Ms. Wellbank** said only the claims that had the client's name on it would be intercepted. If the provider's name is on the claim, it wouldn't be intercepted. The philosophy is that child support comes first.

REP. BARNHART asked REP. BOHARSKI if pregnant teenagers had to live with their parents. REP. BOHARSKI said no, the subcommittee was debating that issue and wasn't comfortable with it because in some cases there could be hostile relationships. Instead of making the teenagers move in with the parents, the parents will be responsible for the child's support.

Closing by Sponsor:

REP. BOHARSKI said there are two ways to save on the AFDC budget. One is that there will be enough money paid in child support, or the child will move in with her parents, which will make her ineligible for AFDC. The second is if the child support isn't enough to make her ineligible for AFDC, whatever the state is obligated for in public assistance will be collected.

HEARING ON HJR 19

Opening Statement by Sponsor:

REP. WILLIAM BOHARSKI, House District 4, Kalispell, said HJR 19 urges Congress to enact legislation to provide for individual medical care saving accounts. It is an incentive for the patients to become consumers and get involved in their health care. It could have a dramatic impact on the health care crisis in this country.

Proponents' Testimony:

**Terry Frisch**, Health Care Consumer, said he has extensive experience in health care planning. He served on the Governor's Health Care for Montanans Board. Some of the advantages of a medical savings account would be that low income workers wouldn't delay receiving medical care because they can't afford a



deductible, and self-employed workers could afford coverage because they save 35% to 50% in reduced taxes on the income they place in their medical savings account. Since most workers would spend less than their account each year, balances would build up. Those balances will continue to cover workers during unemployment. Workers will no longer fear lack of health coverage because of changes in employment. The consumer decides what to buy, not someone else. There would be a significant reduction in cost because there would be an incentive for consumers to purchase wisely. As the consumer's medical account grows in value, the deductible in catastrophic care plan could be increased, thereby saving more money. Providers would receive their payment quicker. There would be no claims filing or administrative expense. **Mr. Frisch** said that after thousands of hours studying all the health care proposals, he is convinced that medical savings accounts are one of the best options. **Mr. Frisch** urged the committee's support of HJR 19.

**Joyce Brown, Chief, Employee Benefit Plan, Montana Association of Health Care Purchasers**, said the association feels strongly that one of the keys to controlling health care costs is a well informed consumer group. One of the ways to become a cost conscious, well-informed consumer is to spend your own money. That is the value of medical savings accounts. The association supports HJR 19.

**Jim Ahrens, President, Montana Hospital Association (MHA)**, said MHA supports HJR 19.

**REP. SIMON** turned the chair over to **VICE CHAIR HANSEN** for the duration of his testimony.

**REP. BRUCE SIMON, House District 19, Billings**, said one of the major problems in health care is the cost of administration. Medical savings accounts would reduce administrative costs dramatically.

Opponents' Testimony:

None

Informational Testimony:

None

Questions From Committee Members and Responses:

None

Closing by Sponsor:

**REP. BOHARSKI** closed.

EXECUTIVE ACTION ON HB 355

Motion: REP. BOHLINGER MOVED HB 355 DO PASS.

Discussion: REP. BOHLINGER presented amendments to HB 355 that strike the language which would put pharmacists licenses in jeopardy. EXHIBIT 6.

CHAIRMAN BOHARSKI asked REP. BOHLINGER if it was his intention to strike all penalties, to which he answered yes. CHAIRMAN BOHARSKI suggested that sections 2 and 3 of the bill be struck. REP. BOHLINGER agreed.

Motion/Vote : REP. BOHLINGER moved to strike sections 2 and 3 of the bill. Voice vote was taken. Motion carried unanimously.

Discussion: REP. SIMON proposed an amendment to exempt hospitals and other health care facilities from posting prescription drug prices. In most cases these pharmacies are not where the general public goes to purchase pharmaceuticals.

CHAIRMAN BOHARSKI asked the committee how it felt about directing the Board of Pharmacy to produce a list of drugs and rules for posting, rather than the committee trying to do it.

REP. DOWELL asked CHAIRMAN BOHARSKI how that could be done. CHAIRMAN BOHARSKI said the legislature would have to create a statement of intent.

