

MINUTES

**MONTANA SENATE
55th LEGISLATURE - REGULAR SESSION**

COMMITTEE ON BUSINESS & INDUSTRY

Call to Order: By **CHAIRMAN JOHN HERTEL**, on January 28, 1997, at
9:00 A.M., in ROOM 410

ROLL CALL

Members Present:

Sen. John R. Hertel, Chairman (R)
Sen. Steve Benedict, Vice Chairman (R)
Sen. Debbie Bowman Shea (D)
Sen. William S. Crismore (R)
Sen. C.A. Casey Emerson (R)
Sen. Bea McCarthy (D)

Members Excused: None

Members Absent: None

Staff Present: Bart Campbell, Legislative Services Division
Mary Gay Wells, Committee Secretary

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

Committee Business Summary:

Hearing(s) & Date(s) Posted: SB 136; SB 150; 1/13/97
Executive Action: SB 116; SB 192

{Tape: 1; Side: A; Approx. Time Count: 9:00 AM; Comments: N/A.}

EXECUTIVE ACTION ON SB 116

Motion: SEN. STEVE BENEDICT MOVED SB 116 DO PASS.

Amendments: SEN. BENEDICT MOVED TO AMEND SB 116.

Discussion on Amendment: Dean Roberts, Motor Vehicle Division,
explained the amendment (EXHIBIT 1) to the Committee. He stated
that in terms of the industry, they were in agreement with this
amendment.

Vote on Amendment: The motion to amend SB 116 CARRIED
UNANIMOUSLY.

Motion: SEN. BENEDICT MOVED SB 116 DO PASS AS AMENDED

Vote: The DO PASS AS AMENDED motion for SB 116 CARRIED UNANIMOUSLY.

{Tape: 1; Side: A; Approx. Time Count: 9:04 AM; Comments: N/A.}

HEARING ON SB 136

Sponsor: SENATOR DON HARGROVE, SD 16, BOZEMAN

Proponents: Bill Olson, AARP
Betty Babcock, Helena
Tara Mele, MT Public Research Interest Group
Annie Bartos, Department of Commerce
Beth Baker, Department of Justice
Clyde Dailey, State Auditor's Office, Insurance
Department
Mike Voeller, Lee Newspapers of Montana
Bill Fleiner, MT Sheriffs & Peace Officers Assoc.
Ed McHugh, Helena

Opponents: Ross Cannon, Direct Marketers Assoc.

Opening Statement by Sponsor:

SENATOR DON HARGROVE, SD 16, BOZEMAN. If in Montana I were to intrude into your home illegally to take your money or resources, you could shoot me and that would be ok in Montana. If I intrude into your home illegally to take your money or resources by telephone, there is not really a whole lot you can do about it. SB 136 is a bill that addresses those problems and those challenges. There is no intention to exclude legitimate businesses or processing. What this bill does is it requires registration and posting a bond. Legitimate businesses should have no objection to doing that. It is a joint effort by the Departments of Commerce and Justice and they are both here to explain any of the fine parts of the bill. Along the way I have had a number of amendments offered to me. I do have some amendments that I will explain briefly. **Mr. Bart Campbell, Legislative Council**, has those amendments (**EXHIBIT 2**). I have one other one that I have accepted that I will pass out (**EXHIBIT 3**). None of us are immune from this sort of thing. I and my family have experienced some types of this fraud, not necessarily via the telephone, though my son did accept a position as a caller one time and did not stay long at all. The bill is simple enough: a registration and a bond. I also suggest to the Committee that you get a new fiscal note because we have done a number of things. The note will change down considerably. We have eliminated facsimile and the idea was to partially eliminate the fiscal note, but very little of this fraud is done by facsimile.

Proponents' Testimony:

Bill Olson, AARP. He stated that he and his organization was in support of SB 136. He handed in his written testimony (**EXHIBIT 4**)

Betty Babcock, Helena. She stated that she had been a victim of telemarketing. She handed in her written testimony (**EXHIBIT 5**) and evidence supporting this fraud (**EXHIBIT 6**).

{Tape: 1; Side: A; Approx. Time Count: 9:31 AM; Comments: N/A.}

Tara Mele, MT Public Interest Research Group. She stated that her group stands in strong support of SB 136. She handed in her written testimony (**EXHIBIT 7**).

