MINUTES

MONTANA HOUSE OF REPRESENTATIVES
54th LEGISLATURE - REGULAR SESSION

COMMITTEE ON HUMAN SERVICES & AGING

Call to Order: By **CHAIRMAN DUANE GRIMES**, on January 30, 1995, at 3:00 p.m.

ROLL CALL

Members Present:
Rep. Duane Grimes, Chairman (R)
Rep. John C. Bohlinger, Vice Chairman (Majority) (R)
Rep. Carolyn M. Squires, Vice Chairman (Minority) (D)
Rep. Chris Ahner (R)
Rep. Ellen Bergman (R)
Rep. Bill Carey (D)
Rep. Dick Green (R)
Rep. Antoinette R. Hagener (D)
Rep. Deb Kottel (D)
Rep. Bonnie Martinez (R)
Rep. Brad Molnar (R)
Rep. Liz Smith (R)
Rep. Susan L. Smith (R)
Rep. Loren L. Soft (R)
Rep. Kenneth Wennemar (D)

Members Excused: Rep. Bruce Simon

Members Absent: None

Staff Present: David Niss, Legislative Council
Jacki Sherman, Committee Secretary

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

Committee Business Summary:

Hearing:	HB 236	
	HB 333	
	HB 334	
	SB 150	
Executive Action:	HB 333	DO PASS (Consent Calendar)
	HB 334	DO PASS (Consent Calendar)

HEARING ON HB 333 AND HB 334

Opening Statement by Sponsor:

REP. BETTY LOU KASTEN, HD 99, said she was bringing before the committee two repealers. The first bill was HB 333 which would repeal the Mattress Act that was passed in 1915. Mattresses had to be inspected as far as fillers were concerned. She explained this was now covered under Sections 50-51, 27-30, 50-52, and 50-30. There would be no fiscal impact.

HB 334 is also a repealer on the Montana Flour and Bread Enrichment Act. This law was put into effect in the early 1970s when a state law was deemed necessary to regulate the nutritional value in flour. The standards now come under the Montana Food, Drug and Cosmetic Act. HB 334 repeals the law that no longer applies. She pointed out that the department handles just a few complaints which are already addressed under the Montana Food, Drug and Cosmetic Act.

Proponents' Testimony: None

Opponents' Testimony: None

Questions From Committee Members and Responses:

REP. JOHN BOHLINGER asked how these bills originated. **REP. KASTEN** explained these bills came up during the special session, but weren't dealt with then, so they are clean-up bills that need to be passed.

Closing by the Sponsor: **REP. KASTEN** closed on HB 333 and HB 334.

CHAIRMAN DUANE GRIMES told **REP. KASTEN** that they would place these two bills on the consent calendar and she agreed that would be the right thing to do.

HEARING ON HB 236

Opening Statement by Sponsor:

REP. WILLIAM RYAN introduced HB 236. He explained the bill was brought to him by a nursing home resident that was confined to a wheelchair but was very active. The resident wrote letters and made phone calls to legislators. In 1971, a federal rule was adopted that allowed for a personal needs allowance. If a person's income would not cover the private cost for nursing home care, that person would be expected to pay their fair share. However, with a personal needs allowance deducted from that amount, it would help. He explained the history of the personal needs allowance since 1980. He said the allowance allows for hearing aids, haircuts, newspapers, toothpaste, letters and phone calls, cable TV, etc. He pointed out the problems encountered with increases in cost of living, yet without an increase in the allowance. He handed the committee a copy of the Consumer Price Index showing cost of living increases. **EXHIBIT 1**

Proponents' Testimony:

Ed Caplis, Executive Director, Montana Senior Citizens Association and representing the Legacy Legislature, testified in support of the bill.

Rose Hughes, Executive Director of the Montana Health Care Association, representing nursing homes throughout the state, testified in support the bill. She said this was a good idea for the residents of the facility. The residents need some portion for their personal needs that are not included in the medical care of the facility. She pointed out if it was good policy for that amount to be $30 in 1971 and $40 in 1983, then in 1995 the amount should be more since costs have risen. Contributions for the cost of personal care average about $480 a month and come from whatever income they have, with Medicaid making up the difference. They can keep $40 for themselves. The amount of their income normally goes up a little each year. For instance, Social Security has a 2.7% annual cost of living increase. The patient, however, does not get an increase in allowance for personal needs. The state takes the full benefit of the cost of living increase.

Randy Barrett, Area Eight Agency on Agency, Cascade County, testified in support of the bill. He pointed out the probability of patients wanting one beer or cigarettes a day when they only had $1.30 to spend. He said there was a $2,000 cap on each individual amount and if they hit that mark, the money is put back into the Medicaid system to pay for a month's care or whatever the portion is. There are nursing home residents that are impaired or disabled enough so that they may not have full use of their money. However, there are people that are active, but are still short of money to be able to do what they want.

{Tape: 1; Side: A; Approx. Counter: 617; Comments: n/a.}

Andree Larose, Attorney, Montana Advocacy Program, testified in support of the bill. She explained the Montana Advocacy Program represents people with disabilities. She pointed out that this bill would also apply to people in institutions such as the Montana Developmental Center and Eastmont Human Service Center. She has represented clients who found it very difficult to provide for their personal needs with $40 per month. Federal regulations require that deductions be made for personal needs allowances that are reasonable amounts for clothing and personal comfort items. The $40 amount is unreasonable. She noted that there were some community activities that residents would like to participate in, but lack the funds to pay for them. **EXHIBIT 2**

Bob Torres, Montana Chapter of the National Association of Social Workers, testified in favor of the bill. He said the bill would ensure the distribution of Medicaid funds more equitably and more reasonably. The bill would restore the confidence and trust that families of senior citizens have placed in state government. It helps remove the perception that state government is in the business of denying services for reasons of bureaucratic convenience or incapability. He noted that the funds were already available, but were not being used in the best interests of these people. This would give more local control at the state level in using federal dollars. The bill would manage services dictated by Montana standards.

Sharon Hoff, Executive Director of Montana Catholic Conference, supported the bill.

Kate Cholewa, Human Services Foundation, testified in support of the bill. She explained the foundation represents individuals concerned with aging, low income, disabled, those needing job training and other services. She said the increase in the allowance was the respectable thing to do to grant greater autonomy and allow greater choices in their day to day life.

