

MINUTES

MONTANA HOUSE OF REPRESENTATIVES 54th LEGISLATURE - REGULAR SESSION

COMMITTEE ON HUMAN SERVICES & AGING

Call to Order: By **CHAIRMAN DUANE GRIMES**, on March 15, 1995, at 2:40 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. Bruce T. Simon (R)
Rep. Liz Smith (R)
Rep. Susan L. Smith (R)
Rep. Loren L. Soft (R)
Rep. Kenneth Wennemar (D)

Members Excused: None

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:	SB 388	
Executive Action:	SB 209	DO CONCUR AS AMENDED
	SB 236	DO CONCUR AS AMENDED
	SB 223	DO CONCUR
	SB 158	DO CONCUR
	SB 134	DO NOT CONCUR AS AMENDED

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

HEARING ON SB 388

Opening Statement by Sponsor:

SEN. JOHN HARP, SD 42, Kalispell, stated that this is a bill providing for an integrated Medicaid Managed Care Program.

Proponents' Testimony:

Bob Olson, Montana Hospital Association, felt that a managed care program would give the Department of Social and Rehabilitation Services (SRS) a direction to pursue. Statutory provisions need to added. The current requirements will remain the same for insurance companies and in Section 3 language was added to create a managed care community network for rural areas. It is intended to promote a statutory framework. It is not intended to put any barriers in the way of the department.

Nancy Ellery, Department of Social and Rehabilitation Services, submitted written testimony. EXHIBIT 1

Steve Browning, Montana Hospital Association, submitted written testimony on behalf of SEN. HARP. EXHIBIT 2

Opponents' Testimony: None

Informational Testimony: None

{Tape: 1; Side: A; Approx. Counter: 190; Comments: NA.}

Questions From Committee Members and Responses:

REP. TONI HAGENER asked for expansion on Mr. Olson's comments regarding better improved connections in rural areas. He stated that section 3 of the bill allows for an entity called the Managed Care Community Network. Some of the smaller communities may not have the volumes of Medicaid clients to manage that number of people. Those communities have the opportunity to network together and form a business arrangement with the state in the managed setting.

REP. HAGENER asked how the business arrangement would work.

Mr. Olson said they could draw upon the experience of other states. There could be a network formed between the physicians and the county health department and they could approach the state with their propositions without having the trappings of an insurance company. It would give the flexibility to rural communities to become managed care entities without having to form an insurance company.

REP. CAROLYN SQUIRES asked if the application review fee that could be charged might be a certificate of need.

Mr. Olson explained that the fee was put in to inform any organization that might form a network that they will provide the commissioner with an application fee for funding needed.

REP. SQUIRES asked for clarification on what was meant in the bill on page seven line 16.

Mr. Olson gave the example that if there was an organization that provides medical services, but has religious objections to certain services that are covered by Medicaid, they have to tell the recipient that they don't provide those services; however, the recipients do have an entitlement to get them and the providers are financially obligated to do them.

REP. SUSAN SMITH inquired if the mental services covered by a managed care organization would interface with the other system.

Ms. Ellery stated that the way it is designed now the mental health managed care is a separate managed care system and it needs to be integrated by making sure that there is a communication system between the physical health side and the mental health side.

CHAIRMAN GRIMES asked if managed mental health care is not successful in the 11-15 waiver, would it revert to the 19-15 waiver.

Ms. Ellery replied that if they did not get the section 11-15 waiver which is the research and demonstration waiver approved they would still plan to go to a managed mental health system but it would be under the 19-15B waiver which is a Medicaid system that would not include the other population. If that is not successful then mental health would come in under the HMO program.

CHAIRMAN GRIMES understood that the community service providers would have a lot of responsibility and if mental managed care was placed in the program it would be taking them out of contracted services and splitting them up regionally.

Ms. Ellery explained that it is still a statewide program that allows the managed community care network to be on a local basis.

REP. S. SMITH asked about the 100 pages of rules that were included in number 2 of the fiscal note.

SEN. HARP said that the auditor was included as an independent party to act as gatekeeper.

Closing by Sponsor:

SEN. HARP closed prior to the committee's questioning as he had to be present at another hearing.

Questions From Committee Members and Responses:

REP. HAGENER inquired if this would allow certain medical providers to exclude Medicaid patients. **Ms. Ellery** responded that the bill only related to Medicaid managed care so providers of managed care would not be allowed to exclude individuals. They cannot discriminate against Medicaid patients who are eligible to enroll in the system.

REP. CHRIS AHNER asked if Medicaid patients could be excluded now. **Ms. Ellery** said that if someone was not enrolled as a Medicaid provider they could do whatever they wanted.

REP. LIZ SMITH inquired if there was going to be a single entity that would do this managed care that includes the mental health. **Ms. Ellery** replied that it was easier to think of the bill in relation to physical health and not mental health. SB 223 will deal with the managed mental health system. There are three licensed HMOs in the state and the state will contract with them and give them a set fee every month for everyone who is enrolled in their program and they will manage the care for that population.

REP. L. SMITH clarified that the bill is needed primarily for HMOs to be providers under a managed care system and the independent auditor establishes the criteria for the rules that HMOs would have to follow.

Ms. Ellery stated that there are already many statutes and rules relating to how HMOs operate in the state. They will develop criteria for the community care networks.

REP. HAGENER inquired again about the exclusion of Medicaid patients. **Mr. Olson** explained that in Montana Medicaid patients are excluded from HMOs but this bill would allow them to be served. There are federal requirements for HMOs that does not allow them to take more Medicaid patients than a ratio of 75% Medicaid to 25% privately paid. Those who are not able to get in, get their services managed through the Passport to Health Program.

CHAIRMAN GRIMES asked when the guidelines were developed was consideration given to some of the successful programs in other states that this is modeled after and which group of the legislature helped study this issue.

Ms. Ellery replied that they saw what ideas to follow and also what ideas not to implement. The program in Montana was primarily developed off the program in Illinois. Authority was given during the special session to the department in conjunction with an advisory group to expand managed care.

REP. SQUIRES explained that the two entities needed to be split up so there would be a more even study between mental and physical health.