REP. SIMON said the Board of Pharmacy could develop a list of the 20 top selling drugs, specify the dosages, and the amount that would be purchased. This list would be standardized in every pharmacy.

CHAIRMAN BOHARSKI said he would visit with the sponsor of the bill and the staff attorney and get the statement of intent for rulemaking authority drafted.

Motion/Vote: REP. BOHLINGER moved to add a statement of intent for rule making authority to HB 355. Voice vote was taken. Motion carried 12 to 4. REPS. HANSEN, MOLNAR, SMITH, and RUSSELL voted no.

Motion/Vote: REP. BOHLINGER MOVED HB 355 DO PASS AS AMENDED. Voice vote was taken. Motion carried 14 to 2. REPS. MOLNAR and SMITH voted no.

EXECUTIVE ACTION ON HB 135

Motion/Vote : REP. BARNHART MOVED TO TABLE HB 135. Voice vote was taken. Motion carried 11 to 5. REPS. BOHARSKI, SIMON, NELSON, MOLNAR, BOHLINGER voted no.

EXECUTIVE ACTION ON 560

Motion/Vote: REP. BOHLINGER MOVED TO TABLE HB 560. Voice vote was taken. Motion carried 13 to 3. REPS. BERGMAN, MOLNAR and BOHARSKI voted no.

EXECUTIVE ACTION ON HJR 15

Motion/Vote : REP. HANSEN MOVED HJR 15 DO PASS. Voice vote was taken. Motion carried 13 to 3. REPS. STRIZICH, BARNHART and BOHARSKI voted no.

EXECUTIVE ACTION ON HB 274

Motion/Vote : REP. STRIZICH MOVED HB 274 DO PASS. Voice vote was taken. Motion carried 15 to 1. REP. MOLNAR voted no.

EXECUTIVE ACTION ON HB 629

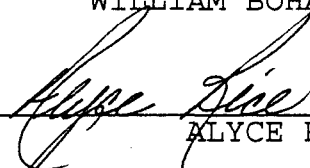
Motion/Vote: REP. SIMON MOVED HB 629 BE TABLED. Voice vote was taken. Motion carried 15 to 1. REP. DOWELL voted no.

ADJOURNMENT

Adjournment: The meeting adjourned at 7:10 p.m.



WILLIAM BOHARSKI, Chairman



ALYCE RICE, Secretary

WB/ar



HOUSE STANDING COMMITTEE REPORT

February 18, 1993

Page 1 of 1

Mr. Speaker: We, the committee on Human Services and Aging report that House Bill 492 (first reading copy -- white) do pass as amended .

Signed: \_\_\_\_\_

*Wm E Boharski*

Bill Boharski, Chair

And, that such amendments read:

1. Page 1, line 13.

Strike: "There"

Insert: "Subject to legislative appropriations, there"

2. Page 2, line 5.

Following: "services from"

Insert: "public or"

3. Page 2, line 6.

Following: "program."

Insert: "Proposals for services to be provided as part of the healthy start program must demonstrate that those services will be provided in cooperation with services offered by any child- and family- serving organizations in the community to be served."  
*MC*

Committee Vote:

Yes \_\_\_\_\_, No \_\_\_\_\_.

40090380.Hss

HOUSE STANDING COMMITTEE REPORT

February 18, 1993

Page 1 of 1

Mr. Speaker: We, the committee on Human Services and Aging report that House Bill 581 (first reading copy -- white) do pass as amended .

*Wm E Boharski*

Signed: \_\_\_\_\_

Bill Boharski, Chair

And, that such amendments read:

1. Page 2, line 20.

Strike: "the"

Insert: "a"

2. Page 2, line 24.

Strike: "Montana people's action"

Insert: "low income groups"

3. Page 3, line 1.

Strike: "and"

4. Page 3.

Following: line 1

Insert: "(m) a representative of the national association of housing and redevelopment officials;

(n) a representative of neighborhood housing services;

(o) a representative of physically disabled persons;

and"

Renumber: subsequent subsection

5. Page 3, lines 4 and 5.

Strike: ", compensated, and reimbursed "

6. Page 3, line 6.

Following: "2-15-122."

Insert: "Members of the task force may not be compensated or reimbursed from state funds for their expenses in performing task force duties."