Annie Bartos, Chief Legal Counsel, Department of Commerce. We do support SB 136. **Ms. Bartos** explains the amendments that are contained in (**EXHIBIT 2**). She speaks on #2, #3, and #4. Concerning the sale of securities that are being exempt under this bill, I have reviewed the amendment briefly and because the sale of securities does not involve the sale of personal household or consumer goods, at this point in time, I don't see a problem with it being exempted under this bill. The Office of Consumer Affairs produces and distributes thousands of pamphlets to Montana consumers every year showing telemarketing fraud. We believe that consumer education is the key.

Beth Baker, Department of Justice. We also stand in support of SB 136. **Ms. Baker** explains the amendments that pertain to the Dept. of Justice (**EXHIBIT 2**). She speaks on #11, #12 and #6. **Attorney General Joe Mazurek** participated in the National Assoc. of Attorney Generals in a reverse boiler room operation. The reverse boiler room was organized by AARP to contact consumers across the U.S. who have been placed on a list as potential victims. The list is called a mooch list which was obtained in an FBI investigation of a telemarketing scam. These lists are sold for up to \$200 per name and are used widely across the country. **Mr. Mazurek**, himself, contacted about a dozen Montana consumers to advise them that their names were on this list. He had one man who refused to believe that he had been victimized. These scam artists are so good at convincing people. **Mr. Mazurek** actually called this fellow two or three times and I am not sure yet if he convinced the man that he had participated in a fraud.

Clyde Dailey, State Auditors Office, Insurance Department. We have worked fairly close with the other agencies on this type of fraud and our interest is that while we regulate insurance and securities, the vast majority of them, when we have a problem, often start with phone solicitation. We hope that this bill will start to give us a handle of these kinds of problems. We recommend a Do Pass.

Mike Voeller, Lee Newspapers of Montana & Montana Magazine. He stated that his group was neutral on this bill, but he did have an amendment regarding disclosure regarding non-profit organizations. He handed in his testimony (**EXHIBIT 8**).

{Tape: 1; Side: B; Approx. Time Count: 9:47 AM; Comments: N/A.}

Bill Fleiner, Board Member, MT Sheriffs' and Police Officers' Assoc. There are two parts to this: (1) MT Sheriffs' and Police Officers' Assoc. has had a partnership agreement with Montana area agencies on aging where we travel across the state working with groups and presenting the scams and frauds of telemarketing and the core of it is for senior citizens. (2) the issue of law enforcement and telemarketing. That is a double-edge sword for law enforcement and to the extent possible we encourage the law enforcement which is mostly done at the local level not to be involved in telemarketing issues. The sheriffs learned a long time ago that old-fashioned fund raising is probably the best way to go. As an individual that sits on a number of non-profit organizations in Helena and have worked with telemarketing both within the state and out of state, the majority of the money raised did leave the state. All of the organizations that I am currently involved in who have had experiences with telemarketing do not use it and largely because it affects the image of the organization at a very local level and people don't appreciate it.

Ed McHugh, Helena. I speak in a unique situation. For thirty years I ran three businesses that had three telephone identifications and I took care of donations or advertising. So everytime a telemarketing scheme came to Helena, if it was in business, they would use the yellow pages and I would get three calls. In business I am also familiar with the many schemes they use where one would talk with a manager rather than an owner and promise the manager a TV if he would buy a certain product for the company. This happened many times. There were other examples of telemarketing schemes. But I learned the hard way.

Opponents' Testimony:

Ross Cannon, Direct Marketers Assoc. and the Magazine and Publishers Assoc. The direct marketers, there are 3600 people who are members, generate \$3.1 million in sales in merchandise. A list (**EXHIBIT 9**) shows the members in Montana who belong to Direct Marketers Assoc. We don't take any umberance with the experiences that people have. We do ask, respectfully, that the Committee exclude the legitimate telemarketing. There is a place for telemarketing. I would ask the Committee to give serious consideration to the exemptions that we propose to you to take out the genuinely legitimate operators (**EXHIBIT 10**). I would like to walk you through these amendments. **Mr. Cannon** now speaks on "New Section, Section 4" and "New Section, Section 3". These requirements technically put all telemarketers out of busines. Does the Department not grant licenses under these circumstances?

If the telemarketer cannot get a bond are they automatically deprived of the right to do business? I think the provisions, however well meaning, effectively put telemarketers out of business in the terms of doing business in Montana. Keeping in mind that 99% of telemarketing are honest marketers. This is a ban by any other name. I would earnestly encourage you to delete these kinds of provisions or adopt the exceptions that we have proposed in the exemption sections. I am told by the direct marketing people that there are bills of this sort in approximately 20 states and that the exemptions we are proposing here are in all the bills in those 20 states. I would ask you to not throw out the baby with the bath water. (EXHIBIT 11) Thank you.

