

MINUTES OF THE MEETING
HOUSE APPROPRIATIONS COMMITTEE
AND
SENATE FINANCE AND CLAIMS COMMITTEE

January 23, 1985

SENATE JOINT RESOLUTION 9: "A JOINT RESOLUTION OF THE SENATE AND THE HOUSE OF REPRESENTATIVES OF THE STATE OF MONTANA ENDORSING THE RECOMMENDATIONS OF THE GOVERNOR RELATING TO PROVISION OF SERVICES TO DEVELOPMENTALLY DISABLED PERSONS, PURSUANT TO HOUSE BILL 909 OF THE 48TH LEGISLATURE."

Secretarial Note: This being a Senate Joint Resolution, the Minutes of the meeting were taken by the secretary to the Senate Finance and Claims Committee and are included in these Minutes of the Appropriation Committee for bill tracking purposes. The meeting was taped and labeled "Senate Joint Resolution 9" and submitted to the Chief Clerk of the House along with other tapes of the Appropriation Committee.


FRANCIS BARDANOUE, Chairman

MINUTES OF THE MEETING
FINANCE AND CLAIMS COMMITTEE
MONTANA STATE SENATE

January 23, 1985

The 3rd meeting of the Senate Finance and Claims Committee met in the Old Supreme Court Chambers as a joint Finance and Claims and House Appropriations Committee on SJR 9.

ROLL CALL: Roll call of the Senate had all members present except Senator Manning; the House had all members present except Representatives Ernst and Swift.

Representative Bardanoue chaired the meeting with Senator Pat Regan as co-chairman. He officially opened the meeting at 7:06 p.m. and said the resolution will set policy for the area of institutions for years.

CONSIDERATION OF SENATE JOINT RESOLUTION 9: Senator Smith, sponsor of SJR 9 said he was a member of the 909 committee and had sponsored the resolution. He said by the telephone calls and messages he felt there was a lot of misunderstanding on SJR 9. He said there are 2 reports. The blue book (exhibit 1) which is the report to the Governor from the 909 council and the red book (exhibit 2) is the governor's proposals from the plan, and the Governor has brought this plan before us, the Legislature. Members of the council were appointed to serve at the pleasure of the Governor and the members were as follows:

William L. Mathers, Chairman, Miles City, rancher, businessman, former Representative and Senator.

Richard P. Swenson, V. C. Helena, a licensed psychologist and President of Educational Research, Inc. He worked in institutional and community-based programs for the developmentally disabled.

Senator Ed B. Smith, Dagmar, rancher, member of Region I DD Advisory Committee and former member of a regional DD Advisory Board.

Representative Glenn A. Roush, Cut Bank, employee of Montana Power Co., Chairman of the Coal Tax Oversight Committee, a member of the House Appropriations Committee and former member of a regional DD Advisory Board.

William J. Crivello, Kalispell, Executive Director of Flathead Industries for the Handicapped and has served as President of the Montana Assoc. of Rehabilitation Facilities.

David H. Kirsch, Boulder, a former Mayor and City Council member of Boulder, owner of Gambles/Coast-to-Coast Hardware Store in Boulder and a member of the Jefferson County Overall Economic Development Committee.

Gary R. Marbut, Missoula, the parent of a developmentally disabled person, who has long been active in voluntary associations for the handicapped, former state representative on the DD Planning and Advisory Council and President of DD/MAP.

Sister Michel Pantenburg, Billings, Administrator of St. Vincents Hospital in Billings, has served as Director of Nursing Education and active in Billings civic organizations and state medical associations.

Verle L. Rademacher, White Sulphur Springs, a past President of Montana Press Assoc., active in Masonic and civic affairs and editor and publisher of the Meagher County News.

William N. Sirak, Gt. Falls, President of the Northern Rocky Mountain Easter Seal Society in Great Falls and serves as a trustee on the board of the Montana Deaconess Medical Center.