Committee Vote:

Yes 12, No 0.

400017SC.Hss

HOUSE STANDING COMMITTEE REPORT

February 19, 1993

Page 1 of 2

Mr. Speaker: We, the committee on Human Services and Aging report that House Bill 355 (first reading copy -- white) do pass as amended .

*Wm E Boharski*

Signed: \_\_\_\_\_

Bill Boharski, Chair

And, that such amendments read:

1. Title, line 4.

Following: "AN ACT"

Insert: "REQUIRING THE BOARD OF PHARMACY TO ADOPT A RULE UNDER CERTAIN CIRCUMSTANCES; AND"

2. Title, line 5.

Strike: "THE"

Strike: "EACH"

3. Title, line 6.

Strike: "PHARMACY"

Insert: "PHARMACIES"

4. Title, lines 6 and 7.

Strike: "; PROVIDING" on line 6 through ", MCA" on line 7

5. Page 1.

Following: line 7

Insert: "WHEREAS, rapidly rising costs of prescription drugs are one of today's most serious problems facing persons on fixed or lower incomes; and

WHEREAS, even though prescription drug price increases are dictated by pharmaceutical manufacturers, there are sometimes significant differences in price for the same prescription drug among retail pharmacies; and

WHEREAS, in some instances, the ability to comparison shop for prescription drugs can be helpful to the consumer in choosing a pharmacy to patronize.

Statement of Intent

A statement of intent is necessary for this bill because [section 1] requires the board of pharmacy, under certain circumstances, to adopt a rule requiring the listing of certain prescription drugs. The legislature intends that the board of pharmacy make every effort to devise, in consultation with senior citizens, other consumer organizations, and retail pharmacists, a workable and practical system for the listing of prescription drug prices. The list should be based upon standard assumptions as to the quantity and dosage in order to facilitate comparison of prices."

6. Page 1, line 11 through page 4, line 24.

Following: "prices --"

Strike: the remainder of line 11, the remainder of section 1, and sections 2 and 3 in their entirety.

Insert: "adoption of list by rule. If the board of pharmacy finds after a public hearing that the interests of consumers will be furthered by its action, the board shall annually adopt by rule a list of 20 prescription drugs frequently prescribed for outpatient dispensing in Montana. A licensed pharmacy, other than in a hospital or nursing home, that sells prescription drugs shall monthly post its prices for the drugs on the list adopted by the board. The list must show the drugs by brand name and retail price and by generic name and retail price."

-END-



HOUSE STANDING COMMITTEE REPORT

February 18, 1993

Page 1 of 1

Mr. Speaker: We, the committee on Human Services and Aging  
report that House Joint Resolution 15 (first reading copy --  
white) do pass .

*William E. Boharski*

Signed: \_\_\_\_\_

Bill Boharski, Chair

Committee Vote:  
Yes \_\_\_\_\_ No \_\_\_\_\_.

40001430.Fsc

HOUSE STANDING COMMITTEE REPORT

February 13, 1993

Page 1 of 1

Mr. Speaker: We, the committee on Human Services and Aging report that House Bill 274 (first reading copy -- white) do pass .

Signed: \_\_\_\_\_

*William E. Boharski*

Bill Boharski, Chair

ME 100

Committee Vote:  
Yes \_\_\_\_\_, No \_\_\_\_\_.

400915SC.Hrs



Amendments to House Bill No. 492  
First Reading Copy

EXHIBIT 1  
DATE 2-17-93  
HB 492

Requested by Rep. Dowell  
For the Committee on Human Services and Aging

Prepared by David S. Niss  
February 16, 1993

1. Page 2, line 5.  
Following: "services from"  
Insert: "public or"

2. Page 2, line 6.  
Following: "program."  
Insert: "Proposals for services to be provided as part of the  
healthy start program must demonstrate that those services  
will be provided in cooperation with services offered by any  
child- and family- serving organizations in the community  
to be served."