Opponents' Testimony:

Nancy Ellery, Administrator, Medicaid Services Division of Social and Rehabilitative Services, testified against the bill. **EXHIBIT 3** She said the department opposed the bill. She explained that the bill would increase the amount that Medicaid must contribute. Though the increase does not seem significant, the amount would result in a $500,000 increase to the Medicaid nursing home budget. She pointed out that the federal government sets a minimum standard for personal needs at $30. Montana's allowance is $40 with only one state having a higher amount at $42.00.

Information Testimony:

Administrative Rules on Medicaid Services, 46.12.4008 and other data pertaining to the bill. EXHIBIT 4

{Tape: 1; Side: B; Approx. Counter: 000; Comments: n/a.}

Questions From Committee Members and Responses:

REP. ELLEN BERGMAN asked **Rose Hughes** about the patients who did not spend $40 every month, and if their money accumulated could it be transferred. **Ms. Hughes** replied that the nursing facilities could not, because personal needs allowances belonged to the residents and ended up in their bank account or in the trust account in the facility. She said for those that don't use it, it goes into the trust fund and accumulates. If the amount accumulates over the $2,000 limit they would loose their Medicaid eligibility. They would go off Medicaid for a month and either use that money or spend it down below the limit. Even if the person is not active, they still buy clothes and use the allowances.

REP. BERGMAN asked if anyone went without because their $40 was gone. **Ms. Hughes** replied that they did. However, personal care items were sometimes optional, such as a haircut or a box of chocolates.

REP. CHRIS AHNER asked whether personal care items included stamps, writing materials or taxis. **Ms. Hughes** said the allowance for taxis was dependent on where they were going. If they went to doctors appointments or for medical care, the facility provides transportation.

{Tape: 1; Side: B; Approx. Counter: 145; Comments: n/a.}

REP. LIZ SMITH asked about the amendment that would allow the department to determine rules assessing each individuals circumstances. She asked if this meant the person might not be spending all their money and therefore it goes into the Medicaid fund. **REP. RYAN** explained the costs of living were going up, however he was not just asking for an additional $10. He was looking for a way to adjust the rules so each person would not be treated the same. For example, some people are on life support and may not use their allowance where others are active and need more. He pointed out that the rules say "for an individual's personal needs."

REP. L. SMITH noted that the language would help with the constitutionality of it. She said the determination of individual needs would make it somewhat inequitable, yet everyone would have the option of going to the $2,000 cap.

REP. SUSAN SMITH asked if the nursing staff of the facilities were aware of the needs of the patient if they wanted extra chocolates or extra toothpaste. **Ms. Rose** replied that sometimes they did and sometimes they did not, depending on whether that person had made their needs known. **REP. S. SMITH** asked if there was a way to tap into the community for help if the patients did not have family that contributed. **Ms. Rose** replied that those patients with families often contributed to their needs and there are volunteers in the community that do certain things. **REP. RYAN** said these types of community contributions go on every day.

REP. S. SMITH asked about the surveys showing which states paid the highest personal care allowance. **Ms. Ellery** replied that it was a regional survey showing that five states paid $30, two states paid $40 and one paid $42.

CHAIRMAN GRIMES asked about the per diem that Medicaid currently pays. **Ms. Ellery** replied that was primarily for medical care. It was also required for basic types of toiletries. However, the personal needs allowance covers such things as a special brand of shampoo or newspapers. **Ms. Ellery** clarified that the federal needs allowance rose in 1980 from $26 to $30. Montana does have the flexibility to go higher than what is considered administrative rule.

{Tape: 1; Side: B; Approx. Counter: 460; Comments: n/a.}

CHAIRMAN GRIMES asked if there were any other related services that had also increased to the Medicaid recipient in the years 1980 to 1984. **Ms. Ellery** said she was not sure, however personal needs costs have risen. **CHAIRMAN GRIMES** noted that normally when there are problems, departments with administrative rule ability can apply the rules to this problem. **Ms. Ellery** said it did not appear to be a big problem, although the department gets letters occasionally regarding the unfairness.

Kelly Williams, Nursing Facilities Services Program Manager, spoke about occasional questions received from family and patients about why that amount is not higher.

CHAIRMAN GRIMES asked when the most recent survey was taken. **Ms. Ellery** replied in December of 1993.

REP. LOREN SOFT requested a copy of a survey of all the states. He asked **REP. RYAN** about the fiscal note which indicated a minimum of $117,000 a year that would continue indefinitely. He pointed out that once given, it would be difficult to ask for it back. In ten years this would amount to $1 million. He asked how this would be funded. **REP. RYAN** replied that he did not agree with the fiscal note. He pointed out the last page of the fiscal note where he had highlighted some of the numbers. He said the amount was already allocated and existed in the budget.

{Tape: 1; Side: B; Approx. Counter: 645; Comments: n/a.}

REP. CAROLYN SQUIRES asked **REP. RYAN** about the possibility of adjusting the amount by determining the needs. **REP. RYAN** said yes, since it would vary. **REP. SQUIRES** asked whether the facility paid for specific items such as Depends, dental adhesive or contact solutions for people with cataracts. She noted that $40 would not cover these types of items. **Ms. Hughes** replied that the current law provided for the person being responsible for the difference in price for the brand that the facility provides.

REP. SQUIRES asked **Ms. Kelly** about those people that may not be capable of complaining or making their needs known. **Ms. Kelly** replied that most of the complaints were from family members and not typically from the Medicaid recipient. She said the facility had the responsibility to perform resident assessments.

{Tape: 2; Side: A; Approx. Counter: 000; Comments: n/a.}

REP. SQUIRES pointed out that SRS probably did not receive the complaints. **Ms. Hughes** replied that if there was a specific direct complaint it would find its way through the process.

REP. BILL CAREY asked how many of the 4,000 patients that received Medicaid payments reached the $2,000 cap. **Ms. Kelly** said she did not know, but that most of them spent it down before it reached that amount. **REP. CAREY** asked how the limit was approached. **Ms. Kelly** replied that a person who works with eligibility at Family Assistance may know that information.

{Tape: 2; Side: A; Approx. Counter: 129; Comments: n/a.}

REP. SOFT asked how many of the 4,000 Medicaid patients were without family. **Ms. Kelly** said there had been a survey done about a year ago for another purpose that may provide that information.

REP. BONNIE MARTINEZ asked about the balance that Medicaid provides for those on Social Security Insurance (SSI) income and still allows the $40 allowance. **Ms. Kelly** said that they were allowed to keep the $40. However, the SSI income is less so if they don't have other income they are allowed to keep only $30 which is a lower standard for those on SSI.

