Summary of Health and Human Services Legislation 2013 Legislative Session

Prepared for the Children, Families, Health, and Human Services Interim Committee by Sue O'Connell, Research Analyst June 2013

The 2013 Legislature acted on a number of bills involving health care, health insurance, children's issues, and human services. This summary provides an overview of major legislation – excluding the budget provisions of House Bill 2 and related bills – in the following areas:

Children's Issues
Health Care/Health Insurance
Medicaid
Mental Health

Public Health Senior Citizens CFHHS Interim Committee

The summary focuses primarily on legislation that was approved by the Legislature and has or will become law. However, it also includes bills that were proposed by the 2011-2012 Children, Families, Health, and Human Services Interim Committee (CFHHS) but that failed during the legislative process.

CHILDREN'S ISSUES: ABUSE/NEGLECT/FOSTER CARE

- HB 74 Requires the Department of Public Health and Human Services (DPHHS) to provide records of child abuse and neglect investigations to the Attorney General's Office, a county attorney, or a law enforcement officer upon request. The agency also must provide the reports without request in any case involving the death of a child, a sexual offense, or abuse or neglect due to exposure to criminal manufacture or distribution of dangerous drugs.
- HB 76 Creates an Office of the Child and Family Ombudsman within the Department of Justice to review and investigate complaints involving the handling by DPHHS of child abuse or neglect cases and to help interested parties gain access to information about the case and about the procedures used by DPHHS to investigate a complaint.
- **HB 131** Allows DPHHS to share information about a child abuse and neglect case with any individual who is required by law to report suspected abuse or neglect, as well as with any other individuals with whom the person works in an official capacity.
- Requires DPHHS to verify to a person reporting suspected child abuse or neglect that the department has received the report and to describe the level of response the department has assigned to the complaint. Also allows DPHHS to disclose records related to an investigation to a child's grandparent, aunt, uncle, brother, or sister.
- SB 351 Allows DPHHS to speed up the process of checking the criminal history of adults living in a home where a child may be placed following an emergency removal from the child's home. The department will be able to place children after conducting a name-based background check of adults in the home, before undertaking the more time-consuming fingerprint background check that will still be required.

HEALTH CARE/HEALTH INSURANCE

Health Care

- **HB 459** Prohibits health care providers and facilities from asking about a patient's ownership, possession, or use of firearms and prohibits them from refusing to provide health care because a person declines to answer questions related to the ownership, possession, or use of firearms.
- **SB 103** Expands from one to three the number of entities that may accredit Montana hospitals.
- **SB 149** Allows pharmacists to provide additional immunizations and establishes training and record-keeping requirements for the immunizations.
- **SB 235** Establishes procedures for auditing of pharmacies by health insurance companies and pharmacy benefits managers.

Health Insurance

- **HB 48** Revises laws related to the Insure Montana program to, among other things, clarify the eligibility requirements for a participating small business; prohibit premium assistance payments to a business owner or employee whose household income is greater than 400% of the federal poverty level; and allow an eligible small employer to participate in the program without having offered an insurance plan within the previous 2 years.
- **SB 55** Clarifies that health insurers are responsible for covering the costs of routine medical care for patients enrolled in cancer clinical trials.
- SB 84 Establishes requirements for health care providers who want to be certified as a patient-centered medical home and establishes that state and federal antitrust laws prohibiting collusion don't apply to standards used for the patient-centered medical home program.
- **SB 172** Prohibits dental insurance plans from requiring a participating dentist to accept fees set by the plans for any services other than services covered by the plan.
- SB 223 Requires the Montana Comprehensive Health Association to prepare for the termination of the high-risk insurance plans it offers, because people insured by those plans are expected to move into other insurance plans offered through the health insurance exchange that will be operating later this year. The high-risk insurance plans are subsidized with general fund and tobacco settlement dollars.
- **SB 270** Requires health insurers to cover the costs of health care services provided via telemedicine to the same extent that the services would be covered if they were provided through an in-person visit.

MEDICAID

- **HB 262** Allows DPHHS to provide Medicaid coverage to children who are in a guardianship that is subsidized by the department.
- SB 69 Allows DPHHS to seek a civil penalty against anyone who receives assets that were improperly transferred by a person trying to qualify for Medicaid coverage of long-term care costs.

MENTAL HEALTH

- **HB 16** Allows a person suffering from a mental illness to be committed or detained if the person appears to be substantially unable to provide for the person's basic needs of food, clothing, shelter, health, or safety.
- **HB 84** Revises the 72-hour crisis stabilization program to allow for payment of two psychiatric diagnostic interviews, rather than one, during the three-day stabilization period.
- **HB 583** Creates a Montana Suicide Review Team to review each suicide in Montana in order to compile statistics, analyze the causes of the suicides, and recommend measures for preventing future suicides.
- SB 11 Revises criminal justice laws related to offenders with mental illness to require that members of the Board of Pardons and Parole have knowledge of matters related to mental illness, that one member of the board be a mental health professional, and that probation and parole officers obtain at least one hour of training per year on mental illness. Also allows the Board of Pardons and Parole to require participation in a supervised mental health treatment program as a condition of parole for prisoners who were sentenced to the custody of DPHHS because they were guilty but mentally ill.