EXHIBIT 2  
DATE 2-17-93  
HB 492

Amendments to House Bill No. 492  
First Reading Copy

For the Committee on Human Services and Aging

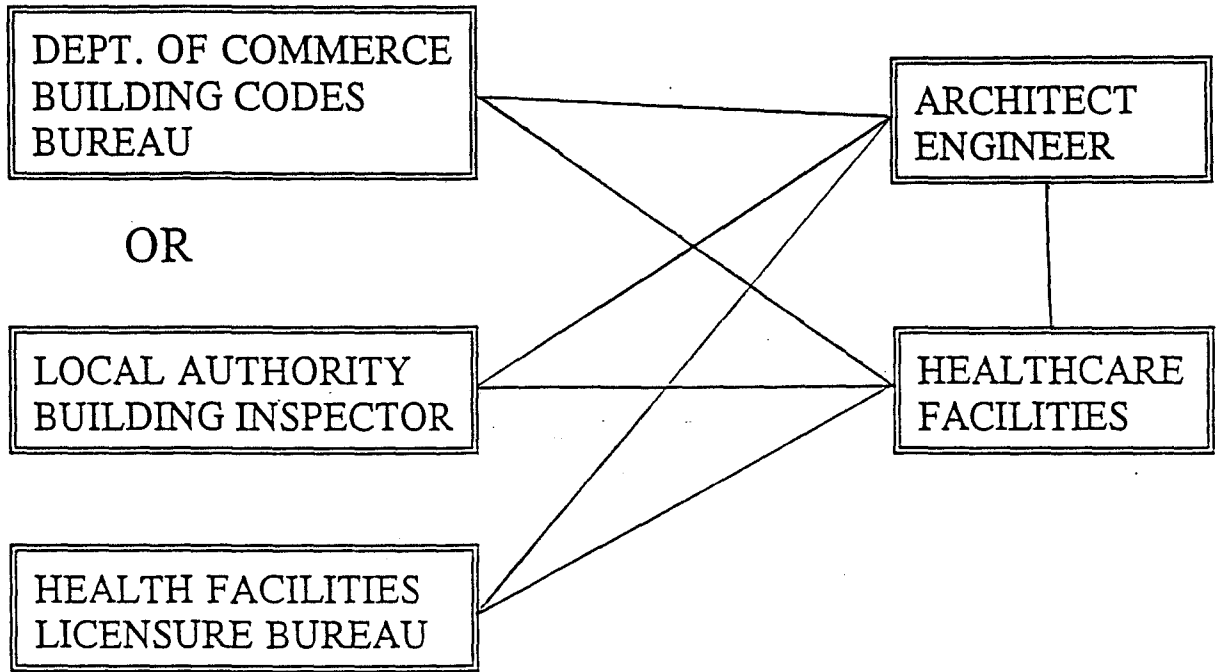
Prepared by David S. Niss  
February 17, 1993

1. Page 1, line 18.

Strike: "There"

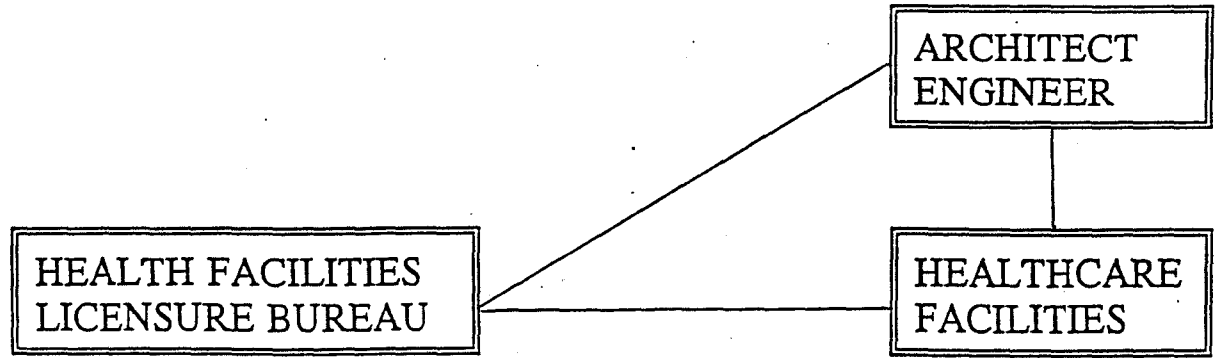
Insert: "Subject to legislative appropriations, there"