CHAIRMAN GRIMES asked **Randy Barrett** about the personal care needs and whether clothing was included. **Mr. Barrett** explained that he runs social transportation for a lot of the clients in the nursing home, which is not reimbursed since they are not going to a medical appointment. For example, they may want to go to a senior center. He said that Bingo was $1 a day, but that cost was prohibitive for these people. People on life support fit in well with the nursing home since they are the ones building up the amount of money up to the $2,000. He said the $2,000 should go back into a fund for those individuals that may spend over the amount, however he knows that would be taking from a private money source, but it is going back to Medicaid anyway.

CHAIRMAN GRIMES asked **Ms. Hughes** to clarify the transportation issue and her views as to what needs were needed such as clothes. **Ms. Hughes** said there were certain things included in the daily rate for which the state pays the nursing home. Transportation related to medical care is provided by the nursing home. Activities programs are also required to be provided for social events for the residents. If it was a facility-planned event outside of the facility then it would be that facility's responsibility. Other optional discretionary activities are not covered. Service organizations provide funds or donations for clothing if the person does not have family. However, the personal needs allowance can be used for clothing. She noted that cable TV costs use up the majority of the $40 a month and these people like their TV. Newspapers and magazines were also expensive in terms of the $40 allowance.

CHAIRMAN GRIMES asked if the nursing home directors viewed this as a frequent problem. **Ms. Hughes** replied this was a problem and the residents have concerns about it. This additional amount would give them a little more autonomy and dignity.

Closing by the Sponsor:

REP. RYAN closed on the bill. He said the $2,000 was a trigger amount. He pointed out that cable TV was important to people who are bedridden. He said this was about personal dignity. It could be done through administrative rules, but the only way to make them do it, is through statute. He pointed out the rulemaking authority from other states should be looked at. An individual's personal needs must be met in a dignified manner.

HEARING ON HB 150

Opening Statement by Sponsor:

SEN. MIGNON WATERMAN, SD 26, introduced SB 150. She explained the bill would allow the release of adoption records without a court order. It would allow the use of a confidential intermediary to be appointed by the court to make contact in cases where people wanted additional information. She pointed out the area of adoption has changed in recent years. The availability of information varies across the state depending on the court. The bill would facilitate the information and allow the opportunity for an intermediary.

{Tape: 2; Side: B; Approx. Counter: 000; Comments: n/a.}

Proponents' Testimony:

Betsy Stimatz, Department of Family Services (DFS), testified in support of the bill. **EXHIBIT 5** She explained the need and requests made by adoptees for medical or social histories which is now routine, prior to finalization of an adoption under 40-8-122, MCA. She pointed out that by allowing private agencies to provide the services, it would solve the problems that people have encountered with DFS with slow responses.

Marilyn McKibben, Director, Catholic Social Services, testified in support of the bill. She said Catholic Social Services had provided 40 years of service and the last 20 years had seen many people return to the agency seeking information. She said the number of people coming back had increased substantially. The attitudes regarding women who chose adoption should be reexamined as well as the rights of people who are adopted. The bill restores to those involved in adoption the basic ethical consideration that everyone deserves.

Ms. McKibben discussed the impact of current legal restrictions on adoptions. One example was a mother that had been praying for the well-being of her child for 18 years. The letter had been on file that the child had died at age three, so the mother had unknowingly been praying for a dead child for 15 years. This did not seem fair, and in fact, under current law she could not be told that the child was dead. She said that now their agency had started to open up the adoption issue and not be so secretive. Now with a fully disclosed adoption, people will no longer be shrouded in secrecy, not knowing who they are. It is unfair to keep people apart when they want to be reunited.

Current laws make it difficult for people who may wish to reunite when they are adults. People who were adopted as children are treated as if they are still babies and incapable of making decisions for themselves. People that place their babies for adoption are treated as though they did something bad and have no right to know what happened to that child. She encouraged the committee to consider the people that had been left out of the decisions.

Kimberley Kradolfer, Assistant Attorney General, appeared before the committee as an adoptive parent. She said this was an important bill. She noted that it did not require adoptions to be open. However, it provided a means for that happening if the parties when they are adults and chose to have that happen. It provides a safeguard for the court to be there for review and see that the information is not provided against the wishes of someone. She said it was important even in the interim 18 years for that information be available back and forth. As an adoptive parent, she had a very open adoption. She discussed the medical history aspect of the adoption. She pointed out the safeguard in the bill for the intermediary would prevent the unexpected appearance of the adoptee without some advance notice. Currently, opening these records are at the whim of the particular judge.

Ella Goffaney, a birth mother, testified in support of the bill. She wanted to point out the importance of the intermediary. She discussed her case and what had happened when her child had written letters to everyone in her family looking for her. She said it had been quite a shock to everyone since the birth had been secret and no one had been told at the time of the birth. She noted that her relationship had turned out good, but she would have been spared the embarrassment if an intermediary had been involved.

Mary Alice Cook, Advocates for Montana Children, testified in support of the bill.

Bob Torres, Montana Chapter of the National Association of Social Workers, testified in support of the bill. He said they were very aware of the needs and rights of adoptees and their parents. The bill is compassionate and is a common sense way to deal with the mental health of both sides involved in the adoption process.

It could be a very important bill to those families involved for genetic reasons.

Opponents' Testimony:

Mark Ricks, Director of LDS Social Services, a private adoption agency licensed in the state of Montana, testified in opposition to the bill. **EXHIBIT 6** He discussed concerns regarding the protection of adoptees, birth parents and adoptee families. He pointed out that confidentiality is a predominant principle of ethical practices. Changes in public policy are towards more openness, however that was not always true.

In the past, problem pregnancy brought shame to the birth parent. Birth fathers may never have known of the pregnancy and they had no legal rights to the child. He pointed out that today problem pregnancy is acceptable. Mainstreaming birth mothers into school systems is practiced. Birth mothers are very involved in adoption procedures and can pick an adoptive family and have contact with the family. He discussed the importance of the therapeutic process of exchanging letters and photos. Current law gives the adoptee, birth parents and adoptive couples the rights of privacy and confidentiality.

Changes should occur in the system since it also changes attitudes and philosophies. However, principles and values of the past are very important as well. He gave an example of a contact that was made with a birth mother that was not wanted. The constitutional right of privacy of must be respected for those that want it.