Barbara A. Sutherlin, Boulder, a registered nurse employed as a training officer in staff development at the Boulder River School and Hospital, has worked with the DD for six years.

Senator Smith said a tremendous amount of time and money put into this committee. This report was delivered to the Governor October 30. He also read the cover letter in the blue book from William L. Mathers, Chairman of the House Bill 909 Council since Mr. Mathers could not be present. He said he wanted to explain that Mr. Mathers had played a very important part in putting this together. I am introducing this as a request from the Governor and there are some other sponsors on the resolution. (These names were turned in, and are attached as exhibit #3). It does not mean we have not made great strides in giving services with our institutions. There are 21 recommendations in the proposals and 2 of them stand out. Recommendation #1, "The council recommends that the state continue and expand its present efforts to serve existing and potential recipients of services for persons with developmental disabilities and that it do so in a timely and appropriate manner" (details on page 5 of the blue book) and Recommendation # 6. This reads "The council recommends that DD services be combined within the Developmental Disabilities Division (DDD) of SRS. Services to be combined include those presently in the DDD, the Boulder River School and Hospital (BRSH), Eastmont Human Services Center (EHSC), and DD case management services." (details page 11, blue book) He said # 1 addresses the 800 DD persons receiving little or no services and # 6 which he felt was a very good recommendation since it will combine all DD services into one agency. A lot of the things we are doing was not to the benefit of those we are providing services to. While you may disagree with many, you will, I think, have overall agreement that it will be good. I certainly support the concept, but not necessarily all the recommendations. It is up to you to supply input. The reason I have taken such an interest -- I have a cousin in the institution in Boulder.

PROPOSERS OF SENATE JOINT RESOLUTION # 9:

Gene Huntington, Senior Administrative Assistant, Governor's office, said there were several people to testify and he would call them and let them speak to the issue.

Glen Roush, Cutbank and a member of the 909 council, said it was a charge of the Legislature to study the situation at Boulder, that the future of DD people and the future that is best for them. All 11 members of the council support the recommendations in the blue book, and while there was some disagreement but they were adopted unanimously. He said he felt the cost should probably not be the # 1 consideration of care, that while total cost certainly must be considered because that is the bottom line figure, services should probably be the first consideration. He said in regard to the employees at BRSB there are about 400 jobs and they are jobs that are not very lucrative. The committee did not say they were going to terminate BRSB, but to resolve the question of it. He said he believed there was a need for a state institution at Boulder that would probably retain 60 beds. Community based service is not new but we do need to police the group homes and stay on top of them and observe the operation of them. He said that those who could be moved and can be cared for in community based services can be cared for at a much less cost to the state.

Richard Swenson, Helena, said he worked with Boulder in the early '70's and saw the process as it began and has been involved in the DD system for 10 years after it. He said the committee began by asking what Boulder's role should be. In '73 it became apparent the patients could not be protected with the over crowding, safety, etc. Now the problem is, should we continue to see Boulder as a bad institution or look at it in another light. The committee decided it should be part of the continual care in Montana. A safety net condition. Parents who are fearful of what might happen to a child if the parent should die, etc. Another role is the care of anti-social -- people who have to be isolated from the community. The care of the severely retarded people, etc. Montana has laws on the books on de-institutionalizing etc. We chose the two roles that made sense. Boulder has 200 residents at the present time, we had a lot of input, and are trying to make some sense.