# PRESENT AUTHORITIES



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# PROPOSED AUTHORITY



DEPARTMENT OF COMMERCE  
BUILDING CODES BUREAU

PLAN REVIEWING AGENCIES

1991 UNIFORM BUILDING CODE

\* LOCAL MUNICIPALITY

\* STATE BUILDING CODE BUREAU

\* ICBO - SEATTLE

FINAL AUTHORITY

LICENSURE BUREAU - DHES

AREAS OF CONCERN

- LACK OF CONSISTENCY
- LACK OF EXPERIENCE WITH HEALTH FACILITY CONSTRUCTION.
- HEALTH FACILITY CONSTRUCTION IS DIFFERENT FROM ANY OTHER COMMERCIAL BUILDINGS WITH REGARDS TO:
  - SUB DIVISION OF SPACES
  - EXITING REQUIREMENTS
  - HEATING/VENTILATION REQUIREMENTS
  - LIGHTING STANDARDS
  - NOISE TRANSMISSION STANDARDS
  - SPACIAL REQUIREMENTS

HEALTH FACILITIES DIVISION  
LICENSURE BUREAU

PLAN REVIEWING AGENCY

USING THE  
1991 - LIFE SAFETY CODE.  
GUIDELINES FOR CONSTRUCTION AND EQUIPMENT  
OF HOSPITAL AND MEDICAL FACILITIES.  
1991 - UNIFORM BUILDING CODE.

PERFORMED BY  
DHES - LICENSURE BUREAU

FINAL AUTHORITY

LICENSURE BUREAU - DHES

ADVANTAGES TO ONE AUTHORITY

- CENTRALIZED AUTHORITY PROMOTES CONSISTENCY.
- ELIMINATE DIVERSITY OF CODE INTERPRETATION BY A VARIETY OF AUTHORITIES WITH VARYING HEALTH CARE EXPERIENCE.
- EXPERIENCED WITH HEALTH FACILITY CONSTRUCTION AND FUNCTION.
- ADDRESS ALL SPACIAL AND SPECIAL REQUIREMENTS NECESSARY FOR HEALTH CARE PROVIDERS.
  - \*ROOM SIZES
  - \*INFECTION CONTROL STANDARDS
  - \*ENVIRONMENTAL CONDITIONS
- REDUCE COST BY PROVIDING CENTRALIZED PRELIMINARY DESIGN ASSISTANCE.

EXHIBIT 3  
DATE 2/17/93  
HB 629



January 1, 1991

RECEIVED

OCT 19 1992

MDHES  
HEALTH FACILITIES DIVISION

Certified Cities

- Anaconda B, En, H, D (Deer Lodge County)
- Belgrade B, En, H, D, P
- Belt B, En, H, D
- Big Sandy B, En, H, D
- Billings B, En, H, D, El, P, M \*4 1/2 miles
- Boulder B, En, H, D
- Bozeman B, En, H, D, El, P, M \*4 1/2 miles
- Broadus B, En, H, D
- Butte-Silver Bow County B, En, H, D, El, P, M \*entire county
- Chester P
- Chinook B, En, H, D
- Choteau B, En, H, D
- Columbia Falls B, En, H, D, P, M \*1 mile
- Conrad B, En, H, D
- Cut Bank B, En, H, D
- Darby B, En, H, D
- Deer Lodge B, En, H, D \*1 mile
- East Helena B, En, H, D, El, P, M
- Forsyth B, En, H, D
- Fort Benton B, En, H, D \*1 mile
- Glasgow B, En, H, D, El, P, M
- Glendive B, En, H, D
- Great Falls B, En, H, D, El, P, M
- Hamilton B, En, H, D, P
- Hardin B, En, H, D
- Havre B, En, H, D, P, M
- Helena B, En, H, D, El, P, M
- Hot Springs B, En, H, D
- Hysham B, En, H, D
- Kalispell B, En, H, D, P, M \*3 1/2 miles
- Laurel B, En, H, D, P
- Lewistown B, En, H, D
- Libby B, En, H, D
- Livingston B, En, H, D, P, M
- Malta B, En, H, D
- Miles City B, En, H, D \*1 mile
- Missoula B, En, H, D, El, P, M, \*4 1/2 miles
- Pinesdale B, En, H, D, El, P, M
- Plains B, En, H, D
- Polson B, En, H, D, M
- Red Lodge B, En, H, D
- Richland County B, En, H, D
- Ronan B, En, H, D
- Roundup B, En, H, D
- St. Ignatius B, En, H, D, El, P, M
- Shelby B, En, H, D
- Sidney B, En, H, D
- Stevensville B, En, H, D, El, P, M
- Three Forks B, En, H, D
- Townsend B, En, H, D
- Troy B, En, H, D, M
- West Yellowstone B, En, H, D, M
- Whitefish B, En, H, D, P, M \*1 mile
- Wolf Point B, En, H, D