Mr. Ricks recommended that the records need to be opened for the sharing of medical information. Contact should be done through a voluntary mutual consent registry. Confidential intermediaries should be professional, have the expertise and be certified. He provided information on opening sealed adoption records, statistics on adopted persons and birth parents who wish to contact one another, and a form entitled, "Birth Parent Statement of Understanding - LDS Social Services." **EXHIBIT 7**

Questions From Committee Members and Responses:

REP. SOFT asked **Mr. Ricks** about the process methods, closed, partially open and open. **Mr. Ricks** replied they have those options. **REP. SOFT** asked if this bill reached into the past. He said it appeared that the options were in place now. **Mr. Ricks** replied that the bill was talking about going forward but it also could open up to the past. If it did open up to the past, then contact with the birth mothers who had asked for complete confidentiality should not be broken. Intermediaries could make contact with them. Being contacted is often a breach of their privacy.

{Tape: 3; Side: A; Approx. Counter: 000; Comments: n/a.}

REP. SOFT asked who requested the bill in the first place. **SEN. WATERMAN** replied that there were two issues being considered. The Department of Family Services gets a large number of requests pertaining to health problems, and they cannot release that information without a court order. Also, several adoption agencies requested the bill as well.

REP. SUSAN SMITH asked about women in the past that were promised confidentiality. How would the intermediary be trained adequately? **Mr. Ricks** discussed the contracts that are made with people. The person seeking the information would have to pay for it. **REP. SMITH** discussed the serious results that had occurred when the intermediary had left a note with the husband of a women that had known nothing of the child. She asked if these situations were handled very often. **Mr. Ricks** replied that these types of stories had prompted some women to share the knowledge of their past with their families.

REP. KEN WENNEMAR asked about the consequences of the intermediary not fulfilling their confidential role, and if this would be considered malpractice. **Mr. Ricks** replied that a court order would protect the intermediary since the court had ordered it. **Ann Gilkey, attorney for DFS,** said the bill was designed to prevent leaks of information. She explained that presently someone can go before a judge and ask for a court order. Many judges sign open court orders allowing the release of all information. The reason the confidentiality of an intermediary is a good idea, is that a person can find out if the birth mother would rather remain anonymous. In order to change that, they would have the show the court otherwise. Present law makes it more likely for a person to show up on the door step of their birth mother/child. The bill would help protect those people.

{Tape: 3; Side: A; Approx. Counter: 170; Comments: n/a.}

REP. BRUCE SIMON asked about the issue of "non-identifying information." He pointed out that it looked like pieces of a puzzle. People were tantalized with bits of information, a letter or picture, hobbies, educational background. He asked how this information would benefit current knowledge. **REP. WATERMAN** replied that health information was important. There are occasions when the birth mother wants the child to receive some information. However, if too much information was given the mother could be identified. **REP. SIMON** said in regard to a birth mother trying to obtain this information, what about the tantalizing information that was given. How does the list fit both criteria? Non-identifying information can be released to either the adoptee or the biological parent.

SEN. WATERMAN discussed a case of a lobbyist that she knew that said this was a good bill because even though he did not want to contact his biological parent, he would like to send some information that he was alive, well and a successful person. This bill would be a vehicle to allow that to happen. She pointed out that 20-30 years ago there were a lot of taboos, but now people do want to share information.

{Tape: 3; Side: A; Approx. Counter: 400; Comments: n/a.}

REP. LIZ SMITH asked **Marilyn McKibben** whether the identifying information could have been used to notify the birth mother of the death of her child. **Ms. McKibben** replied that she could have. The agencies act as intermediaries. She noted there were about 25 people every year for this kind of service. Adoptees are searching because they want to know their nationality, or who they look like.

REP. LIZ SMITH asked **Mr. Rick** about the enforcement of confidentiality. Would the intermediary and the non-identifying information give greater assurance for this. **Mr. Rick** replied that it would.

REP. SUSAN SMITH asked **SEN. WATERMAN** if there was a voluntary mutual consent registry in operation presently. **SEN. WATERMAN** replied that there was one through the post adoption center which is illegal. The bill would make it legal. She clarified that non-identifying information would have to be in the adoption file. The mother or family member would have placed the information in the file. Unless it was in the file, it would not be released. The court intermediary would be the next step in getting additional information. **REP. SMITH** asked about the voluntary process that would protect people and still make the medical information available rather than have the whole range of possibilities opened by divulging information through an intermediary. **SEN. WATERMAN** said it was possible. She would be bringing in another bill regarding permanency planning and foster care and adoptions. Part of that bill would provide for a study of adoption laws. However, she pointed out that a confidential intermediary is the way to go. These people would be professional staff with expertise in adoption.

REP. DEB KOTTEL asked **Ms. McKibben** about the non-identifying information. She referred to the "genealogical bewilderment" that appeared in psychology literature where 60-70% of adoptive children suffer from mild to severe depression. **Ms. McKibben** replied there were many studies being done on adoptees. The issue of identity is a tough one. She discussed the problems of not knowing their background. She pointed out how adoption was viewed in the past as secretive and bad. People have the right to know who they are.

{Tape: 3; Side: B; Approx. Counter: 000; Comments: n/a.}

REP. JOHN BOHLINGER asked **Ms. McKibben** if this would bring the Catholic Social Service in compliance with the law. She said it would. **REP. BOHLINGER** discussed the necessity of seeking the truth and would a person be able to do this without the biological background. **Ms. McKibben** replied that adoptees want to know who their birth parents are, where they came from and why they were placed for adoption. She said that presently it is fairly easy to find the birth mother, however without an intermediary this could cause problems. This bill would provide more confidentiality and protection for birth mothers.

{Tape: 3; Side: B; Approx. Counter: 120; Comments: n/a.}

REP. SOFT asked about other states and how Montana compared regarding adoption laws. **Betsy Stimatz** answered that the uniform adoption code had been adopted nationally and Montana needed to look at that to see if that should be adopted here. She pointed out that Montana has one of the most restrictive laws.

{Tape: 3; Side: B; Approx. Counter: 167; Comments: n/a.}

CHAIRMAN GRIMES asked about the penalty for release of information under current statute. **Ms. Gilkey** replied there was no penalty.

CHAIRMAN GRIMES asked about the voluntary mutual consent registry. **Mr. Ricks** replied that there are presently 26 states with registries. These registries allow adoptees to apply to identify their birth parents.

<u>Closing by Sponsor</u>:

SEN. WATERMAN closed on the bill. She pointed out there needs to be a way for people to find out this information rather than playing "keystone cops." People in an orphanage for example, might want to find siblings. This is why the language was broadened, not just keeping with parent and child. People that are in their 1960s and 1970s may want to find brothers and sisters or contact cousins, aunts and uncles.