{Tape: 1; Side: A; Approx. Counter: 895; Comments: NA.}

EXECUTIVE ACTION ON SB 209

Motion: REP. DEB KOTTEL MOVED THAT SB 209 BE CONCURRED IN.

{Tape: 1; Side: B; Approx. Counter: 00; Comments: NA.}

Motion: REP. DEB KOTTEL MOVED TO AMEND SB 209.

Discussion:

REP. KOTTEL explained that the first amendment would allow the department to make a decision on a case-by-case basis and not an automatic extension.

CHAIRMAN GRIMES mentioned that the sponsor was not opposed to the amendment.

REP. JOHN BOHLINGER supported the amendment as well as the bill and his constituents supported them as well.

CHAIRMAN GRIMES asked if "victim of domestic violence" was defined in the bill.

REP. KOTTEL replied that it was just as defined as an "individual of advanced age" and the social worker would make that type of determination.

REP. BRAD MOLNAR talked about verifiable illness and how domestic violence might not be seen as it might have occurred five months ago.

REP. KOTTEL stated that one reason to move to this program is because it would stop the rigid rules that allow people to get through in terms of loopholes and allows social workers to plan case-by-case on an individual basis over a period of time.

REP. BRUCE SIMON explained that there were many aspects to domestic violence and it can be very complicated. It could be in the form of threats, sexual abuse, mental and physical.

REP. SUSAN SMITH asked if they were operating under the assumption that victims are unable to cope with their lives and therefore must have assistance.

REP. KOTTEL said they were not and there are criteria for a social worker to look at in order to tailor a program geared for self-sufficiency.

REP. BONNIE MARTINEZ asked what would qualify the average social worker to determine all the information and prepare them for the situations they might run into.

REP. KOTTEL explained that this is not a counseling session but a program for the social worker to put together a program of entitlements that would move the person toward self-sufficiency.

REP. SIMON reiterated what the amendment entails.

Vote: The motion carried 14-2 with REPS. MARTINEZ and S. SMITH voting no.

Motion: REP. DEB KOTTEL MOVED HER SECOND AMENDMENT TO SB 209.
EXHIBIT 3

Discussion:

REP. KOTTEL explained that the amendment had to do with post-secondary schooling as part of the community service in the Pathways Program.

REP. MARTINEZ inquired as to how the schooling would be paid.

REP. KOTTEL answered that however it was being paid before the recipient went into the Pathways Program was how it would be paid after that. The schooling from this program would not be a burden on the state.

REP. S. SMITH asked if the recipients of aid who are going to school should not be required to work on top of that.

REP. KOTTEL stated that in her area family values were impeded by the amount of part-time jobs a family had to keep in order to get by and not being able to spend time with their children.

REP. BOHLINGER reiterated his support for this issue and the amendment.

REP. SQUIRES thought that the key point was that the community shall determine whether post-secondary education is an acceptable community service. There are still restrictions and guidelines that need to be followed.

CHAIRMAN GRIMES clarified that this is in regards to community service that exists after the two-year, eighteen-month time frame.

REP. MOLNAR asked why others should carry the extra burden so that those on government programs don't have to do community service so they can be at home with their kids.

REP. KOTTEL stated that she wanted to allow the flexibility when necessary for those people to have opportunities available for them.

REP. MOLNAR stated his point was that they need to give back to the community as the community is giving to them and have been giving for two years.

REP. KOTTEL said that some communities may not waive community service and in some areas there may not be any community service to perform. This is also a monetary issue as when these people are out doing community service and day care is being provided for them. There is a cost for taxpayers to have them perform community service.

REP. DICK GREEN said that he was opposed to the amendment because they say it is not an expansion of benefits when in reality it is.

REP. KEN WENNEMAR commented that it would be important to allow local control for the community to decide and they have the power to say yes or no.

REP. SQUIRES clarified that community service would go into effect for a two-parent family after 18 months and after two years for a single parent family. If they don't get off the system at the end of the program they must do community service and some benefits will be provided including providing child care while they perform the community service. The additional money needed for the expansion of daycare will result in an increase in the budget for the bill.

Penny Robbe, SRS, concurred with the statements.

REP. BOHLINGER felt that it is in the best interest of the communities that continuing education be considered as an option to become a productive taxpaying member of society.

Vote: The motion failed 8-8 with REPS. BOHLINGER, SQUIRES, AHNER, CAREY, HAGENER, KOTTEL, SIMON and WENNEMAR voting yes.

{Tape: 2; Side: A; Approx. Counter: 00; Comments: NA.}

Motion: REP. DEB KOTTEL MOVED HER THIRD AMENDMENT TO SB 209.
EXHIBIT 4

Discussion:

REP. KOTTEL mentioned that this amendment was not approved by the department and it covers the issue of giving two-parent families the same 24-month time period as the single parent families have to be on the Pathways Program. She felt that there should not be any incentives given for families that are broken up.

REP. GREEN stated that he opposed the amendment.

REP. WENNEMAR spoke in favor of the amendment and believed that family values need to be supported.

REP. MARTINEZ stated that welfare does not keep the family together but in fact usually breaks up the family. They are often better off without the father and being on welfare. There are more benefits to being on the welfare system and so the family values take a back seat.

REP. S. SMITH gave personal testimony regarding domestic abuse in her home. All the programs that she investigated throughout the social services system would have held her back and settled for mediocrity. People need the opportunity for personal initiative.

REP. KOTTEL said she doesn't want that possible extra six months to ever be the cause of a break up in the family.

REP. MARTINEZ stated that there are exceptions where people are in real need and then get off the system as soon as they are able.

REP. S. SMITH asked if subsection (1) on line 22 on page six wouldn't address the situation where two parents in the family might have multiple illnesses.

REP. KOTTEL replied that they would then go off the regular program and go on the extended Pathways program.

Vote: The motion failed 5-10 with REPS. BOHLINGER, CAREY, HAGENER, KOTTEL, and WENNEMAR voting yes.

{Tape: 2; Side: A; Approx. Counter: 420; Comments: NA.}

Motion: REP. CAROLYN SQUIRES MOVED HER FIRST AMENDMENT TO SB 209. EXHIBIT 5

Discussion:

REP. SQUIRES stated that the amendment would make sure that the community service work must be meaningful work and learning something in the process.