Codes enforced by the Jurisdiction

B	Bldg	E	Elevator	D	Dangerous Bldg
El	Elec	H	Housing	M	Mech
En	Energy	P	Plumbing	*	city jurisdiction

EXHIBIT 4  
DATE 2-17-93  
HB 629

DEPARTMENT OF COMMERCE  
PUBLIC SAFETY DIVISION



STAN STEPHENS, GOVERNOR

CAPITOL STATION

STATE OF MONTANA

HELENA, MONTANA 59620-0407

February 12, 1993

Denzel Davis, Chief  
Licensing Certification and  
Construction Bureau  
Health Services Division  
Department of Health &  
Environmental Sciences  
Room C202, Cogswell Building  
Helena, MT 59620-0901

Dear Denzel:

The Department of Commerce has reviewed LC1389 concerning the construction of health care facilities and has a number of concerns. First and foremost we do not feel that the change would improve government services nor reduce duplication.

The Department of Commerce and local governments would still be responsible for covering installation of the electrical, mechanical and plumbing systems, energy measures and passenger elevators. This would still require the customers to deal with two different entities thus causing confusion and inconvenience. In addition the current in house coordination of the Building Code Bureau's inspection activities between all disciplines is lost. The Department of Health could approve the building plans for a facility when these same plans are in violation of the mechanical, plumbing, electrical, elevator and energy codes.

The Department of Health would be duplicating the staff at Department of Commerce, since medical facilities projects are not great in number the Building Codes Bureau staff would not be reduced.

The change would permit the Department of Health to adopt codes that could conflict with those used by the Department of Commerce and Department of Justice. These two agencies currently use codes that are compatible. The original reason for centralizing codes was to do away with such conflicts. If it is your Department's intent to adopt Federal Standards there is a good chance they will in fact conflict with current state standards.

A simpler way to reduce duplication and not require any change in state statutes is for the Department of Health to simply accept a

sign off from the state or local government that the plans meet the applicable codes for the state of Montana.

Essentially what the Department of Health is asking local governments to do is to provide fire protection and other services to facilities that they have no say in when the facilities are constructed. We are quite sure that this would be unacceptable to local governments.

The Department of Commerce does not support the proposed legislation and would suggest you also contact the Department of Justice for their input.

Sincerely,



W. James Kembel, Administrator  
Public Safety Division

cc: Joseph Mazurek  
Jon Noel  
Andy Poole  
Jim Brown

5  
2-17-93  
629

MEMORANDUM

RECEIVED

TO: Dick Nisbet, Public Works Director

FEB 17 1993

FROM: Brandt Salo, Building Director *BDS*

CITY OF HELENA  
PUBLIC WORKS

SUBJ: HB 629 - Health Care Facilities

DATE: February 17, 1993

The proposal by the Department of Health to take over the review of all health care facilities would have a far reaching fiscal effect upon our local building codes program. As you can see the listing of facilities in 50-5-101 MCA, constituting a health care facility, is far-reaching and encompasses many structures encountered and reviewed by our department.

All review structure exists within the Department of Commerce into which the review of Health Care Facilities could be combined. Incorporation of NFPA 101 - the Life/Safety Code could be readily accomplished, if the provisions of the Uniform Building Code lacked the detail needed to address the various uses. Certified local jurisdictions could be provided with a code supplement applicable to review of these uses. To create an entirely new hierarchy within Health to review and permit these buildings in an effort to eliminate duplication appears to fly in face of the legislations own intent.