ADJOURNMENT

Adjournment:

Duane Grimes

DUANE GRIMES, Chairman

P. Borneman

for DEB THOMPSON, Recording Secretary

DG/dt

HOUSE OF REPRESENTATIVES

Human Services and Aging

ROLL CALL DATE 1-30-95

NAME	PRESENT	ABSENT	EXCUSED
Rep. Duane Grimes, Chairman	✓		
Rep. John Bohlinger, Vice Chairman, Majority	✓		
Rep. Carolyn Squires, Vice Chair, Minority	✓		
Rep. Chris Ahner	✓		
Rep. Ellen Bergman	✓		
Rep. Bill Carey	✓		
Rep. Dick Green	✓		
Rep. Toni Hagener	✓		
Rep. Deb Kottel	✓		
Rep. Bonnie Martinez	✓		
Rep. Brad Molnar	✓		
Rep. Bruce Simon late			✓
Rep. Liz Smith	✓		
Rep. Susan Smith	✓		
Rep. Loren Soft	✓		
Rep. Ken Wennemar	✓		

THE GREAT SEAL OF THE STATE OF MONTANA

HOUSE STANDING COMMITTEE REPORT

January 31, 1995

Page 1 of 1

Mr. Speaker: We, the committee on **Human Services and Aging** report that **House Bill 333** (first reading copy -- white) **do pass and be placed on consent calendar**.

Signed: ____________________
Duane Grimes, Chair

Committee Vote:
Yes 16, No 0.

THE GREAT SEAL OF THE STATE OF MONTANA

HOUSE STANDING COMMITTEE REPORT

January 31, 1995

Page 1 of 1

Mr. Speaker: We, the committee on **Human Services and Aging** report that **House Bill 334** (first reading copy -- white) **do pass and be placed on consent calendar**.

Signed: ______________________

Duane Grimes, Chair

Committee Vote:
Yes 16, No 0.

Rep. Ryan -
Here's the info. on cost-of-living increases.
- Matt

Jan. 24, 1995

EXHIBIT 1
DATE 1/30/95
HB 236

CPI-U(Consumer Price Index-Uninstitutionalized)

1982-		1993-	
96.5	All Items	144.5	All Items
92.5	Medical Care	201.4	Medical Care
97.8	Apparel & Upkeep	133.7	Apparel & Up.

Percentage Change 1982-1993-

49%	All Items
117%	Medical Care
37%	Apparel & Upkeep

Examples of cost of living increases:

-A men's haircut in 1982 was $5 now it is $9. A woman's basic hairstyle was $8 now it is $15.50(Capital Hill Barbers).

-A small paperback book in 1982 cost $3.99. In 1995, the same style of book costs $5.99(Montana Book Company).

-A cheap pair of shoes, a pair of Keds @, cost $12.99 in 1982, now the same pair of shoes costs $19.99(K-Mart of Helena).

-A twelve month newspaper subscription in 1982 for the Independent Record was $72, now it is $144. The Billings Gazette for the same subscription in 1982 was $90 and now is $200(State Library).

Note: I apologize for not being able to get prices for items such as toothbrushes, cigarettes, shampoo, etc... Prices for these items are not held for more than one year and no one can remember accurately what they would of cost. For these items the CPI-U is an accurate guess as to what the cost would have been.

EXHIBIT 1
DATE 1/30/95
HB 234

From Sonja Jolicoeur
442 1407

Rep. Ryan - Cost of Living
Social Seecurity
% of increased since 1983.

			~~41.~~
Dic	83 -	3.5%	41.40
	84	3.5	42.85
	85	3.5	43.40
	86	1.3	45.23
	87	4.2	47.
	88	4.0	49.25
	89	4.7	51.90
	90	5.4	53.83
	91	3.7	55.44
	92.	3.0	56.88
	93	2.6	58.48
	94.	2.8	Over 60^{00}
	95		sHould Be ↑

EXHIBIT 2
DATE 1/30/95
HB 236

MONTANA ADVOCACY PROGRAM, Inc.

316 North Park, Room 211
P.O. Box 1680
Helena, Montana 59624

(406)444-3889
1-800-245-4743
(VOICE - TDD)
Fax #: (406)444-0261

January 10, 1995

Representative Duane Grimes, Chairperson
House Human Services and Aging Committee
State Capitol
Helena, Montana 59620

Re: HB 236

Mr. Chairman and Members of the Committee:

For the record, my name is Andree Larose and I am a staff attorney for the Montana Advocacy Program. Montana Advocacy Program is a non-profit organization which advocates the rights of individuals with disabilities. We are here to testify in support of HB 236.

1. The amount of $40.00 per month for personal needs money is unreasonably low. Federal regulations require that deductions be made for a personal needs allowance that is **reasonable** in amount for clothing and other personal needs of the individual. See generally, 42 CFR 435.725. It is practically impossible for an individual to purchase adequate clothing for that amount, much less have any funds available for personal comfort items or community activities.

2. With specific regard to persons with disabilities who receive Medicaid, the increase in personal needs allowance is a start to better enabling an individual to be integrated into the community as much as possible. I say it is a start because an increase to $50.00 per month still seems very low and may not even cover necessary clothing expenditures, if for example, an individual needs a winter coat and boots. However, the increase is step in the right direction to enabling greater participation in recreational activities necessary for appropriate habilitation and community integration. At a minimum, it allows people some dignity and discretion to purchase personal items at a time when they are very dependent upon the state.

We urge you pass this bill. Thank you for your time.

Sincerely,

Andree Larose

EXHIBIT 3
DATE 1/30/95
HB 236

TESTIMONY OF
THE DEPARTMENT OF SOCIAL & REHABILITATION SERVICES
HOUSE HUMAN SERVICES AND AGING COMMITTEE
(HB 236 A BILL TO DIRECT SRS TO ADOPT RULES TO PROVIDE FOR A GREATER PERSONAL NEEDS ALLOWANCE)

The Department of SRS reluctantly must oppose HB 236. House Bill 236 provides that the Department of Social and Rehabilitation Services shall adopt rules, unless prohibited by federal law, to provide for a monthly deduction of no less than $50 from an individual's gross income as an allowance for personal needs. The bill also provides that the Department shall adopt rules to provide for an annual review of the personal needs allowance and the effect of increases in the cost of living.

Currently, the Department allows $40 to be deducted from a nursing home recipient's gross income each month to provide for personal needs. The balance of the recipients income is applied to the cost of care in the nursing home.

This bill would increase the personal needs allowance from $40 to $50 and therefore increase what Medicaid must contribute to the cost of care.

The Department understands why individuals would want an increase in their personal needs allowance. The cost of purchasing personal use items has increased as has the cost of everything else. It is difficult to argue that a resident should not have more of their funds available to purchase these items and services that are not covered by other payers.