REP. BOHLINGER supports the amendment because the idea of meaningful work and providing skills that will provide for future employment is very important. People need to learn to be responsible and they will be able to with these means.

CHAIRMAN GRIMES asked if daycare work was considered meaningful and what would not be considered meaningful work.

REP. SQUIRES said that daycare was meaningful work and that picking up cans would not be considered meaningful work.

REP. BERGMAN asked why picking up cans was not meaningful.

REP. SQUIRES replied that these people have the need to learn how to be productive citizens and although picking up cans is not demeaning they need to learn how to progress up through the process with transferrable skills to be able to get off the system.

REP. MARTINEZ gave her history of how and what she accomplished by starting at the bottom and working up.

REP. S. SMITH mentioned that not all jobs were meaningful for people who were not on the system and maybe they needed the motivation to go on to something else.

Vote: The motion failed 5-11 with REPS. BOHLINGER, SQUIRES, CAREY, HAGENER, and WENNEMAR voting yes.

{Tape: 2; Side: A; Approx. Counter: 700; Comments: NA.}

Motion: REP. SQUIRES MOVED HER SECOND AMENDMENT TO SB 209.
EXHIBIT 6

Discussion:

REP. SQUIRES explained that the community service performed by the welfare recipients may not displace public or private employees in their employment.

REP. BERGMAN clarified that no one could be fired in order to take on someone for the pre-service work.

REP. SQUIRES replied that it could happen if it was decided that it would be better to get the community service person rather than keep the employee on.

REP. L. SMITH asked who was being referred to.

REP. SQUIRES said that public and private sector employers may take advantage of that opportunity.

REP. WENNEMAR supported the amendment as he sees a lot of work in restaurants that could be done by community service workers and bump others out of their jobs.

Vote: Voice vote was taken. The motion failed.

Motion: CHAIRMAN GRIMES MOVED THAT SB 209 BE CONCURRED IN AS AMENDED.

Discussion:

REP. MOLNAR mentioned that he was going to vote for SB 209 only because it was better than what was in place now.

REP. MARTINEZ opposed the bill as the system has changed so much and what is needed is real reform.

REP. S. SMITH agreed that this is not the best answer but it is better than what is in place now.

REP. L. SMITH clarified that the level of eligibility is 200% and asked if there was an increase.

CHAIRMAN GRIMES thought there was not an increase in eligibility.

REP. GREEN opposed the bill.

{Tape: 2; Side: B; Approx. Counter: 00; Comments: NA.}

CHAIRMAN GRIMES said that two years ago he and Mr. Niss tried to expand residency requirements in regard to welfare so the out-of-state people would be limited.

REP. BOHLINGER felt that the attempt was being made to move people off welfare and into life. It is a system that will help build a sense of dignity and self respect.

REP. SOFT stated his concern as to what types of measurements and outcome studies are going to be in place so that it can be seen what has or has not been done.

Ms. Robbe stated that they are contracting with the University of Montana to conduct an independent exhaustive evaluation of the project and welfare reform that will be outcome based.

REP. SIMON stated that this was a reasonable attempt to get some of the people out of the system and independent.

Motion: Motion carried unanimously.

{Tape: 2; Side: B; Approx. Counter: 190; Comments: NA.}

EXECUTIVE ACTION ON SB 223

Motion: REP. LOREN SOFT MOVED THAT SB 223 BE CONCURRED IN.

Discussion:

REP. SOFT stated that there would be a few risks involved for everyone with this welfare reform package. Managed care services require people to perform. By going right up to the 200% poverty level instead of phasing it in, expansion services will be able to be provided.

CHAIRMAN GRIMES clarified that mental health care is being changed to a managed care system. Poverty will be raised to 200%. General funding is being all put together to get more

federal dollars. A waiver is needed that will separate the mental health care services from all the rest.

REP. KOTTEL believed that this program will result in better coordinated services and increase better access to mental health care. The standard of care will rise also.

REP. SOFT clarified that the expansion services are in the area of mental health only. The sliding scale will be in effect for recipients to give their share.

REP. MOLNAR asked what the percentage of poverty levels were in bordering states. He raised the issue of people in bordering states coming over to Montana because of the higher poverty level.

CHAIRMAN GRIMES replied that community providers are the neutral party because they will be providing the services. This program will enable them to be better providers and more competitive and in tune to the needs of the clients.

REP. HAGENER supported the bill but stated her concern that a private management agency in an attempt to economize and make a profit will cause havoc in rural areas. Rural areas should not be overlooked in the development of these programs and services.

Vote: The motion carried 12-4 with REPS. MARTINEZ, MOLNAR, L. SMITH and S. SMITH voting no.

{Tape: 2; Side: B; Approx. Counter: 820; Comments: NA.}

EXECUTIVE ACTION ON SB 236

Motion: REP. JOHN BOHLINGER MOVED THAT SB 236 BE CONCURRED IN.

Discussion:

REP. BOHLINGER stated that 62% of the patients in nursing homes are on Medicaid and that some of the people on Medicaid are not poor. SB 236 is a way to recapture some of the public's investment in these people who have assets.

REP. GREEN supported the bill and said that anyone who can pay their bills ought to.

REP. L. SMITH opposed the bill and stated that the pressure should not always be coming from the state. It is not an incentive and there should be more support for people making these decisions.

{Tape: 3; Side: A; Approx. Counter: 00; Comments: NA.}

REP. MARTINEZ described what it is like for persons with a spouse in a nursing home and how they are made to spend all their spouse's assets down to \$2,000 and keep a burial plan. All the rest goes to the home. The spouse out of the nursing home was allowed to keep the resources he had. She did not see the reason for the bill.

REP. S. SMITH asked if this bill would encourage the grown children of parents going into a nursing home to care for them at home in order to preserve their estate.

REP. SOFT replied that the purpose of the bill is to do just that.

REP. SIMON told the committee about when his mother was placed in a nursing home and how he saw people who could pay their bills but had transferred their assets and went on Medicaid. Taxes are paying for Medicaid and families need to be responsible for their own.

