MINUTES

MONTANA HOUSE OF REPRESENTATIVES
59th LEGISLATURE - REGULAR SESSION

COMMITTEE ON HUMAN SERVICES

Call to Order: By **CHAIRMAN ARLENE BECKER**, on January 21, 2005 at 3:00 P.M., in Room 472 Capitol.

ROLL CALL

Members Present:
Rep. Arlene Becker, Chairman (D)
Rep. Tom Facey, Vice Chairman (D)
Rep. Don Roberts, Vice Chairman (R)
Rep. Emelie Eaton (D)
Rep. Gordon R. Hendrick (R)
Rep. Teresa K. Henry (D)
Rep. William J. Jones (R)
Rep. Dave McAlpin (D)
Rep. Tom McGillvray (R)
Rep. Mike Milburn (R)
Rep. Art Noonan (D)
Rep. Ron Stoker (R)
Rep. Bill Warden (R)
Rep. Jonathan Windy Boy (D)

Members Excused: Rep. Mary Caferro (D)
Rep. Pat Wagman (R)

Members Absent: None.

Staff Present: Susan Fox, Legislative Branch
Mary Gay Wells, Committee Secretary

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

Committee Business Summary:
Hearing & Date Posted: HB 80, 1/18/2005
HB 31, 1/18/2005
HB 289, 1/18/2005
Executive Action:

HEARING ON HB 80

Sponsor: **REP. MARGARETT CAMPBELL, HD 31, POPLAR**

Opening Statement by Sponsor:

REP. MARGARETT CAMPBELL opened the hearing on **HB 80.** This bill would allow Child Support Enforcement Division (CSED) to interact with tribal IV-D programs from the Federal Social Security Act. IV-D establishes the federal-state tribal program under which states, territories and now tribes may receive federal funding to operate a child support enforcement program. A tribe may or may not establish a IV-D program. She gave further background information.
{Tape: 1; Side: A; Approx. Time Counter: 0 - 7}

Proponents' Testimony:

Lonnie Olson, Administrator, Child Support Enforcement Division, He was appreciative of the sponsor's opening and then said that the bill does not require any Montana tribes to establish such a system; but if they choose to do so, the CSED will be able to treat them as part of the national IV-D system.
{Tape: 1; Side: A; Approx. Time Counter: 7 - 9.2}

Opponents' Testimony: None

Informational Testimony: None

Questions from Committee Members and Responses:

CHAIRMAN BECKER inquired if the bill would have any affect on the sovereignty of the tribes. **Mr. Olson** replied that it would have no affect on their sovereignty and that any tribe could choose for themselves if they wished to establish a IV-D program.

Closing by Sponsor:

The sponsor closed.
{Tape: 1; Side: A; Approx. Time Counter: 9.2 - 10.4}

HEARING ON HB 31

Sponsor: **REP. DON ROBERTS, HD 56, Billings**

Opening Statement by Sponsor:

REP. DON ROBERTS opened the hearing on **HB 31**. This bill would establish an office of substance abuse prevention and treatment. He explained that an interim committee spent a year putting together information. It became apparent that Montanans were facing a scourge in the form of methamphetamine. Meth is very addictive and is rapidly becoming one of the biggest problems in Montana. The bill would establish a drug commissioner who would oversee and coordinate the prevention, treatment and organization of different groups. He would be a resource to them. He would report directly to the Governor; he would be on a cabinet level; he would work with the courts and the crime control board; and, in 2006, he would report to the Legislature. He then gave the committee more information on methamphetamine.
{Tape: 1; Side: A; Approx. Time Counter: 10.4 - 15.4}

Proponents' Testimony:

Anna Whiting-Sorrell, Family Policy Advisor, Governor's Office, reported that the Governor was in full support of the bill. He also wants this office to be located directly in the Governor's offices.
{Tape: 1; Side: A; Approx. Time Counter: 15.4 - 17.4}