While ten dollars does not seem significant, the increase does have a significant impact on the Medicaid Program when it is multiplied by the over 4,000 Medicaid eligibiles receiving services in nursing facilities each month. This ten dollar increase will result in approximately a half a million dollar total fund increase to the Medicaid nursing home budget.

The federal government sets a minimum standard for personal needs at $30. Montana is comparable in the amount we allow for personal needs when compared to the other states in our region. Only one state allows for an amount higher than $40, that state is Washington at $42.

On behalf of the Department of Social and Rehabilitation Services we cannot support this legislation and I urge you to vote no on passage of House Bill 236. Thank you for taking the time to hold this hearing and listen to my comments.

EXHIBIT 4
DATE 1/30/95
HB 236

46.12.4007 FINANCIAL REQUIREMENTS, SSI-RELATED INSTITUTIONALIZED INDIVIDUALS (1) Individuals receiving SSI on the basis of the SSI income standard for institutionalized individuals are presumed to have met the financial requirements for medicaid eligibility.

(2) For individuals in medical institutions and intermediate care facilities who are ineligible for SSI because the SSI income standard for institutionalized individuals is lower than the SSI income standards for noninstitutionalized individuals, the financial requirements for medicaid under this subchapter as categorically needy are the categorically needy financial requirements for noninstitutionalized SSI-related individuals and couples which are set forth in subchapter 36. The provisions of this subchapter, in particular those which apply to the individual living in his own home, apply identically to the above described individual.

(3) For individuals in medical institutions and intermediate care facilities who are ineligible under subsection (2) because of excess income, the financial requirements for medicaid under this subchapter as medically needy are the medically needy financial requirements for noninstitutionalized SSI-related individuals and couples which are set forth in subchapter 38. The financial provisions of this subchapter which apply to the individual living in his own home apply identically to the above described individual.

(4) For individuals who were eligible for medicaid in December, 1973, as inpatients of medical institutions or residents of intermediate care facilities, the financial requirements for medicaid under this subchapter are the December, 1973 OAA, AB, APTD, or AABD financial requirements. A copy of the December, 1973, OAA, AB, APTD, and AABD financial requirements may be obtained from the Department of Social and Rehabilitation Services, P. O. Box 4210, 111 Sanders, Helena, Montana 59604. (History: Sec. 53-6-113 MCA; IMP, 53-6-131 MCA; NEW, 1982 MAR p. 729, Eff. 4/16/82.)

46.12.4008 POST-ELIGIBILITY APPLICATION OF PATIENT INCOME TO COST OF CARE (1) After the non-financial and resource eligibility criteria are met, the income of individuals in a residential medical institution will be applied toward the cost of care as provided in this section. This provision applies to all covered groups in this subchapter, except:

(a) individuals under age 19 who continue to receive AFDC even though they are in a medical institution or intermediate care facility, as provided in ARM 46.12.4002(1)(a); and

EXHIBIT 5
DATE 1/30/95
SB 150

DEPARTMENT OF FAMILY SERVICES

MARC RACICOT, GOVERNOR
(406) 444-5900
FAX (406) 444-5956

STATE OF MONTANA

HANK HUDSON, DIRECTOR
PO BOX 8005
HELENA, MONTANA 59604-8005

TESTIMONY IN SUPPORT OF SENATE BILL 150
Submitted by **Betsy Stimatz**
On behalf of the **Department of Family Services**

This bill would allow the department and licensed adoption agencies to release non-identifying information from adoption records to adoptees, adoptive or biological parents or extended family members of the adoptee or biological parent without requiring a court order for the release of such information. Information most often requested by adoptees is medical and social histories; information which today is routinely provided prior to finalization of an adoption and clearly an expectation of 40-8-122, MCA.

This bill would allow birth parents to have general information regarding the characteristics of the family that adopted their child and information regarding the circumstances of the adoption.

Also allowed by passage of this bill is the opportunity for adoptees, adoptive or biological parents and extended family members of the adoptive or biological family to have professional assistance through a confidential intermediary in locating an adoptee, biological son, daughter or parent. The confidential intermediary would be appointed by the court in response to a petition filed by the person requesting the search.

The confidential intermediary would be required to refrain from disclosing any information to the petitioner unless ordered to do so by the court.

The establishment of the confidential intermediary program would provide all parties the opportunity for contact through the intermediary if direct contact was not desired. If a party declined to have their identity disclosed, their identity could be disclosed only by order of the court for good cause shown.

Passage of this bill will allow private agencies to provide a service which DFS is unable to provide due to time and staff constraints. The passage of this bill will be welcomed by adoptees, birth family and adoptive family members who have been frustrated with the inability of DFS to respond in a timely manner to their request for assistance with searches.

"AN EQUAL OPPORTUNITY EMPLOYER"

EXHIBIT 6
DATE 1/30/95
SB 150

SENATE BILL #150

Chairman Grimes
Members of Committee

My name is Mark Ricks. I am a social worker with a private adoption agency in Helena, Montana.

I oppose Senate Bill 150. When an adoptee reaches 18 years of age, the adoptee, an adoptive or biological parent, or an extended family member of the adoptee or biological parent may petition the court for full disclosure or open the complete record that is maintained by the court and the adoption agency.

The purpose of sealing adoption records are to (1) protect the parties to adoption from public scrutiny, (2) protect the integrity of the adoptee, biological and adoptive family and prevent unsolicited or unwanted interference from others, (3) be consistent with all other social service agencies which hold confidentiality as a predominant principle of ethical practice.

In the past five years our agency has identified the need to change and adjust our policies and procedures to better serve adoptees, birth parents and adoptive families.

Twenty years ago a problem pregnancy brought shame to the birth parent and her family and she was sent to live with relatives, friends or to a maternity home where she lived until the birth of the baby and the baby was placed for adoption. Generally speaking a birth father never knew of the pregnancy and they had no legal rights to the child.

Today a problem pregnancy is acceptable in almost all phases of our public life. Special classes are set up for the birth mother to meet her health and well-being needs. When the baby is born, she can take the infant to school and place the child in a nursery so she can be close to the baby and take care of the baby's needs.

Today birth parents are asking for a more active part in the decisions that are made regarding adoption. Early in the pregnancy they can select an adoptive family that they would like to have their baby placed with, share identifying or non-identifying letters, meet face to face, place their baby in the arms of the adoptive couple, have contact with the adoptive family, exchange letters and receive pictures.