REP. HAGENER mentioned that she had a real problem with SB 236. It is not mandated by the federal government and there are already mechanisms in the law to go after property if need be. The wealthy will still be able to transfer their assets and the low income population will be targeted. Spousal impoverishment is supposed to provide some protection but in reality does not.

REP. MARTINEZ stated that all money and property can be traced.

REP. S. SMITH is reluctant about the bill but these people have given to society and deserve to be helped.

REP. BERGMAN said that this bill would go after the people who do have assets and are not using them. She asked what was the solution for the great amounts of money that Medicaid is putting out into nursing homes.

REP. HAGENER replied that nursing homes are not shy about going after money and assets and that assets can be traced.

CHAIRMAN GRIMES stated that anyone can still make a transfer if it is five years from the date of entering a nursing home.

REP. KOTTEL discussed the section of the bill where \$5,000 can be placed in a burial trust fund but what is not used goes to the state. The money that is left over is needed by the family. She has an amendment that would allow someone to place up to \$5,000 into a burial trust fund and what is left over would remain with the family.

Mr. Niss confirmed that the amendment would do just that.

Motion: **REP. DEB KOTTEL** MOVED TO AMEND SB 236.

Discussion:

REP. SIMON asked if the amendment would encourage cremation as it is a much less expensive way of burial and thus the family would receive more back from the trust.

REP. KOTTEL replied that if there are last minute expenses it might be taken into consideration how that burial money is used.

Vote: The motion carried 13-3 with REPS. MOLNAR, SIMON and S. SMITH voting no.

Motion: REP. JOHN BOHLINGER MOVED THAT SB 236 BE CONCURRED IN AS AMENDED.

Discussion:

REP. L. SMITH said that the reality was that if family members were not taking care of the elderly then the nursing homes would need to. She felt the committee was not dealing with reality.

REP. GREEN gave personal testimony about his experience with his mother being in a nursing home. He described the selfishness of the individuals who want to keep their parents' money instead of paying for the nursing home care.

REP. L. SMITH reiterated that in Colorado there is a five year requirement for the transfer of assets.

REP. SOFT mentioned that the bill also enacts the five year requirement.

Vote: The motion carried 11-5 with REPS. SQUIRES, AHNER, HAGENER, MARTINEZ and L. SMITH voting no.

{Tape: 3; Side: A; Approx. Counter: 930; Comments: NA.}

EXECUTIVE ACTION ON SB 158

Motion/Vote: REP. CHRIS AHNER MOVED THAT SB 158 BE CONCURRED IN. The motion carried unanimously.

{Tape: 3; Side: B; Approx. Counter: 00; Comments: NA.}

EXECUTIVE ACTION ON SB 134

Motion: REP. KEN WENNEMAR MOVED THAT SB 134 BE CONCURRED IN.

Motion: REP. DEB KOTTEL MOVED TO AMEND SB 134. EXHIBIT 7

Motion: REP. KEN WENNEMAR MOVED TO SEGREGATE REP. KOTTEL'S AMENDMENT.

Motion: REP. DEB KOTTEL MOVED TO AMEND SB 134.

Discussion:

REP. KOTTEL described the first amendment as changing awkward wording in regard to the advertising of referral services.

Vote: The motion to adopt the first Kottel amendment carried unanimously.

Motion: REP. DEB KOTTEL MOVED HER SECOND AMENDMENT.

Discussion:

REP. KOTTEL stated that she is adding a statement regarding licensure.

REP. MOLNAR asked what the purpose of the amendment was.

REP. KOTTEL replied that consumers should know that they are using a referral paid service.

REP. SIMON mentioned that it is being suggested that the referral service is referring someone who is not licensed and that the language is redundant as they could not be practicing in the state without a license.

REP. KOTTEL reiterated why the amendment was submitted.

Vote: The motion to adopt the second Kottel amendment failed 5-11 with REPS. BOHLINGER, SQUIRES, CAREY, KOTTEL and WENNEMAR voting yes.

Motion: REP. DEB KOTTEL MOVED HER THIRD AMENDMENT TO SB 134.

Discussion:

REP. KOTTEL changed the language of the section as is seemed to be slang.

Vote: The motion to adopt the third Kottel amendment carried 12-4 with REPS. GREEN, MOLNAR, SIMON and L. SMITH voting no.

Motion: REP. DEB KOTTEL MOVED HER FOURTH AMENDMENT.

Discussion:

REP. KOTTEL described the fourth amendment as clarifying the use of sales collateral and other types of material used in distribution.

Motion: REP. KEN WENNEMAR MADE A SUBSTITUTE MOTION TO AMEND THIS AMENDMENT BY STRIKING "EITHER IN PERSON OR".

Vote: The motion to adopt the Wennemar substitute motion carried 12-4 with REPS. GREEN , GRIMES, MOLNAR and SIMON voting no.

Motion: REP. BILL CAREY MOVED TO AMEND SB 134.

Discussion:

SEN. KLAMPE gave reasoning for the amendments saying it cannot be determined if there is a group practice on the basis of the building and some of the physicians may not be using the referral service and some may be.

CHAIRMAN GRIMES clarified that the impact of the amendments is to require disclosure for any health care provider regardless of their association.

SEN. KLAMPE stated that it was correct as long as there was a referral service in the building.

REP. SIMON felt a situation would be created that the consumers and providers would find intolerable.

{Tape: 3; Side: B; Approx. Counter: 530; Comments: NA.}

REP. GREEN supported the amendment and said that it makes things a little clearer.

CHAIRMAN GRIMES stated that he felt it would throw a time bomb in the middle of normal business relationships.

REP. KOTTEL said there was an issue of cost and trust. The disclosure could be done discretely and tastefully. It would be honest to state that the physician was receiving a fee for the referral.

REP. BOHLINGER echoed REP. SIMON'S sentiment regarding the amendment and felt the consumers have an understanding that medical providers probably have a financial interest in their business and referrals.

REP. CAREY supported the amendment and said that it would be helpful to make the issue clear and they should educate themselves about the costs of health care.

Vote: The motion to adopt the Carey amendment failed 7-9 with REPS. CAREY, GREEN, KOTTEL, MOLNAR, L. SMITH, SOFT and WENNEMAR voting yes.