Don Hargrove, Montana Addiction Services Providers, fully supported the bill. His group recognizes the dangers of methamphetamine to Montana. He related some of his own background and experiences in the fight against addiction to drugs and alcohol. He encouraged a do pass.
{Tape: 1; Side: A; Approx. Time Counter: 17.4 - 28.7}

Pat Melby, Montana Medical Association and Rimrock Foundation, Billings, stated that HB 31 is an opportunity to coordinate and integrate the treatment side of the equation with the law enforcement side. They urged a do pass. He handed in his testimony.
EXHIBIT(huh16a01)
{Tape: 1; Side: A; Approx. Time Counter: 28.7 - 29.7}

Cliff Christian, American Stroke Association and American Heart Association, said they are strong proponents of the idea of coordinating the prevention dollars because these are massive dollars. But at the same time, he cautioned the committee to be careful that this effort doesn't lead to criminalization of addictions. He himself has dual addictions. Both are under control; he didn't break any laws; and he is not a criminal. He stressed that evidence-based coordination is crucial.
{Tape: 1; Side: A; Approx. Time Counter: 29.7 - 32.6}

Roger Curtiss, Director, Alcohol and Drug Services, Anaconda, informed the committee that he has been involved in this area for 25 years and was pleased to see this bill come forward and urged a do pass.
{Tape: 1; Side: B; Approx. Time Counter: 0 - 1.8}

Chris Christiaens, representing himself, has worked in this field for many years and was a former legislator. He has been urging folks for the last five or six years to start working toward the treatment of methamphetamine, clean-up standards or whatever needs to be done to address the scourge of this addiction. He urged that a direction and policy be formulated and felt that this bill would do just that.
{Tape: 1; Side: B; Approx. Time Counter: 1.8 - 5.6}

Kris Minard, Montana City, representing herself, stood in support of HB 31.
{Tape: 1; Side: B; Approx. Time Counter: 5.6 - 6.7}

Opponents' Testimony: None

Informational Testimony: None

Questions from Committee Members and Responses:

REP. JONATHAN WINDY BOY suggested that Housing Urban Development (HUD) be included in the coordinating agencies. **REP. ROBERTS** concurred that HUD should be included. He noted that for every pound of meth that is made, six pounds of toxic waste remain. It is extremely volatile and it permeates the walls of everything. A meth lab in a rental unit would bring fear to a landlord. The average clean-up is about $5,000. In more involved labs it could be $150,000. They used to make meth in a house, but now it can be made in the back seat of a car.
{Tape: 1; Side: B; Approx. Time Counter: 6.7 - 11.9}

REP. TOM MCGILLVRAY inquired of the sponsor the kinds of outcomes he hoped for. **REP. ROBERTS** explained that this program is different than the federal government in that it will be community based. People know each other. In Great Falls, they have families come in together. They coordinate the efforts. He spoke to women in prison who felt they were the most important person in the neighborhood because neighbors would come to them to buy the meth.

REP. MCGILLVRAY declared that there were eleven executive and judicial branch organizations and nine resource organizations that the drug commissioner would coordinate. He inquired if there would be a consolidation of financial resources from some

of these organizations. **REP. ROBERTS** replied that is exactly where a great deal of the money will come from.
{Tape: 1; Side: B; Approx. Time Counter: 11.9 - 16.2}

REP. MIKE MILBURN commented that he was pleased to hear from the sponsor that many times these programs don't work because the federal government is too far removed from the scene. **REP. ROBERTS** stated that prevention is family based and community based with long term support efforts. Too much money is spent in apprehending people and putting them in jail.
{Tape: 1; Side: B; Approx. Time Counter: 16.2 - 20}

REP. DAVE MCALPIN asked if the Governor would be combining his efforts to stop tobacco use among the youth with this program. **Ms. Whiting-Sorrell** believed that the whole prevention effort would be combined and coordinated and have the full force of the Governor's office behind the effort.
{Tape: 1; Side: B; Approx. Time Counter: 20 - 21.1}