PUBLIC HEALTH

- HB 28 Expands the membership and duties of existing local Fetal, Infant, and Child Mortality Review teams to allow for the review of maternal deaths in order to analyze the causes of the deaths and recommend measures for preventing maternal deaths in the future.
- **HB 333** Exempts farmers who are selling whole shell eggs at farmers' markets from being licensed by the state.
- **HB 399** Exempts a person who is selling or offering hot beverages at farmers' markets from being licensed by the state.
- HB 630 Requires the departments of Agriculture, Livestock, and Public Health and Human Services to examine Montana food laws and recommend changes needed to streamline or update the laws and to comply with the federal Food Safety Modernization Act. The agencies also must assess the extent to which home kitchens may be used to prepare foods for sale to the public.
- **SB 94** Exempts people who exchange certain canned goods from being licensed by the state as a food establishment.
- **SB 112** Requires all school districts offering organized sports to remove a youth athlete from participating in an athletic activity if the youth appears to have suffered a concussion.

SENIOR CITIZENS

SB 134 Increases the criminal penalties for individuals who exploit a senior citizen or person with a developmental disability if the case involves money, assets, or property with a value of more than \$25,000. Allows for a prison term of 1 to 10 years and a fine of up to \$50,000.

CHILDREN, FAMILIES, HEALTH, AND HUMAN SERVICES INTERIM COMMITTEE

During the 2011-12 interim, the Children, Families, Health, and Human Services Interim Committee approved the drafting of 10 pieces of legislation. The 2013 Legislature approved six of the bills.

Two of the CFHHS bills were related to the House Joint Resolution 8 study of childhood hunger, while four stemmed from the Senate Joint Resolution 30 study of childhood trauma and one from the committee's review of topics related to the state Medicaid program. The two remaining bills were developed as part of the committee's oversight of DPHHS and other health and human services matters.

The CFHHS bills and the topics they addressed are listed below.

HJR 8: Childhood Hunger

The Legislature did not approve either of the two bills related to the committee's study of childhood hunger:

- **HB 98** Would have appropriated \$340,000 over the biennium to increase the use of the School Breakfast Program by paying the costs of reduced-priced breakfasts served by schools and providing one-time grants of \$500 to assist schools that started a breakfast program for the first time.
- **HB 99** Would have appropriated \$500,000 of unexpended Temporary Assistance for Needy Families funds to programs offering out-of-school food support activities.

SJR 30: Childhood Trauma

The Legislature approved two of the four bills related to the committee's study of childhood trauma:

- HB 76 Creates an Office of the Child and Family Ombudsman within the Department of Justice to help family members and others with questions related to the investigation of child abuse and neglect cases. House Bill 2 appropriated \$125,000 of general fund in each year of the biennium to pay for the office, which is due to sunset on June 30, 2015, unless the 2015 Legislature continues the program.
- Requires DPHHS to verify to a person reporting suspected child abuse or neglect that the department has received the report and to describe the level of response the department has assigned to the complaint. Also allows DPHHS to disclose records related to an investigation to a child's grandparent, aunt, uncle, brother, or sister.

The Legislature did not pass:

- HB 75 Would have required DPHHS to undertake the process of obtaining national accreditation of its child protective services. The House Human Services Committee instead asked the Legislative Audit Committee to conduct a performance audit of the Child and Family Services Division.
- SB 68 Would have transferred \$10 million from the general fund to the Endowment for Children. Interest from the endowment is used to fund local programs that seek to prevent child abuse and neglect or mitigate the effects of abuse and neglect.

Medicaid

The Legislature approved but the governor vetoed **HB 12**, which appropriated about \$6.5 million in general fund to DPHHS to provide one-time payments to Medicaid providers. The payment was designed to recognize the impacts that providers experienced when the scheduled rate increase for fiscal year 2011 was eliminated. Most Medicaid providers were slated to receive a 2% increase in reimbursement rates on July 1, 2010. Physicians were scheduled to receive a 6% rate increase.

The governor's veto was subject to a post-session override vote because HB 12 passed by more than a two-thirds vote of each house – 79-21 in the House and 41-9 in the Senate. A two-thirds majority of each house is needed to overturn a veto. The HB 12 override effort succeeded in the Senate, 38-6, but fell eight votes short in the House, where the tally was 59-32.

Agency Oversight

The Legislature approved two bills developed as a result of the committee's agency oversight responsibilities for DPHHS and other matters related to health and human services:

- **HB 28** Allows for the review of maternal deaths by local mortality review teams, to determine the causes of the deaths and to recommend measures to prevent future maternal deaths.
- Revises the laws relating to reports of alleged abuse at the Montana Developmental Center in Boulder, to allow the federal advocacy agency for developmentally disabled people to receive reports of abuse or mistreatment and to require investigation of the allegations by the Department of Justice, rather than DPHHS.

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