Motion: REP. BRUCE SIMON MOVED TO AMEND SB 134.

Discussion:

REP. SIMON walked the committee through the amendments that added to the language of the bill on page two.

REP. KOTTEL wondered if it was the intent that should limited liability partnerships be signed into law that they would be included in the list in the amendment.

REP. SIMON responded that it included partnership, corporation or limited liability company registered and would be willing to add limited liability partnerships. He reiterated the intent of the amendments.

{Page: 4; Side: A; Approx. Counter: 00; Comments: NA.}

Vote: The motion to adopt the Simon amendment carried unanimously.

Motion: REP. JOHN BOHLINGER MOVED THAT SB 134 BE CONCURRED IN AS AMENDED.

Discussion:

REP. SIMON stated that the sections did not always include the same language and the wording was inconsistent. He stated his concern about the power of applicable boards that could apply administrative penalties.

REP. BOHLINGER asked if he was supported on the intent of the bill where there would be a disclosure of financial interest.

REP. SIMON replied that he doesn't feel there is a great opportunity to save on health care costs as a result of SB 134, just more hassle.

REP. KOTTEL asked if they could ask the sponsor if money will be saved. Objection was raised.

REP. GREEN said that he supported the bill and anything that would have an effect of lessening health care costs.

Vote: The motion to concur as amended failed 8-8 with REPS. BOHLINGER, CAREY, GREEN, KOTTEL, MOLNAR, L. SMITH, SOFT and WENNEMAR voting no.

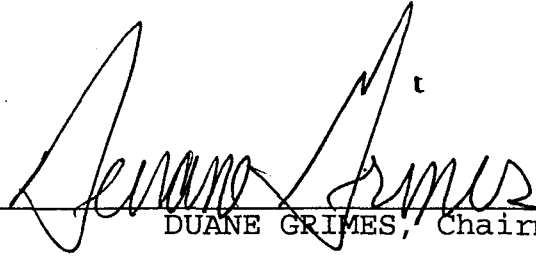
HOUSE HUMAN SERVICES & AGING COMMITTEE

March 15, 1995


Page 17 of 17

ADJOURNMENT

Adjournment: 6:00 p.m.

A handwritten signature in black ink, appearing to read "Duane Grimes", written over a horizontal line.

DUANE GRIMES, Chairman

A handwritten signature in black ink, appearing to read "Andrea Small", written over a horizontal line.

ANDREA SMALL, Recording Secretary

DG/as

HOUSE OF REPRESENTATIVES

Human Services and Aging

ROLL CALL

DATE 3/15/95

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	✓		
Rep. Liz Smith	✓		
Rep. Susan Smith	✓		
Rep. Loren Soft	✓		
Rep. Ken Wennemar	✓		



HOUSE STANDING COMMITTEE REPORT

March 16, 1995

Page 1 of 1

Mr. Speaker: We, the committee on Human Services and Aging report that Senate Bill 209 (third reading copy -- blue) be concurred in as amended.

Signed: _____

Duane Grimes, Chair

And, that such amendments read:

Carried by: Rep. Cobb

1. Page 7.

Following: line 10

Insert: "(i) The individual is a homeless person.

(j) The individual is a victim of domestic violence."

-END-

Committee Vote:

Yes 16, No 0.

611126SC.Hdh



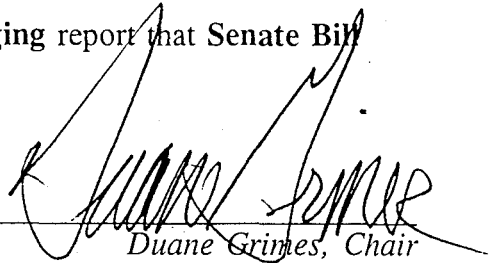
HOUSE STANDING COMMITTEE REPORT

March 16, 1995

Page 1 of 1

Mr. Speaker: We, the committee on Human Services and Aging report that Senate Bill 223 (third reading copy -- blue) be concurred in.

Signed: _____


Duane Grimes, Chair

Carried by: Rep. Soft

Committee Vote:
Yes 12, No 4.

611137SC.Hdh



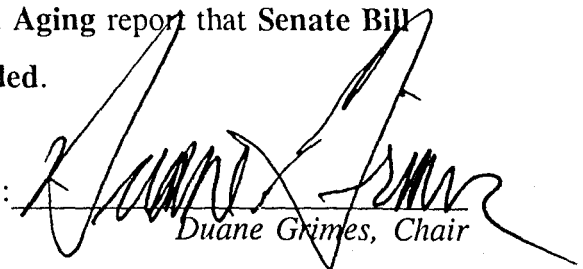
HOUSE STANDING COMMITTEE REPORT

March 16, 1995

Page 1 of 1

Mr. Speaker: We, the committee on Human Services and Aging report that Senate Bill 236 (third reading copy -- blue) be concurred in as amended.

Signed:


Duane Grimes, Chair

And, that such amendments read:

Carried by: Rep. Cobb

1. Page 8, line 27.
Following: "property"
Insert: "in excess of \$5,000 in value"

-END-

Committee Vote:
Yes 11, No 5.

611132SC.Hdh



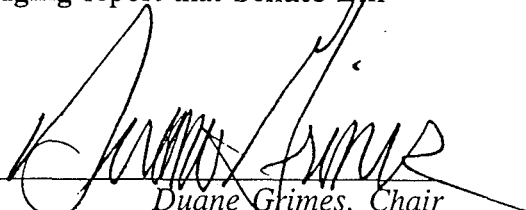
HOUSE STANDING COMMITTEE REPORT

March 16, 1995

Page 1 of 1

Mr. Speaker: We, the committee on Human Services and Aging report that Senate Bill 158 (third reading copy -- blue) be concurred in.

Signed:


Duane Grimes, Chair

Carried by: Rep. Bohlinger

Committee Vote:
Yes 16, No 0.