{Tape: 1; Side: B; Approx. Time Count: 10:07 AM; Comments: N/A.}

Questions From Committee Members and Responses:

SEN. DEBBIE SHEA asked how, from this bill, are people going to identify the people who are scam artists? Also, when a marketer applies for telephone service, is there any way that they can be checked out at that time? And, is the caller ID system of any help? **SEN. HARGROVE** replied that in his opinion the controlling mechanism is the bond. Bonds are not that hard to get and if it is a legitimate business there would be no problem. The exceptions that **Mr. Cannon** brought forth pretty much gut the bill even though at first reading he thought there were possibilities. As far as being sure the marketer has a bond, there is not any sure way of knowing.

Ms. Bartos came forward and answered that a person can ask if the marketer is bonded. The person can ask for written information to be sent. The best advice that can be given is not to send any money, don't provide your checking account number or credit card number. This bill allows the Department to maintain a registration or list of all the businesses that have been registered legally with the state. If a consumer should call the Dept., the Dept. can say yes or no. **Ms. Bartos** then responded that for further assurance to the consumer, should a consumer purchase vitamins and send money off in the mail and not receive the product, the law has two provisions: (1) if the business is registered with the state and the company should fall through on the contract, the Dept. could look at the surety bond and the money could be returned to the consumer if the company had not carried out their end of the contract and (2) the other ability for the Dept. is to refer this complaint to the Dept. of Justice for criminal prosecution because there may have been a misrepresentation that was made to the consumer. They would have the ability to investigate and to prosecute.

SEN. BEA MCCARTHY asked a follow-up question on the caller ID. In Section 5 of the bill, at the potential buyers request, they have to provide you with the telephone numbers. But **SEN. MCCARTHY** has caller ID because of these calls, but has found out

that the caller can block his number so that it will not show. Is there any way that the marketer could be forced to identify their calling number so that it would show up on the ID caller system? **Ms. Bartos** was not sure of the answer for that question but thought that the Public Service Commission would make that kind of regulation.

{Tape: 1; Side: B; Approx. Time Count: 10:15 AM; Comments: N/A.}

SEN. BENEDICT stated that there seems to be a consensus in his area that this would stop telemarketing fraud in its tracks. He did not see that this bill would really have much affect in stopping the fraud. How would the vulnerable senior citizen be protected in this bill? **SEN. HARGROVE** said that there are laws against shooting people, etc. but people still do it. The bill will not solve all the problems, nothing ever does. The problem exists and hopefully this bill will be a step in the right direction.

SEN. EMERSON related that about five years ago, the movie theaters were calling to remind people that the theaters had tickets for sale as Christmas gift ideas. Would they be exempt from this or would they have to buy a surety bond? **Ms. Bartos** said that on a one time basis and it is not a routine transaction, under Section 4, Subsection (e), it provides that this type of selling would be exempt. The law is not specific and does not address what is an isolated transaction, but even if it is an annual event provided by an organization or by a business, to be on the safe side, that business should register.

SEN. BENEDICT stated that since business to business is exempt those solicitations made on the behalf of the sheriffs and peace officers association to businesses would not fall under this bill. And further, the bill shows a \$25 allowable maximum. If a business sells tickets to a circus for \$10, they would not have to get a bond. **Ms. Bartos** replied that was correct.

SEN. MCCARTHY asked if fraud, deception and misinformation should be defined in this bill or are they already defined in other statues? **Ms. Baker** replied that yes these terms are defined in other parts of law.

SEN. SHEA asked at what point in time does the Justice Department find out about a scam? **Ms. Baker** replied that usually after the consumer has received a call. And as **Ms. Bartos** said, the Consumer Affairs Department does a good job of educating consumers.