Because of these changes, it is time now to change public policy. That is why Senate Bill 150 is being heard today. I do support sharing non-identifying information.

Current law gives the adoptee, birth parents and adoptive couples the rights of privacy and confidentiality.

Today we want to change this law to allow open records. As we talk about changing to open records, let's also talk about what was promised to a birth mother 20-40 years ago. They were promised confidentiality and the rights of privacy. We are now talking about a court order for an adoptee, an adoptive or biological family or extended family (means an adult who is the child's grandparent, aunt or uncle, brother or sister) through an intermediary to contact the birth parents or an adoptee to determine if they would like to meet.

Recently an intermediary made contact with a birth mother whose 35 year old adopted daughter was searching for her. The birth mother pleaded for confidentiality as she had not told her husband and children of her past and ultimate fear entered her life. She had resolved within herself what she had done 35 years ago and it was a memory to her and her parents. What she thought was in the past had come back. She told the intermediary she did not want to meet her daughter and asked for privacy. The intermediary provided the adoptee with the name and address of her mother and she went to her birth mother's place of work and met her.

Today we have birth parents who request confidential adoptions. We need to be sensitive to these requests so that they too can be guaranteed rights of privacy and the opportunity to go on with their own lives.

A few years ago we realized that we could not guarantee a birth parent full confidentiality because of changing legislation. We developed a birth parent's statement of understanding that goes into the file that indicates the birth parent's understanding of future legislation.

Today birth parents are not promised full confidentiality; yesterday they were. I would ask you to consider the differences of today verses the past as change is made.

There are many birth parents and adoptees who desire and require confidentiality. The constitutional right of privacy of these individuals must be respected. One way this can happen is a voluntary, mutual consent registry which protects this right and fairly balances

EXHIBIT 6
DATE 1-30-95
SB 150

the right of all parties involved. The Montana Post Adoption Center maintains this voluntary mutual consent registry.

Thank you.

RECOMMENDATIONS:

1. Share non-identifying information.
2. The rights of the adoptee, birth parents and adoptive family of the past be given full confidentiality and rights of privacy. Should an individual of the triad desire contact with another member of the triad, that it be done through a voluntary mutual consent registry.
3. The adoptee, birth parents and adoptive families of the future who wish to have confidentiality and rights of privacy sign a birth parent statement of understanding and have it placed in their file with the court. Should they wish to change this and wish to be contacted, they may amend the court document.
4. Let adoptees, birth parents, and adoptive families know of the volunteer registry which the state already has.
5. Adoptees, birth parents and adoptive families make up the adoption family. Extended family members (adults who are the child's grandparents, aunt, uncle, brother or sister) should not be allowed to access any confidential record. Only the triad should be given this right.)
6. Confidential intermediary must have knowledge and expertise in adoption and be certified. Should they breach the confidentiality of the individuals involved they would be subject to penalties or other action which may be justifiable.

EXHIBIT 7
DATE 1/30/95
SB 150

HOW MANY ADOPTED PERSONS AND BIRTH PARENTS WANT CONTACT WITH EACH OTHER?

A joint Arizona Legislative Study Committee surveyed the various registry states and filed a report on January 6, 1992 which found:

1) Colorado reported 840 petitions filed after 17 months of registry operation representing 0.6% of the adult adoptee and birth parent population.

2) Kentucky has operated a registry for 6 years with 6,750 petitions filed over that time period representing 4% of the total adoption population. This number also includes request for non-identifying background information only. It was not possible to determine from the information given how many of the petitions for actual contact.

3) Missouri has had a program in place for 6 years with only 25 requests received in 1990. 6 x 25 = 150 petitions or 0.07% of the adult adoptee and birth parent population of the state.

4) Connecticut has had a registry since 1977 with approximately 350 petitions received annually. This represents 3.7% of the adult adoptee and birth parent population of the state.

5) Montana reports 156 requests in its 1 year registry operation or less than 0.5%.

6) North Dakota's Department of Human Resources has administered an intermediary program since 1979 for adult adoptees and since 1991 for birth parents. Approximately 100 requests are received annually for a total of 1200 requests or 4.6%. Only 60% of birth parents contacted give consent.

7) Tennessee had a total of 4,040 inquires over 14 years for a total of 2%. A portion of these were non-identifying background information only. (Note: There has been extensive media coverage (Good Housekeeping, Oprah, 60 Minutes) of a 1940 scandal of the Tennessee Children's Home Society with information of how persons adopted from the home can get information on their adoption.)

* To arrive at the percentages from the state figures provided, we took the population of each state and multiplied it times 2% (the percentage of the population that is adopted, according to the New England Genealogical Society) to arrive at the number of adoptees, and then multiplied by two to allow for one birth parent per adoptee, assuming that one birth parent might be deceased or have moved to another location. We looked at the number of registrants as a percentage of this universe of adoptees and birth parents within the state.

These figures do not take into consideration that some of the searches are initiated by siblings, biological grandparents, aunts, uncles, etc. The universe is most likely larger and the percentage of searchers actually smaller than estimated.

** The International Soundex Reunion Registry (ISRR) reported 13,873 new registrants in its "active file" in 1991. We multiplied this times 14 years (number of years the organization has been in existence) and divided this number by the number of adoptees in the U.S. (5 million). The result is 3.6% and would be accurate if all registrants were adoptees only. However, ISRR also receives registrations from birth parents, extended family members, individuals who have been separated from family through other avenues besides adoption. Therefore, the percentage of adoptees who have searched through ISRR (the first place most search groups and agencies refer individuals to when they begin to search) is far less than 3.6%.

*** The American Adoption Congress' (umbrella for search groups) reports that their affiliates receive 50,000 calls each year. Out of a universe of 10 million adopted persons (with only one birth parent) this represents 0.5%. Again, the calls to AAC are not limited to adopted persons and birth parents, so the actual percentages are even smaller.

EXHIBIT 7
DATE 1-30-95
SB 150

INFORMATION ON OPENING SEALED ADOPTION RECORDS

* The goal in adoption is to place a child in a permanent family, to which she or he will belong as much as if that child were born into the family. Such a relationship, with its rights, privileges and obligations, lasts a lifetime.

* All social service, medical legal and mental health services are based on the principle of confidentiality. It is considered unethical by all professions to divulge any information to a third party about a client without the expressed, written permission of that client.

* In adoption, the child's rights and needs are given preference to the rights and needs of the other parties. However, when the adopted person grows to adulthood, the balance shifts so all adult parties are treated equally.