REP. TOM FACEY inquired if the three full-time employees (FTE) were included in Governor Martz' budget or Governor Schweitzer's new budget. **Ms. Whiting-Sorrell** supposed that it was not in Governor Martz' budget and this would be an additional fiscal cost. **REP. FACEY** commented that he had a concern with the cost. If the state is spending money, he would like to see the spending come from anticipated savings through coordination.
{Tape: 1; Side: B; Approx. Time Counter: 21.1 - 22.6}

REP. MCGILLVRAY solicited what evidence-based coordination means. **Mr. Christieans** said that evidence-based health care is essential. Programs should not be set up unless evidence is available to prove that they will work. **Mr. Christian** concurred with Mr. Christieans. He did not agree with the concept of "lock them up and throw away the key." He proposed thoughtful research and evidence that what would be attempted would, in fact, work.
{Tape: 1; Side: B; Approx. Time Counter: 22.6 - 24.9}

CHAIRMAN BECKER felt that one person, the drug commissioner, would be overwhelmed with all the previously listed responsibilities. Would his office concentrate on methamphetamine. **REP. ROBERTS** responded that meth is just one drug, albeit the most pervasive. One addiction often leads to another and that is the reason agencies need to work together. He felt that the program would be very workable.
{Tape: 1; Side: B; Approx. Time Counter: 24.9 - 28.5}

Closing by Sponsor:

The sponsor closed.
{Tape: 1; Side: B; Approx. Time Counter: 28.5 - 32}

HEARING ON HB 289

Sponsor: **REP. BILL GLASER, HD 44, HUNTLEY**

Opening Statement by Sponsor:

REP. BILL GLASER opened the hearing on **HB 289.** HB 289 would offer a reimbursement to anyone who would stop smoking. The bill would take 10% of the projected $36 million that would come in from the passage of I-149. He felt that since this money comes from those who smoke, a portion of it should be returned to those who decide to quit.
{Tape: 2; Side: A; Approx. Time Counter: 0 - 9}

Proponents' Testimony: None

Opponents' Testimony:

Cliff Christian, American Heart Association, was in opposition to the bill and handed in his testimony. He also handed out a "Montana Research Funding History" done by the American Heart Association.
EXHIBIT(huh16a02)
EXHIBIT(huh16a03)
{Tape: 2; Side: A; Approx. Time Counter: 9 - 14.7}

Kathy McGowan, American Cancer Society, said that cessation of smoking is of great importance, but that is only one part of the problem. The people who voted for I-149 were not being vindictive, but were concerned for the health issues involved. Also, some of the money must be spent on counter advertising.
{Tape: 2; Side: A; Approx. Time Counter: 14.7 - 18.6}

Pat Melby, Montana Medical Association (MMA), was sympathetic to the reasons behind HB 289. The physicians who voted for I-149 did not have a dislike for smokers. The members of MMA voted for I-149 because they see the ravages caused by smoking. I-146 directed that a good portion of the money raised by the new taxes would be used for tobacco-use prevention. There seemed to be no evidence that a state reimbursement program for cessation would work. The first priority should be to convince people to quit

smoking. That needs to have a comprehensive approach to prevention and cessation.
{Tape: 2; Side: A; Approx. Time Counter: 18.6 - 20.8}

Mary Williams, Volunteer Advocate, AARP, stood in opposition to the bill. She handed in her testimony and information for the committee.
EXHIBIT(huh16a04)
{Tape: 2; Side: A; Approx. Time Counter: 20.8 - 22.9}

Informational Testimony:

Todd Harwell, Chief, Chronic Disease and Health Promotion Bureau, DPHHS, gave information concerning HB 289. He handed in his testimony.
EXHIBIT(huh16a05)
{Tape: 2; Side: A; Approx. Time Counter: 22.9 - 29.3}

Questions from Committee Members and Responses:

REP. RON STOKER inquired if the advertising agencies were the same as the tobacco companies. He assumed they must know what works. **Mr. Harwell** answered that they use a competitive process.