{Tape: 2; Side: A; Approx. Time Count: 10:31; Comments: N/A.}

Closing by Sponsor:

SEN. HARGROVE closed. I would like to address the comment from **Mr. Voeller of Lee Newspapers** concerning the non-profit. We

included it in terms of not being mandatory up front. You might want to have your council do some research. My understanding is that it would probably not meet the test of law. The idea is good and I would support it. There are many concerns in this bill such as what we could do through the telephone company. The telephone companies were in opposition to this bill when it was introduced in the 1995 Legislature. This bill has been readjusted according to many of their wishes. The difficulty with this subject is to separate the good guys from the bad guys. We need to be very judicious and I would recommend that the Committee be very judicious in trying to add or exclude things from this bill. The bond and requirements for registration are really the separators of legitimate and non-legitimate businesses. The requirements that this bill puts on people demands openness. Records and dealings should be open to the public. Openness is a way of life in Montana and we need to keep that process in mind. There is nothing that should be secret either here in the legislative process or in dealings with people through business. I ask for a Do Pass.

{Tape: 2; Side: A; Approx. Time Count: 10:45 a.m.}

HEARING ON SB 150

Sponsor: SEN. KEN MILLER, SD 11, Laurel

Proponents: Claudia Clifford, State Auditors Office
Don Allen, Montana Medical Benefit Plan

Opponents: Tom Hopgood, Health Insurance Association of America
Tanya Ask, Blue Cross and Blue Shield of Montana
Susan Good, Montana Association of Life Underwriters
Jacqueline Lenmark, American Insurance Association

Opening Statement by Sponsor:

SEN. KEN MILLER, SD 11, Laurel. This bill is a health care bill. It changes the allowable amount an insurance company or health service corporation can charge for a conversion policy, i.e. converting from a group to individual health policy. Last session a cap of 200% was put on the conversion but I am attempting to lower the cap to 150%.

Proponents' Testimony:

Claudia Clifford, State Auditors Office. The State Auditor serves as Commissioner of Insurance. We are here because over the past years many consumers have contacted our office because of their conversion rates, which are between \$500 and \$1,000 per month for individual policies. The policies are for people who have been part of a group plan for years but now have health problems so they choose conversion plans instead of individual

policies because they fear denial of coverage. Current statutes have conversion laws which apply to private insurance carriers and the only two health service corporations, i.e. Blue Cross and Blue Shield of Montana and Montana Medical Benefit Plan. Prior to the 1995 session, the laws were different because they did not handle conversion rates the same way; they were similar but they increased the cap on the rates for conversion policies. Rates for private carriers were increased quite a bit which meant many consumers were priced out of the market. Consumers called my office and wondered if there was another option. There is and it is called the Montana Comprehensive Health Association which is a high risk pool. If you get rejected twice or get riders on your health insurance policy, you can apply for individual coverage through the Comprehensive Health. The contents of that plan are dictated by statute and is the only coverage available to you if you go to Montana Comprehensive Health. Conversion plans offer other options if you are high risk. Under conversion statutes you are allowed to choose any individual plan a company has available; however, if a company does not have individual coverage available, it does have to have a conversion policy. The reason for SB 150 is to make the rates more reasonable if you are a high risk person. People who are self-funded or self-insured do not have options for conversion policies because the law does not require those plans to have such policies.

Don Allen, Montana Medical Benefit Plan. Montana Medical Benefit Plan does exactly what SB 150 requires; they already use the 150% cap on their policies, which has not been a problem. The company has pushed very hard to be up front to ensure health insurance for Montanans is affordable. We are here today to support the legislation.

Opponents' Testimony:

Tom Hopgood, Health Insurance Association of America. I had a conversation yesterday with SEN. KEN MILLER and we decided SB 150 was a useful bill because it focuses the legislative debate on the cost of health insurance and on the nature of what insurance is. Insurance is the management of risk and the simplest form of insurance is self-insurance. When the risk of those calamities becomes greater than he or she can bear, they go to an insurer. The charge for the insured is based on a complicated science of math and statistics performed by people called actuaries who take all sorts of risk factors into consideration to determine how much a person should pay to manage his or her risk. One thing which is done to lower the cost of health insurance is group insurance. When a person loses group health insurance, he or she is entitled to move to a conversion policy which every Montana business or company is required to offer that person. The legislature set a policy which says that the insurance company or health service corporation is not free to set the price for its product, i.e. exact language says it cannot charge more than 200% of what you would charge for a regular insurance policy. It is

statistically proven that people who lose their insurance are higher health risks.

What the Committee should be focusing on is the problem of cost shifting, i.e. spreading the risk of the larger claims throughout all their other policies. SB 150 artificially reduces the limitation on premiums and causes additional cost shifting. Passing SB 150 will make the health care crises worse because it will be a little more expensive for everybody and a little harder to get.