611135SC.Hdh

HOUSE OF REPRESENTATIVES

ROLL CALL VOTE

Human Services and Aging Committee

DATE 3-15-95 BILL NO. SB 209 NUMBER _____

MOTION: *1st amendment - passed 14-2
2nd amendment failed 8-8

NAME	AYE	NO
Rep. Duane Grimes, Chairman		✓
Rep. John Bohlinger, Vice Chairman, Majority	✓	
Rep. Carolyn Squires, Vice Chairman, 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	✓	
Rep. Liz Smith	✓	✓
Rep. Susan Smith	✓	✓
Rep. Loren Soft		✓
Rep. Ken Wennemar	✓	

8

8

1st amendment 2 no Smith, Martinez
 2nd amendment

HOUSE OF REPRESENTATIVES

ROLL CALL VOTE

Human Services and Aging Committee

DATE 3-15-95 BILL NO. 5B209 NUMBER _____

MOTION: 3rd amendment - failed

NAME	AYE	NO
Rep. Duane Grimes, Chairman		✓
Rep. John Bohlinger, Vice Chairman, Majority	✓	
Rep. Carolyn Squires, Vice Chairman, 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		
Rep. Liz Smith		✓
Rep. Susan Smith		✓
Rep. Loren Soft		✓
Rep. Ken Wennemar	✓	

HOUSE OF REPRESENTATIVES

ROLL CALL VOTE

Human Services and Aging Committee

DATE _____ BILL NO. SB209 NUMBER _____

MOTION: 4th amendment failed

NAME	AYE	NO
Rep. Duane Grimes, Chairman		✓
Rep. John Bohlinger, Vice Chairman, Majority	✓	
Rep. Carolyn Squires, Vice Chairman, 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		✓
Rep. Liz Smith		✓
Rep. Susan Smith		✓
Rep. Loren Soft		✓
Rep. Ken Wennemar	✓	

HOUSE OF REPRESENTATIVES

ROLL CALL VOTE

Human Services and Aging Committee

DATE _____ BILL NO. 5B209 NUMBER _____

MOTION: 5th amendment - Squires

*motion
passed*

NAME	AYE	NO
Rep. Duane Grimes, Chairman		
Rep. John Bohlinger, Vice Chairman, Majority		
Rep. Carolyn Squires, Vice Chairman, 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		
Rep. Liz Smith		
Rep. Susan Smith		
Rep. Loren Soft		
Rep. Ken Wennemar		

HOUSE OF REPRESENTATIVES

ROLL CALL VOTE

Human Services and Aging Committee

DATE 3-15-95 BILL NO. SB209 NUMBER _____

MOTION: Do concur as amended

unanimous

NAME	AYE	NO
Rep. Duane Grimes, Chairman	✓	
Rep. John Bohlinger, Vice Chairman, Majority	✓	
Rep. Carolyn Squires, Vice Chairman, 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	✓	
Rep. Liz Smith	✓	
Rep. Susan Smith	✓	
Rep. Loren Soft	✓	
Rep. Ken Wennemar	✓	

HOUSE OF REPRESENTATIVES

ROLL CALL VOTE

Human Services and Aging Committee

DATE 3-15-95 BILL NO. SB134 NUMBER

MOTION: Rep. Bohlinger "Do Concur as Amended"
motion fails on tie vote.

NAME	AYE	NO
Rep. Duane Grimes, Chairman		✓
Rep. John Bohlinger, Vice Chairman, Majority	✓	
Rep. Carolyn Squires, Vice Chairman, 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		✓
Rep. Liz Smith	✓	
Rep. Susan Smith		✓
Rep. Loren Soft	✓	
Rep. Ken Wennemar	✓	

8 8

HOUSE OF REPRESENTATIVES

ROLL CALL VOTE

Human Services and Aging Committee

DATE 3-15-95 BILL NO. SB223 NUMBER _____

MOTION: Rep. Soft moved to "Do Concur"

un

NAME	AYE	NO
Rep. Duane Grimes, Chairman	✓	
Rep. John Bohlinger, Vice Chairman, Majority	✓	
Rep. Carolyn Squires, Vice Chairman, 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	✓	
Rep. Liz Smith		✓
Rep. Susan Smith		✓
Rep. Loren Soft	✓	
Rep. Ken Wennemar	✓	

12

4

HOUSE OF REPRESENTATIVES

ROLL CALL VOTE

Human Services and Aging Committee

DATE 3-15-95 BILL NO. 5823b NUMBER _____

MOTION: Rep. Bohlinger "Do Concur" as Amended.
Rep. Kottel moved amendment - amendment passed.

NAME	AYE	NO
Rep. Duane Grimes, Chairman	✓	
Rep. John Bohlinger, Vice Chairman, Majority	✓	
Rep. Carolyn Squires, Vice Chairman, 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	✓	
Rep. Liz Smith		✓
Rep. Susan Smith	✓	
Rep. Loren Soft	✓	
Rep. Ken Wennemar	✓	

11 5

HOUSE OF REPRESENTATIVES

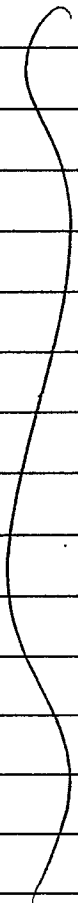
ROLL CALL VOTE

Human Services and Aging Committee

DATE 3-15-95 BILL NO. SB 158 NUMBER _____

MOTION: Rep. Ahner "Do Concur"

unanimous

NAME	AYE	NO
Rep. Duane Grimes, Chairman		
Rep. John Bohlinger, Vice Chairman, Majority		
Rep. Carolyn Squires, Vice Chairman, 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		
Rep. Liz Smith		
Rep. Susan Smith		
Rep. Loren Soft		
Rep. Ken Wennemar		

HOUSE OF REPRESENTATIVES

ROLL CALL VOTE

Human Services and Aging Committee

DATE _____ BILL NO. SB134 NUMBER _____

MOTION: 2nd amendment - fails
1st amendment - passes 16-0

NAME	AYE	NO
Rep. Duane Grimes, Chairman		✓
Rep. John Bohlinger, Vice Chairman, Majority	✓	
Rep. Carolyn Squires, Vice Chairman, 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		✓
Rep. Liz Smith		✓
Rep. Susan Smith		✓
Rep. Loren Soft		✓
Rep. Ken Wennemar	✓	