The Department of Health would collect a one percent fee for their review to fund their operations but the local jurisdiction must issue the building permit. This would be cumbersome at best with unresolved issues of where liability would rest; how fees would be apportioned - if at all, if a local administrative fee could be charged, etc. Timeliness of review would also be an issue as would be the convenience of field-inspections. Local jurisdictions can provide a better level of service by being available and the State Building Codes already has a staff of inspectors in the field. Health would need to dispatch inspectors to a project from Helena unless field offices were maintained and the bureaucracy and cost of government grows another notch.

I believe the proposed legislation is ill-conceived and recommend that the City of Helena oppose it. I am attaching correspondence from Gordon Bronson, Plant Services Manager at St. Peter's Hospital in Helena regarding his opinion of the services we provided on their recent 7.1 million dollar project review. Our permit fee of \$16,300 represented a modest two-tenths of one percent of the project cost. The Health Departments hierarchy and resultant fees would approximate \$71,000 which would further inflate the costs of health care to the public.

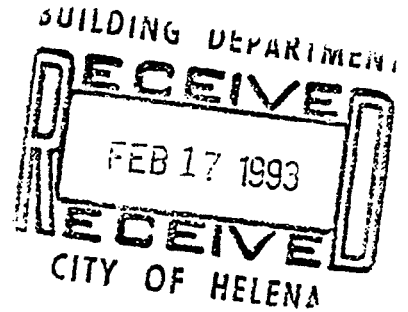
**City of Helena, Montana**



(406) 442-2480 • 2475 Broadway, Helena, Montana 59601

February 17, 1993

Brandt Salo  
Director of Building & Safety  
City County Building  
Helena, MT 59601



Dear Brandt:

St. Peter's Community Hospital received a complete, written plan review on the current 7.1 million dollar project underway on 8/13/91 from the City of Helena. The relation I have with the City concerning construction matters relating to St. Peter's Community Hospital has always been good. As you know, we try to complete as many projects as possible through our in-house construction crew and have submitted many plans for your review and comments. Plan review and comments have always been completed in a timely manner. One this I would like to see is written comments on all inspections conducted by the City. Currently all correspondence is discussed with the architect or contractor and no verbal or written comments are passed on to the owner. I have enclosed a copy of a letter I sent to the Montana Hospital Association concerning HB629. The Montana Society of Hospital Engineering is very interested in obtaining thorough review of all codes in a timely manner and would like to see the process completed by one organization, be it the City or State Department of Health. If you have any questions, contact me at 444-2103.

Sincerely,

Gordon Bronson  
Plant Services Manager

Encl: City Plan Review

cc: Jean Simpson  
Bob Olson, MHA  
Will Long  
MSHE File

EXHIBIT 5  
DATE 2/17/93  
HB 629

EXHIBIT 6  
DATE 2-17-93  
HB 355

AMENDMENTS TO HB 355

1. p 3, line 15,  
Strike: all after chapter line 15 through 17  
Insert a "." after chapter
  
2. p 4, line 7  
Strike: line 7 and upto "or" on line 8



HOUSE OF REPRESENTATIVES  
VISITOR'S REGISTER

Human Services COMMITTEE BILL NO. HB 629  
DATE 2/17/93 SPONSOR(S) Rep. Toole

PLEASE PRINT PLEASE PRINT PLEASE PRINT

NAME AND ADDRESS	REPRESENTING	SUPPORT	OPPOSE
GORDON BRONSON 2475 BROWWAY HELENA, MT	MONTANA SOCIETY OF HOSPITAL ENGINEERS ST. PETER'S COMMUNITY HOSPITAL		
Robert Anderson	DEPT OF CORRECTIONS + ILLUM SECURE 1539 11th Ave		
Richard A. Nisbet	Director of Public Works City of Helena		X
Jeff Jackson	CITY OF GREAT FALLS		X
Bruce Lyman	Justice		
Daryl C. Down	DHES.		
Walter Egan	MT. Conf. of Elect Wkrs		✓
(1) James Kembel	Public Safety Division DOC		✓
Toni McNab	Montana Technical Council		✓

PLEASE LEAVE PREPARED TESTIMONY WITH SECRETARY. WITNESS STATEMENT FORMS ARE AVAILABLE IF YOU CARE TO SUBMIT WRITTEN TESTIMONY.