Barbara Sutherlin, Boulder, said she was a member of the Council, supports the blue book recommendations and has some feeling about the Governor's proposals. There is a little difference in some of the priorities. One perhaps is the high priority on recommendation # 2 of the blue book based on the fact there are 800 in the community system living in their own homes that are not getting full services that they deserve by law. The Governor's plan is based on a rapid de-institutionalization to the detriment of services to the 800 people out there in need of receiving services. I think there are quite a few who will support the DD intensive service models. Only with this type of model is it possible to take them out of BRSB which is the only place in the

state where they receive the full range of services. Not even in Eastmont do they offer the same care. If you spend a lot of dollars to move people out, the others will still be there on the waiting list and will still be out. There are not enough work-shops nor enough homes to put them in. These have to be expanded. We cannot move people through the bottle-neck. You may not be able to accomplish anything this biennium--this is a long range plan. Please, get something started. I would have one other comment. One of the committee issues we have got to place DD services under one roof. We cannot have the constant fight between them. You get Boulder and Eastmont along with the other community based systems and they will be no longer institutions put a part of the system. You have some choices as to how you want to do it, but do it! Exhibit 4-A, attached.

Jean Meyers, Kalispell, representing Flathead Industries for the Handicapped, her statement Exhibit # 4, read the letter from Bill Crivello, member of the 909 council. His letter is attached as exhibit # 5.

Dr. John Opitz, medical consultant retained by the committee, gave testimony for SJR 9, Department of Medical Genetics, Shodair Hospital. His testimony is attached as exhibit # 6. He said he had his first experience with Boulder in 1963 under Dr. Palister, and in the summer worked there every year. He said you have all seen Ted Block's little blue book. We did not recommend patients be kept or moved, we were asked to evaluate the patients there.

Vernor Bertelsen, Chairman of the DD Council said the DD PAC is a 22 member committee. This is Legislators, DD people and service people dealing with DD people. Our main problem is the care of the DD people in Montana. Prevention: For too long we have concentrated our efforts on care and maintenance rather than prevention. We cannot afford to let young mothers destroy their children because of their negligence in regard to alcohol and drugs. The DD PAC 100% supports wholeheartedly the recommendations of this committee. We ask that you do lend your support to this program for Montana.

Gene Huntington, Governor's office, gave testimony, exhibit # 7 which is attached. He said the Governor accepted the recommendations and then they had to organize the 21 recommendations and came up with 5 goals. Each goal is a number of specific directions that we feel have to be done to meet this goal. The executive budget as presented contains funding to implement some of this. We were directed by 909 to propose alternatives and a cost comparison. He said the charts, etc. would explain the cost comparisons, and that this was a long range plan, but that the time to begin is now.

Mike Muszkiewicz, Administrator of the DD Division of SRS told what they do in community services as alternative programs to some who used to abide in Boulder. He talked of a plan for 7 hours of training at the centers, etc., then relocation in whatever. He said there approximately 90 FTE (Professional and

para-professional people) for each center. He gave the qualifications of the centers and said the total capital debt would be \$2.7 million, or \$333,000 a year over 20 years as a debt service. He said he felt the Governor's plan was 1. meeting intensive services, 2. 24 hour nursing staff, 3. totally dependent on staff (there are approximately 55 and part at Eastmont), and 4. risks to themselves or others. Those needing a secure environment would be contained to Boulder. Approximately 80% of Eastmont could be served in community centers. Approximately 40% of Boulder could be served in the regional resource center.

Gary Marbut, member of the DD PAC, and the parent of a DD son, Randy. He said he endorses the 909 Council recommendations and the Governor's plan; and would like to support and endorse the SJR 9. He talked about facilities in other areas and showed a slide show on the Denver area. He said Denver does not recommend cluster housing. Colorado has a total of 3500 square foot homes, they have neighborhood involvement, they cost \$250,000 and \$65,000 for acquisition sites. The cost is \$115 a day per resident. This includes all care and clothing, food and salaries to the help.

A girl called Chris talked about some of the Denver facilities, the salaries, etc.

AN OPPONENT (or semi-opponent) was allowed to interrupt the proponent testimony since she had to leave for Butte. Her name was Jean Sheehan. I am opposing this move at this time. Also I am concerned about the economic factor at this time. Testimony attached, exhibit # 8.