REP. DAVE MCALPIN asked if evidence-based cessation programs are being used based on Center for Disease Control's (CDC) recommendations. **Mr. Harwell** replied that CDC and researchers in the U.S. have done extensive evaluations of what works for smoking cessation and what does not work. They have published a number of documents that recommend certain programs. Quit Lines are the most effective and cost effective way to deliver a cessation service across the State.
{Tape: 2; Side: A; Approx. Time Counter: 29.3 - 32}

REP. JONATHAN WINDY BOY wondered if Mr. Harwell had information from CDC concerning statics on Montana. **Mr. Harwell** offered that CDC provides recommendations on levels of funding that will allow states to implement programs. Currently, state funding for tobacco use preventions is under what CDC recommends.
{Tape: 2; Side: B; Approx. Time Counter: 0 - 2.6}

REP. BILL WARDEN wanted to know if there were qualifications needed for people to enroll in the Quit Line program. **Mr. Harwell** stated that people who enroll in the phone-counseling cessation program, and have no insurance or their insurance does not provide coverage, are able to get counseling free of charge.

CHAIRMAN BECKER asked where the funds come from. **Mr. Harwell** explained that the money comes from the Master Settlement Agreement(MSA)and I-146.

CHAIRMAN BECKER stated that in the 2003 Legislative Session, the amount of money was cut that went into prevention and treatment and was put it into the Prevention Stabilization Program. She asked if those funds were going to be put back into prevention programs. **Mr. Harwell** responded that other Human Service programs were funded through the Prevention Stabilization account, but his understanding is the Governor is going to move those funds to the general fund to be used for prevention and treatment.

REP. MCALPIN questioned if there were any groups qualified to run a program that would be needed for HB 289. **Mr. Harwell** informed the committee that his agency knows the available local cessation services, but they vary across the board in how they are staffed. There are not many of them and they are hard to sustain. REP. MCALPIN had read that it takes a person seven times before they have success in cessation. He then assumed that a person could be paid seven times for cessation of smoking.
{Tape: 2; Side: B; Approx. Time Counter: 2.6 - 7.2}

REP. TOM FACEY asked if the American Cancer Society's opposition to HB 289 was that it would not allow for a comprehensive tobacco prevention program. **Ms. McGowan** replied that was true.

REP. FACEY and **REP. GLASER** discussed the pros and cons of HB 289. **REP. FACEY** suggested an amendment to ask for one percent instead of ten percent. This was acceptable to the sponsor.
{Tape: 2; Side: B; Approx. Time Counter: 7.2 - 14}

REP. WILLIAM JONES asked for the breakdown of money from I-149. **Mr. Harwell** explained that the funds are intended to fund four health care concerns: prescription drugs, uninsured small businesses, Children's Health Insurance Program (CHIP), and Medicaid services and provider rates. I-146 funds were directed to fund tobacco prevention.

CHAIRMAN BECKER inquired why none of the four designated programs from I-149 are directly related to smoking. **REP. MCALPIN** replied that his understanding of the purpose of the Initiative was to raise revenues to address the health care problems that Montana has.
{Tape: 2; Side: B; Approx. Time Counter: 14 - 19.5}

There was discussion about the intentions of I-146 and I-149.
{Tape: 2; Side: B; Approx. Time Counter: 19.5 - 22}

Closing by Sponsor:

REP. GLASER closed by responding to some of the confusing thoughts on prevention and cessation of smoking. His main concern was to encourage smokers to quit. He wanted to use their money to help them quit if they so desire.
{Tape: 2; Side: B; Approx. Time Counter: 22 - 28.4}

ADJOURNMENT

Adjournment: 5:00 P.M.

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REP. ARLENE BECKER, Chairman

_____
MARY GAY WELLS, Secretary

AB/MW

Additional Exhibits:

EXHIBIT(huh16aad0.PDF)