HOUSE OF REPRESENTATIVES

ROLL CALL VOTE

Human Services and Aging Committee

DATE _____ BILL NO. 5B134 NUMBER _____

MOTION: Rep Kottel "Do Concur as Amended"

Klampe Failed

NAME	AYE	NO
Rep. Duane Grimes, Chairman		✓
Rep. John Bohlinger, Vice Chairman, Majority		✓
Rep. Carolyn Squires, Vice Chairman, 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		✓
Rep. Liz Smith	✓	
Rep. Susan Smith		✓
Rep. Loren Soft	✓	
Rep. Ken Wennemar	✓	

7 9

**TESTIMONY OF THE DEPARTMENT OF
SOCIAL AND REHABILITATION SERVICES
BEFORE HOUSE HUMAN SERVICES AND AGING COMMITTEE**

RE: SB 388 - MEDICAID MANAGED CARE

The Department of Social and Rehabilitation Services supports SB 388. This bill sets out standards for Medicaid managed care.

Medicaid will be expanding our managed care programs to include HMOs in July of this year. The expansion into physical and mental health managed care was authorized during the last special session.

The Montana Hospital Association felt that existing legislation on Medicaid managed care was too general and that more specific ground rules needed to be established. MHA worked on proposed legislation that was shared with the Department in mid January. SRS has worked with MHA and the Insurance Commissioner's Office to refine these standards. This bill outlines much of what the department had already planned to implement by program rules and provider contract in accordance with existing state and federal law.

The department has been working for over a year with the Quality Care Montana Advisory Council which includes consumers, providers, legislators, and others to design and implement a managed care system for Medicaid clients.

This bill should assist all of those involved in the process to have a system that will contain Medicaid costs and improve access to quality care.

I urge you to vote do pass on SB 388.

STATEMENT BY SENATOR JOHN HARP
IN SUPPORT OF SB 388, MEDICAID MANAGED CARE ACT

HOUSE HUMAN SERVICES & AGING COMMITTEE

WEDNESDAY, MARCH 15, 1995

Senate Bill 388 proposes to set in statute certain standards for the development, operation and evaluation of a Medicaid managed care program for the State of Montana.

Some of you may recall our last special legislative session where the legislature enacted a short appropriation statute (codified in 53-6-116, MCA) that authorized SRS, in its discretion, "to develop managed-care systems for medicaid recipients."

SRS has acted on that authorization and has been working on the development of such managed care programs. SB 388 seeks to set in statute additional standards for those programs and to set up a process for evaluating those programs and to create an independent mechanism that will help the parties resolve disputes that might arise in the operation of those programs.

The Purpose of SB 388

As the preamble to the bill indicates, Montana continues to experience significant growth in Medicaid expenditures, at rates higher than the growth in other state funded programs. As a consequence, these costs are limiting the ability of the state to address other needs of the citizens of Montana.

In many ways, the situation we now face with Medicaid is similar to that we faced two years ago when we addressed increasing costs for workers' compensation benefits. Our response, then, was to develop a managed care program for worker's compensation.

As noted, over the past two years, SRS has been working on the outlines of a medicaid managed care program, both for psychiatric care and physical care.

Throughout this process, I have become increasingly excited about and aware of the prospects and problems that one can encounter in developing a publicly funded managed care program.

The reason I am excited is that I feel certain that managed care is a mechanism that can, if properly implemented, reduce the rate of increase in health expenditures, without sacrificing quality.

Over the years I have also had the opportunity to work with health care providers, and I believe that they are sincere when they tell us the efforts that they are undertaking to control health care costs.

I have also watched government funded programs, some of which have sought to reduce health care costs simply by reducing the amount of public funds available for publicly funded health care programs.

This realization prompted me to work with the private providers and the public funders in an effort to develop a set of standards to address how managed care could operate in Montana for Medicaid.

It is my belief that SB 288 will be of significant benefit to both the providers and the funders in determining how Medicaid managed care contracts can be negotiated, how they should be implemented and evaluated, and ultimately how controversies that might arise among the parties might be resolved.

In short, these are my intentions with SB 388.

1. This bill should not hinder SRS in its efforts to establish managed care programs for medicaid.
2. It is my intention that the providers be given assurance that they can rely on when they seek to contract with SRS for medicaid managed care.
3. Finally, it is my intention that this bill provide some new options for community care networks that might join in the pool of possible contractors for medicaid managed care.

Evaluation

My proposal seeks to provide oversight for the state-funded Medicaid managed care program.

SB 388 seeks to ensure that Medicaid beneficiaries receive appropriate care under the state-funded Medicaid managed care program.

Finally, SB 388 seeks to ensure that providers of managed care are reimbursed in a timely and appropriate manner.

Consensus Approach

I feel compelled to explain why we are hearing this bill on the eve of transmittal. There are very good reasons for this late date.

In drafting this bill, every effort was made to involve the parties who will be responsible for designing, implementing, evaluating, and resolving disputes about the program. I could have introduced this bill at the beginning of the session.

However, there was not agreement among the parties, and I wanted them to work out there differences before the bill was presented to the legislature. The introduced version of SB 388, which is in front of you this morning is draft 11 of the medicaid managed care bill.

SB 388 was developed through a collegial process. The participants in that process have been the Montana Hospital Association, the Department of SRS, the Legislative Auditor, the Montana State Insurance Commissioner, the Blue Cross and Blue Shield, and various HMO programs throughout the state.

All of these parties were given drafts of the bill and asked to comment on them. I participated in some of those negotiating sessions. All parties now agree to the bill.

History of SB 388

This bill initially was based upon a statute passed last year by the State of Illinois at the suggestion of the Illinois Hospital Association. Any resemblance between the Illinois statute and the bill you have in front of you is almost purely coincidental.

This bill has been worked and reworked to shape it to meet the needs of the parties who may play a part in or will be affected by any Medicaid managed care programs that might soon operate in Montana.

Since the department of SRS decided to split managed care between mental health care and physical care, SB 388 only deals with the subject of physical care. Elements of medicaid managed care for mental health were the subject of other legislation (SB 223), introduced by Senator Keating which was recently approved by this Committee.