Joe Roberts, Helena, continued as a proponent of SJR 9. He said, I called the Department of Institutions to ask about new admissions to BRSB. From July 1, 1979 to the present time there have been 16. I wish you would remember that. We are developing services in the community to meet this service. We are training and helping parents. Let's not build a system based on a system because it is there, but let's build one that looks to the future.

Paten Terry, Glasgow. Region 1 is Miles City. 13% of the total population of the state. They have 3 administrative staff people compared to 7 in 1978. We endorse the concept in 909, and also are committed to address the waiting list to reduce the numbers. H.B. 909 proposes to reduce it by 25%.

Greg Olson, representing West-Mont Habilitation Service spoke as a proponent, attachment, exhibit 9.

Vonnie Koenig, Kalispell, representing Region V DD Council, and Flathead Association for Retarded Citizens said she supported SJR 9. (Exhibit # 10 attached.)

Gordon Vandevere, Billings, parent and representing the Montana Society for Autistic Children. His testimony is attached, Exh. 11.

Patricia Lane, Region V Chairman, Flathead County, had a letter introduced urging support of SJR 9. Exhibit # 11 enclosed.

Alden Beller's statement of support said that Montana has come a long way. When my son was born there was nothing in the way of services for him. Now there are services available immediately. This is the greatest thing that can be happening. Statement attached, exhibit #12.

Lorrie Heferieder, Billings, Director of Personnel service in Billings, said before she moved to Billings and she wanted to introduce a young man who had formerly been a resident of the BRSB. Exhibit 13, attached.

Joe Watkins, a young man who had been in Boulder, is now in Billings and is at the present time working at least 20 hours a week. He washes dishes and tables and earns \$3.35 an hour. His testimony, exhibit # 14, is attached.

Betty Streeter, Ryegate, parent and consumer, said she was in support and her statement is attached, exhibit # 15.

Shirley Rammer, Great Falls, spoke in support of SJR 9 and her statement is attached as exhibit # 16.

Representative Bardanoue mentioned there were over 900 residents at Boulder when he made his first visit there.

Hazel Sande, Ft. Benton, spoke briefly in favor of SJR 9. Her statement sheet is attached as exhibit # 17.

Rita Wheeler, Billings, spoke in support of SJR 9. She said she was a director of special training for the people. She said if you read the red book the Governor's plan does address the waiting list.

Others testifying in favor of SJR 9, or turning testimony or asking that their written testimony be attached are:

Janet Bailey, Parent Support Association. Exhibit #18.

Donald E. Espelin, M.D., Medical Director, Montana Perinatal Program, Health Services and Medical Facilities Division.

Statement attached as exhibit # 19.
Sue Jackson, Client Services Coordinator of Developmental Disabilities Division gave information in regard to the community waiting list for services. Exhibit # 20, attached.
Billie Miller, Helena, gave support for the 909 findings and recommendations concerning the future services of DD persons. Her statement, attachment # 21.
Faith Bollman, representing Region 3, DD Council & as a parent, Billings, attachment # 22.
Helena Area Chamber of Commerce, gave written testimony, attached as exhibit # 23.
Linda Cobban and Patrick Cobban, statement attached, exhibit # 24.
Dan Dennehy, Butte, testifying in behalf of Don Peoples, exh. # 25.
Sister Elizabeth Henry, representing West-Mont. Exhibit # 26.
Rae Jean Koch, Billings, representing herself. Exhibit # 27.
Rusty Koch & Katherin Kelker, Billings, statement attached # 28.
Florence Massey, Billings, Region 3 DD Council and parent # 29.
Clyde Muirheid, DDPAC staff director, attachment # 30.
Mrs. Betty L. Nelson and Olaf R. Nelson, statement attached # 31.
Paul N. Odegaard, Billings, Montana Society for Autistic Children attachment # 32.
Marty Onishuk, Missoula, phoned and requested her support be included in the record.
Beverly Owens, Regional III DD Council, attachment # 34.
Gary Oagnotta, Bozeman, Reach Inc., attachment # 35.
Philip Paull, Butte, attachment # 36.
Jay Prichard, Billings, Parent of Autistic son, attachment # 37.
Douglas D. Rauthe, Flathead Industries' for the Handicapped, attachment # 38.
Diane Savasten, Havre, Assn. of Independent Disability Services, exhibit # 39.
Peton Terry, Glasgow, statement sheet attached. Exh. # 40.
Wayne D. Wardwell, Jr., Hamilton, statement attached, exh. # 41.
Linda L. Zermeno, Billings, statement attached, exh. # 42.