The two options are: (1) Regular 200% conversion policy; (2) 150% premium limitation on the basic health benefit plan. The Kennedy-Kassebaum legislation was passed by Congress and we are busy preparing legislation to bring before either this Committee or Public Health Committee the creation of a portability pool within the individual market which would guarantee issuing health insurance policies to federally defined individuals. The 150% limitation is available in other sections of the law. I would recommend giving SB 150 a DO NOT PASS or preferably TABLE it.

Tanya Ask, Blue Cross and Blue Shield of Montana. I would like to point out additional items. The law benefits one group of people while another will be left picking up the tab. The individuals who are covered under conversion policies are high risk people and what happens when the cost exceeds the amount of money coming in as premium payment? Somebody else ends up paying the bill; the cost is shifted to someone else, i.e. people who have purchased their own health insurance policies or small groups. Some said the law passed in 1995 increased the caps while others said it lowered them from where other conversion policies were prior to that. The law previously read that the premium charged for a conversion policy had to be equivalent to a comparable policy. What is a comparable policy? In the conversion market, many groups which offered a conversion policy did not write individual insurance coverage; therefore, there was no comparable health insurance coverage to which a premium could be equated. Another point is conversion rights are available for people who have health insurance but there is no similar mandate for self-funded individuals.

{Tape: 2; Side: A; Approx. Time Count: 11:08 a.m.}

Susan Good, Montana Association of Life Underwriters (MALU). MALU reluctantly appears in opposition to SB 150 because they sympathize with the people who find themselves in this plight. Anything which increases the cost of insurance is going to make it more and more difficult for the majority of Montanans to be insured. Conversion is expensive because the risk is not spread among a very large pool. MALU hopes the Committee will look at Montana Comprehensive Health Association (MCHA) because it is much improved and should be constantly upgraded because it is through MCHA the risk is truly spread among the largest possible pool. We hope you will look at that.

Jacqueline Lenmark, American Insurance Association (AIA). AIA has a strong policy in all lines of insurance that the policies match the risk they are designed to insure. We would ask the Committee to carefully consider whether this legislation interferes with the matching of the risk rate and benefit.

{Tape: 2; Side: A; Approx. Time Count: 11:12 a.m.}

Questions From Committee Members and Responses:

SEN. STEVE BENEDICT asked **Tanya Ask** if there was any indication of the magnitude of dollars in terms of cost shift. **Tanya Ask** said over the past nine years Blue Cross and Blue Shield had paid out in actual benefits well over \$22 million for people who paid in about \$16 million on conversion policies. Yes, the premiums are high but the people paying them are receiving more health care benefits than the premiums they are paying. **SEN. BENEDICT** asked if he had an employee who would convert to his company plan, would it affect just the rates of his company or all insurance rates within the insurance company. **Tanya Ask** said what she meant to say was the employee coming onto your plan would be guaranteed issue because of the Small Group Reform Plan legislation and your rates would remain about the same. **SEN. BENEDICT** asked what would happen if the employee had tremendously expensive conditions. Would just his company's rates be raised or would it raise them across the board, because of the conversion cap of 150%. **Tanya Ask** said the conversion cap applied to employees leaving the company.

SEN. DEBBIE SHEA asked **Tom Hopgood** how the cost shift was handled when dependent coverage was changed from the ex-husband's policy to the wife's health policy because of the ex-husband's employment changes, and one of the dependents had medical costs of around \$100,000. **Tom Hopgood** said it would most likely result in raising the premiums of the wife's group and possibly those of the company. **SEN. SHEA** asked if the rates would be more reasonable for the ex-husband to get an insurance policy. **Mr. Hopgood** said there was still a cost shift because if the 200% cap is insufficient for the company to pay the claims and administrative costs from premium dollars, the balance of the cost is spread over a wider segment of the market which would increase the premium cost for the market.

SEN. BEA MCCARTHY asked **Tom Hopgood** if in the case of five people from ages 20-60 leaving a company, would the conversion policies be offered at the same premium rate or would they be individual cases. **Mr. Hopgood** said the policies were individually written and the health history was taken into consideration.

SEN. BENEDICT asked **Tom Hopgood** if the Montana Comprehensive Health Plan was for the individual market and **Mr. Hopgood** said it was for people who could not obtain insurance through any other means. **SEN. BENEDICT** asked if an individual who felt the

conversion cap of 200% was onerous could go to the Montana Comprehensive Health Plan. **Mr. Hopgood** said he or she could.