Actually, both the physical and the mental health care portions of Medicaid managed care have been the subject of extensive work by the Department of SRS in anticipation of managed care contracts. SB 388 should not impede this process.

New Options

SB 388 has one interesting wrinkle. In addition to HMO's having the opportunity to participate in Medicaid managed care, this bill also contemplates the creation of Medicaid managed care community networks. These networks are groups of licensed health care providers, including physicians and hospitals, who might choose to connect themselves to service Medicaid managed care contracts.

A Summary of SB 388

A quick summary of the bill. A statement of intent is required because rules may have to be adopted by the department of SRS and the Commissioner of Insurance.

Section 1 provides a **policy statement** for the State of Montana:

"to adopt a health care program that encourages the integration of health care services and manages the health care of Medicaid program enrollees for the purposes of improving their health, while preserving reasonable choice within a competitive and cost-efficient environment."

Section 2 sets out definitions.

Section 3 establishes the requirements for a managed care community network, which are similar to those of HMO's under the Montana State Insurance Code. These managed care community networks must meet all of the applicable requirements by HCFA, the federal agency responsible for Medicaid.

Section 4 sets out different benefit packages that SRS can set up for Medicaid beneficiaries under the managed care program.

Section 5 sets out the requirements applicable to managed health care entities, which include both HMO's and managed care community networks.

Section 6 establishes requirements related to enrollees in a Medicaid managed care program.

Section 7 sets out certain areas where payment reductions and adjustments may be allowed.

The remaining sections deal with other technical matters, which are not of great consequence for my introductory remarks, except those pertaining to the Legislative Auditor. What I tried to do, in developing the Legislative Auditor section, was to set out an independent third party to whom the various participants in the Medicaid managed care program could appeal for fairness and efficiency in administering the program.

Further, there are a number of provisions in this section that deal with the subject of fraud waste and abuse and mismanagement in the Medicaid program which ultimately become the jurisdiction of the office of the Attorney General.

Fiscal Impact

Every effort has been made to reduce the fiscal impact in setting out these new requirements for Medicaid managed care. I have asked the various government agencies associated with the Medicaid managed care program, including Department of SRS and the Legislative Auditor, to take those steps necessary to reduce any new requirements that might cause additional public monies to be spent.

In that regard, the initial fiscal note on the bill as introduced showed a significant fiscal impact by the Department of SRS. In meetings I had with the Department in early February, we developed new ways of dealing with their responsibilities under this bill, which will result in significantly reduced fiscal impact.

Trust in Government

The hallmark of this session has been an intensified effort to increase trust in government. Public distrust in government is widespread and ignores party lines.

Montanans are keenly aware of how public monies are being spent. As such, we must act to ensure that health care programs are run in ways that respect the wishes of people to control our expenses for health care and other government services.

At the same time, Montanans want quality health care. We should not deny health care to Montanans who, through no fault of their own, cannot afford health care and are required to seek financial support from the State through the Medicaid program.

It is with those concerns in mind that I worked on the managed care program for worker's compensation in 1993 and I am working today to introduce the Medicaid managed care program for 1995.

I urge your support for SB 388, along with the amendments that I am distributing to the Committee this morning, and I welcome the opportunity to answer questions and reserve the right to close.

Thank you.

EXHIBIT 3
DATE 3/15/95
SB 209

Amendments to Senate Bill No. 209
Third Reading Copy

Requested by Rep. Kottel
For the Committee on Human services and Aging

Prepared by David S. Niss
March 9, 1995

1. Page 5, line 13.

Following: "department."

Insert: "The community in which the specified caretaker relative
resides shall determine whether post secondary education is
acceptable community services work."

Failed 8-8

EXHIBIT 7
DATE 3/15/95
SB 209

Amendments to Senate Bill No. 209
Third Reading Copy

Requested by Rep. Kottel
For the Committee on Human services and Aging

Prepared by David S. Niss
March 9, 1995

1. Page 5, line 6.
Following: "single-parent"
Insert: "or two-parent"

2. Page 5, lines 8 and 9.
Strike: subsection (c) in its entirety

failed 5-10

EXHIBIT 5
DATE 3/15/95
SB 209

Amendments to Senate Bill No. 209
Third Reading Copy

Requested by Rep. Squires
For the Committee on Human services and Aging

Prepared by David S. Niss
March 10, 1995

1. Page 5, line 13.

Following: "department."

Insert: "Community service work must be meaningful work in which
the specified caretaker relative learns skills that are
usable in another employment situation."

failed 5-10

EXHIBIT 6
DATE 3/15/95
SB 209

Amendments to Seante Bill No. 209
Third Reading Copy

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

Prepared by David S. Niss
March 10, 1995

1. Page 5, line 13.

Following: "department."

Insert: "Community service work performed by the specified
caretaker relative may not displace other public or private
sector employees."

failed

PROPOSED AMENDMENT TO SENATE BILL 134

Amend Senate Bill 134 as follows:

1. Page 2 Line 28

Strike: "at the point of initial contact and in subsequent contacts
by any means of communication, including"

Insert: "in its ~~advertising~~"

2. Page 2 Line 29 after "that"

Strike: "~~has paid a fee for the referral and that~~"

Insert: "is licensed in the state of residence, and if"

3. Page 2 Line 30

Strike: "no more or less qualified than"

Insert: "a specialist, then name of the Board which certified the
specialty and the".

4. Page 3 Line 1

Strike: "."

Insert: "must make the same disclosures; either in person or in any
other advertising medium used by that person."

AND AS AMENDED, BE CONCURRED IN!

✓ Simon

✓ Soft

—

HOUSE OF REPRESENTATIVES
VISITORS REGISTER

Human Services

COMMITTEE

DATE 3-15-95

BILL NO. SB388 SPONSOR(S) Harp

PLEASE PRINT

PLEASE PRINT

PLEASE PRINT

NAME AND ADDRESS	REPRESENTING	Support	Oppose
Nancy Elley	SRS	✓	
Marnie Yu			
Chuck Butler	Blue Cross Blue Shield of Ark	—	

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

HR:1993

wp:visbcom.man

CS-14