Some additional names may be on the visitors' register which is also enclosed with this set of minutes.

Representative Bob Marks, District 75 said this is the district which is directly affected by SJR 9. He said there would be about 7500 people concerned about the welfare of the people who are in BRSB, working there, or put on the job market. Boulder River School and Hospital has been in the district and, since I have been in Legislature, I take the opportunity to visit the group homes in Helena as well as the BRSB frequently. I am also on the Board of Directors for Easter Seal. You have before you a study done by Executive order of the bill of which I was the sponsor. The recommendations in the blue book and the recommendations to the governor, and goes on top of the pile the L.F. brought out last year. The Governor responded and prepared the red book. The Governor sorted out a few priorities. The process I think, has taken place. He put together a volunteer bunch at that time that made 100 recommendations or over and the Governor took the ones he wanted and presented to the Legislature and they chose the ones to support. A number was adopted by the Governor. A number were not endorsed and not sent to the Legislature. A couple were -- 1. To get rid of the liquor system or 2. To close BRSB. The Governor did not even support them at that time. Those recommendations give you the opportunity to pick and choose. I am suggesting to evaluate and prioritize the ones you feel most important and the ones you feel the state can support.

Representative Marks said he had an amendment and with the amendment he could support the bill. He walked through the amendments so the committee would be familiar with their intent. Amendments are attached at exhibit # 43.

Representative Marks gave some statistics as to the number of people in BRSB, the quality of care they needed, the staff's training and ability to provide the specialized care, and the effects of unemployment would be on a town which was built around the BRSB. He talked of the naive being taken to Boulder, the DD audit report in relationship with providers, an analization of costs on the community, school, fire, and police and the cheaper help which is available in Boulder. He said if they went elsewhere they would probably organize, but that they now received minimum wage or slightly more.

Bob Longmire, Public Schools, Boulder said he would support SJR 9 with amendments. He drew attention to the first section. Services for all the first recommendations in 909 talks about the 800 people that should be served. The red book--at the first is to serve 285 of these people. I would hope you are committed to the best service for these people. What is wrong with the 285 new positions and probably over 800 unserved people in the end of the biennium 2 or 300

people per annum--if all you take care of is 285 you cannot reduce it. I basically support deinstitutionalization for some. It is a success for some. In re: the young Joe Watkins, Billings, he had attended public school in Boulder. He is not a typical resident of Boulder, but a young man who deserves services and I thank God he got them. He discussed the care in Boulder and said all emphasis should be on serving the unserved. He said sometimes there were re-admissions, or should be, because some persons taken from Boulder were unhappy and did not do well in a community. He said if you pay the staff poorly as is often done in the community centers you cannot provide the services from dedicated people, they will have to get other jobs.

Margaret McGuire, spoke briefly, her testimony is attached at exhibit # 44.

Bernard Miller, Helena, parent of a retarded child 31 years old, spoke briefly and the statement is attached, exhibit # 45.

Jim Sheehan, Butte, spoke on SJR 9 briefly. He said he was here because some people coming over asked him to ride along. He made general comments and said it seemed to him it would take 20 of the homes to take care of just the people in Boulder and would be very costly.

Terry Minow, Montana Federation of Teachers, spoke in support of the blue book recommendations and said we feel the people being unserved or unserved have to be served before they take people out of Boulder, and that employees should be offered comparable jobs elsewhere.