SEN. MCCARTHY asked **Tanya Ask** what the ages were of the group she referred to when she said \$22 million was paid out but the conversion group paid only \$16 million in. **Tanya Ask** said the age group was not retirees, but was a variety of ages, 25-65.

SEN. MCCARTHY asked if people take what coverage they can get when they get into the state fund. **Ms. Ask** said there was only one policy available.

SEN. BENEDICT asked **Tanya Ask** what the difference was between the MCHA Plan and the group plan. **Ms. Ask** said it would depend on what the individual employer wants, usually a higher level of deductible and co-payment. **SEN. BENEDICT** asked what could be bought on the individual market vs. the MCHA plan. **Tanya Ask** said one plan that was sold a lot was an essential care plan and MCHA would have a higher level of [Tape was too garbled to hear]

SEN. WILLIAM CRISMORE asked for the actual cost of MCHA for the individual plan being discussed. **Tanya Ask** said she did not have the numbers available. **Claudia Clifford** said it was 137% of the average rate charged on the individual market for policies with similar coverage. **Ms. Ask** said currently an individual conversion policy for a 53-year-old was about \$460. **Mr. Dailey, Auditors Office**, said the maximum price was \$522.

{Tape: 2; Side: B; Approx. Time Count: 11:27 a.m.}

SEN. MCCARTHY said at one time Blue Cross and Blue Shield offered a group policy to practically any organization which had multi customers that took care of what we're talking about today. Do you no longer provide such services? **Tanya Ask** said BC & BS no longer offered those services; the plans offered were individual and employer-based group plans.

Closing by Sponsor:

SEN. KEN MILLER said this was cost shifting, but that was what insurance was all about. It seems ironic to make that as a bad word. Yes, the customer does have a choice of going to the MCHA plan but the taxpayer absorbs the cost shift there. As a healthy participant in a group policy, what will my premium increase be if my bill passes? The \$7 million loss **Tanya Ask** referred to was over a 9-year period so if the loss was spread over all the policy holders, it was probably about \$5 for each policy. This is something the tax dollars will not have to pick up. There are insurance providers who offer the 150% cap and they have found it is not breaking the bank. The conversion policy goes from a group to an individual, not the other way around. I will gladly pay the \$5 to help responsible people keep coverage. Of all the thousands of policies Blue Cross and Blue Shield has, only about

200 are conversion policies, part of which could be because they are unaffordable.

{Tape: 2; Side: B; Approx. Time Count: 11:36 a.m.}

EXECUTIVE ACTION ON SB 192

Motion: SEN. CASEY EMERSON MOVED DO PASS ON SB 192.

Amendments: SEN. CASEY EMERSON MOVED DO PASS ON AMENDMENT.
(EXHIBIT 12).

Discussion: Bart Campbell explained the amendments.

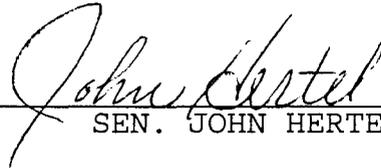
SEN. STEVE BENEDICT wanted to ensure the personal representative is a personal representative of the disabled, and the only reference is the definition. Do we need another definition that does not address probate but makes sure we understand in the bill it is personal representative of the deceased or disabled? **Bart Campbell** said the definition with the amendment would only define personal representative of a deceased dentist; not a personal representative of a disabled dentist. In my discussions with Mary McCue, we felt the Department would supply that. We could change up above on Line 6, and it would go throughout SB 192, to "legal representative of a disabled dentist" or "representative of a disabled dentist". **Mr. Campbell** asked what a representative of a disabled dentist was -- was it someone who was legally appointed (guardian)? **SEN. BENEDICT** said all he wanted to do was ensure there was some standing for the representative of a disabled dentist. We reference them in SB 192 but do not define the standing. **Mary McCue** said **SEN. BENEDICT'S** issue was valid but she and **Mr. Campbell** thought that could be left to the Board because they may say it would be someone legally appointed or just a family member. The Dental Association's interest in this was more in the situation of an estate so we did not bring forward any definition because we felt it could be left to the Board.

Vote: Motion DO PASS on Amendment CARRIED UNANIMOUSLY 6-0.

Motion/Vote: SEN. BEA MCCARTHY MOVED DO PASS SB 192 AS AMENDED.
Motion CARRIED UNANIMOUSLY 6-0.

ADJOURNMENT

Adjournment: The meeting adjourned at 11:55 a.m.



SEN. JOHN HERTEL, Chairman



MARY GAY WELLS, Secretary

JH/MGW