* Most of the information in the adoption record is about the birth parents' and the adoptive parents' past. The medical and social history which does relate to the adopted person can be shared without identifying information and without divulging personal information about the other parties' pasts. There is no "right" to know about someone else.

* Information on the adult parties to an adoption should only be released after all the principal parties to the adoption (birth parent(s), adopted persons, adoptive parents) have come forward of their own volition and without coercion to give their expressed written consent. Since releasing or not releasing personal, confidential information will have a profound effect on the individual's life, the only one who can make that decision is the person to whom the information belongs.

* After surveying the states about "search" activity, it was estimated that fewer than 5% of adopted persons and birth parents search.

* To date 26 states have a voluntary mutual consent adoption registry, 16 states have "search and consent" or "confidential intermediary" systems and 6 states and the District of Columbia maintain confidential records which can only be accessed by court order (generally the court will request information from the party begin sought). Two states provide access to original birth certificates by adopted adults without the expressed permission of the birth parents. Hawaii makes an effort to locate the second party for 180 days before releasing the information in the sealed adoption record to the first party.

* There are still very many women who desire and require confidentiality, even today. Their wishes must be respected.

* The wishes of the birth mother at the time of adoption may not necessarily be her wishes 18 or 21 years later, when she has moved forward in life. She may still be willing to release the information, but she may want more control over how it is done so that it will create as little turmoil in her life and her family's life as possible.

* Any system which allows unsolicited contact or requires a person to come forward to reaffirm one's desire for privacy is itself a substantial intrusion.

* Every other system, besides a voluntary mutual consent registry, requires a rejection by those who do not want contact.

* One of the biggest complaints about intermediary systems is the pressure exerted on the person being sought through the use of guilt and shame, etc. Sometimes the intermediary will make a number of calls to a individual and beg the person to meet with the searcher by telling the person of the pain the searcher is experiencing.

* Allowing non-principal parties to an adoption (siblings and other relatives of the birth family) to participate in registries and search and consent systems makes it possible for the wishes of a person who does not want contact to be circumvented by a searcher's subsequent petition for contact with non-principal parties, which if granted would bring about contact with the original party sought.

* Search advocates view contact and knowledge of identifying information as a right, and a necessary "therapeutic" process. Many search advocates see adoption as pathological and believe those members of the adoption circle who do not want contact are experiencing pathological denial. An intermediary with a mindset that all problems experienced by an adopted person or birth parent are caused by a lack of contact will see it as his/her responsibility to assure that contact is made between the parties.

* Many open records advocates, including the American Adoption Congress (an umbrella organization for "search" groups), have called for a boycott of mutual consent registries in order to make the argument that they do not work. But, if it is as difficult as "search" groups clam to find out about registries, even when you are actively looking for the information, imagine the difficulty of knowing that the law has changed and you must come forward to file a "contact veto" if you are going about your life peacefully.

EXHIBIT 7
DATE 1-30-95
SB 150

irth Parent Statement of Understanding - LDS Social Services

INSTRUCTIONS: Read the following statements carefully. Initial your response in the box to the right of each statement. gn below only when you understand each statement. If you have any questions, please discuss them with your agency presentative before you sign below. You may have a copy of this document if you desire. The original statement will be retained in the agency.

	ACKNOWLEDGEMENT OF UNDERSTANDING	I Understand (Please initial)
1.	I have the right to parent my child if I choose, even if I am a minor.	
2.	There may be services and sources of financial assistance in the community which could be made available to me should I choose to parent my child.	
3.	I have the right to consult with others, such as parents, an attorney, a physician or a religious leader of my choice, and I understand that their opinion is not binding on me.	
4.	If I relinquish my child to LDS Social Services, he/she will be placed with adoptive parents who are members in good standing of The Church of Jesus Christ of Latter-day Saints.	
5.	If I relinquish my rights to my child, I will have no legal claim to my child.	
6.	Future legislation may make it possible for children relinquished for adoption to obtain knowledge regarding their birth parents.	

I understand all of the above statements. I am not under the influence of any drugs, alcohol or medication that affects my asoning or judgement. After careful consideration and of my own free will, I have decided on an adoption plan for my child, d I wish to sign the forms making adoption possible. I understand that when I sign the Relinquishment and Consent to Adoption form, all my rights and responsibilities for my child will be ended, and that my consent will be final and legally inding.

gnature of Parent	Witness
Date	Witness

I, ______________________(agency representative), representing ______________________(agency) have reviewed this document with the above-signed party. To the best of my knowledge, the above-signed party understands the information and issues which are indicated and has signed this document his/her own free will.

gnature of Agency Representative	Date

STATE OF______________________)
: ss
OUNTY OF______________________)

n the _____day of _____, 19_____, personally appeared before me______________________, birth parent, and ______________________. gency representative, who signed the foregoing document in my presence and who swore or affirmed to me that their signatures are voluntary.

Notary Public

Residing at: ______________________

HOUSE OF REPRESENTATIVES
VISITORS REGISTER

Human Services & Aging DATE 1-30-95

BILL NO. SB150 HB236 HB333 HB 334 SPONSOR(S)

PLEASE PRINT **PLEASE PRINT** **PLEASE PRINT**

NAME AND ADDRESS	REPRESENTING	Support	Oppose
Ella Gaffney	self	150 ✓	
Randy Barrett	Area VIII AAA	✓	
Betsy Stimatz	DFS	150 ✓	
SHARON HOFF	MT CATH CONF	150 & 236	
Marilyn McKibben	Catholic Social Services	150 ✓	
[illegible]	LDS Soc Ser		150 ✓
ROBERT TORRES	MT. chapt - NASW	150 & 236	
Kim Kradolfer	Adoptive Parent	SB 150	
Nancy Ellery	SRS - Medicaid	~~HB236~~	HB236
Rose Hughes	Mt Health Care	HB236 ✓	
Mary Alice Cook	adv. for MTS Children	150 & 236 ✓	
Dick Baumberger	Self	✓	
Ed Caplis	MSCA	236 ✓	

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

HR:1993
wp:vissbcom.man
CS-14

HOUSE OF REPRESENTATIVES
VISITORS REGISTER

Human Services & Aging DATE 1-30-95

BILL NO. SB150 SPONSOR(S)
HB236 HB334 HB333

PLEASE PRINT **PLEASE PRINT** **PLEASE PRINT**

NAME AND ADDRESS	REPRESENTING	Support	Oppose
Ann Gilkey	DFS	X SB 150	
Andrée Larson	Mont. Advocacy Prog.	✓HB236	
Kate Cholewa	Human Services Found.	HB236	

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

HR:1993
wp:vissbcom.man
CS-14