Connie Grenz, Boulder, occupational therapist, talked about the patients at Boulder and left a written statement, attachment # 46.

David Morey, Boulder, representing AFSCME Local # 971 left a written statement, attached as exhibit # 47.

Ken Royhyans, Helena, spoke for himself and some of the members of the Region IV DD Council of which he is chairman. His statement is attached as exhibit # 48.

Bill Shoquist, a 20 year retired employee of BRSH said there were 958 residents when he started working there. He said he worked out of the shop complex. A resident worked with him for 27 years. This resident, in the de-institutionalization period in about '75 was sent to Harlem. Since that time the residence has been taken down to 200 some people. Hardly any one has testified against the recommendations in their entirety. I would be one of the

first people to ask you to help these people. I think Representative Marks's amendment recommendations to the resolution to be the closest thing you could do.

Paul Kindt, representing the employees at Boulder, spoke briefly and left a prepared statement, attachment # 49.

Joe N. Weggenman, Helena Area Chamber of Commerce, spoke on SJR 9 briefly, his statement attached # 50.

Dave Kirsell, Former Mayor, Served on H.B. 909 said, I think 909 was well thought out. One thing that has not been said tonight we should have set some priorities. The 800 that are under-served or unserved should be taken care of first.

Richard Llewellyn, attorney, said he has been involved with the rights of DD for 12 or 14 years. He said he was a former director of government operations units of the office of Tom Judge. We undertook some really extensive analysis of Boulder and the DD people of the laws in Montana today. I served as county attorney in Jefferson County. I am in support of the amendments to the bill. The problems there have been of long standing, and have led to a number of law suits, most of them of which I participated in. He said one of the arguments he has on group homes being so successful is observing DD people eat out of the dumpsters in his area. He said the reports in the resolution are flawed. They overlook the legal rights of 800 some plus people who are either not being served or unserved. He said he had many of these people as clients and feels this is a time for the state to be careful and not a time to deinstitutionalize the hard core DD who would have the least chance of being helped to the detriment of the people who can be helped. What if a class action is brought when you adjourn? If you have a class action brought by just one who is not being served, it will be trouble. Until those persons are being served it is not the time to serve the people elsewhere who are already being served. R. Nadiean Jensen, Helena, representing AFSCME left a brief statement, attached as exhibit # 51.

Statements from two other witnesses are attached as follows:

Janet Tate, Boulder, statement attached, exhibit # 52.

Joe and Maxine Dykman, Harrison, attachment # 53.

QUESTIONS FROM COMMITTEE MEMBERS:

Representative Waldron: I would address this question to Gene or someone on the study. In talking about the 800 persons we are saying are not being served now. Could you address this?

Mike Muszkiewicz, administrator of the DD Division, said most of these people are receiving services. The 800 people are probably like 300 in actual numbers--they are on waiting lists for group homes. Some are in group homes and are ready to be independent. Some are on more than one waiting list. In adding up all these names it comes up to the 800 mark.

Representative Waldron: The waiting list. Those people are likely to move into the support eventually and someone else will move into that slot. The names change as the people move into another slot? Muszkiewicz: If on the list for a group home they will probably be on the list for schools too.

Sue Jackson: I can't give you the present numbers on the 800 people needing services, and those in a home getting nothing. There is less than 1/2 of the 800 that are receiving no services now.

Senator Keating: Will we hear this again in separate committees?

Representative Bardanouve: In our committee this will be the testimony.

Senator Keating: Will we just have executive session?

Senator Regan: Not another full blown hearing. I will poll the committee. It will serve no value to have all these people come in to say it all again. There will be no executive action without notice going out.

Senator Keating: Financing. Will someone who has served on this get me some information--Gene--I would like to know as soon as possible the 11 counties that have passed the 1 mill levy to raise funds for DD, and I would like to have a break-down of all the DD people who will receive services and from what counties.

Gene Huntington: We will do it.

Representative Marks: I would address this to Mr. Muszkiewicz. Do you have an identification of the service requirements of the 800 people that Mrs. Jackson identified? Have you identified each of those people?

Mike Muszkiewicz: Only those people in service for 30 days and families have been contacted or a provider of services and wants their child or adult on a waiting list.

Representative Marks: How many have not been through? Ans. I don't have the figure, but can get it.

Representative Marks: 400 or so taken out, how do you count them? Ans. I H P's, approximately 400. As to the exact number, I would have to get back to you as to those people who have not had it or not in a I H P.

Representative Marks: How do you count them? Ans. They have requested those services.

Representative Marks: For that category who have asked or are not receiving services you have a good handle on it?

Muszewicz: I think we have a good handle on it.

Representative Moore: In regard to this coming before the executive action in Appropriations Committee--I would request the DD Department bring to us a break-down of all functions. What people, what branches and what they do. Several years ago we talked about putting one government system and could not find on the laws just where it would be. I would like to have the division chief explain this so we are on the right track.

Representative Bardanoue: This has to pass the Senate Committee and the Senate before we get it.

Senator Himsl: I was interested in the service provision at Eastmont not being as adequate as that of Boulder. I believe Barbara mentioned this.

Barbara Sutherlin: Not as adequate as at Boulder. Full time O. T. people, Eastmont is only on contract and comes in once a week. The dietician comes in once a week at Eastmont and is full time at Boulder.

Senator Himsl: If we let some residents be transferred to Eastmont, are you saying it is not adequate?

Barbara Sutherlin: No. There would have to be some new expenditures to comply with regulations for the type of client Boulder has that was moved. If it came down to the ones to move and the non-ambulatory cases out of Boulder (the total care) this would do one thing not proposed. 22 residents in that category whose parents live on the western side of the state--15 in the eastern. Some have no parents or they are not interested or something. One of the big issues from parents in the community was to place service and people as close as possible to their own community. There are some bugs that have to be worked out.

Senator Christiaens: Do you agree with the assessment of Dr. Opitz in regard to them fitting into the community?

Barbara Sutherlin: I think the 156 they would move and put into an intensive service model somewhere. The rest, I agree will not succeed in the community. It will be a lot more expensive way than now.

Senator Gage: You gave us a lot of statistics awfully fast. Some clients are because of genetic reasons. Mr. Bertelson said some preventive methods. How many have a fair amount of preventive effort in this program?

Dr. Opitz: The facts are between 50 and 60% a year--the same in prevention. Most of the genetics are predisposed retardation. One family of 7 retarded males would spend a period of 103 years collectively at a cost of about \$2.6 million was identified. This was a condition of which could have been prevented. None of the mothers had received counseling; most were of the same family unit. The other 60% may not be able to be identified.

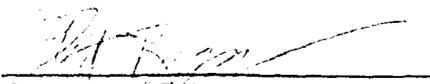
Representative Marks: But there is some indication of where is the money best spent. Having come through the program of Shodair, in your opinion, where is the buck spent? Opitz: If you had a limited number of bucks. The dollar are best spent preventedly. There is no question about it. A statewide genetic program would at the most cost \$1/4 million. That is not to say that individuals should not be moved to the closest source of home and the best care.

Senator Story: We are right now providing \$400,000 on the sub-committee, and \$800,000 for family planning and some other programs.

Senator Smith: In closing, I don't think I can add anything to what has been said. After listening to the testimony now the hard decisions are yet to come. As a member of the Finance and Claims Committee, I will be available to do what I can to help.

Representative Bardanouve: On behalf of the Senate and the House committees, we would like to express our appreciation for the fine testimony and the courteous attention you have given us.

The joint Senate Finance and Claims and House Appropriation committee was adjourned at 10:30 p.m. **Note: A complete taped recording available if necessary in House Appropriations Committee.



Senator Regan

Representative Bardanouve