

Approved 4-1-91
Date sch

MINUTES OF THE HOUSE COMMITTEE ON PUBLIC HEALTH AND WELFARE

The meeting was called to order by Carol H. Sader at
Chairperson

5:00 a.m./p.m. on March 25,, 1991 in room 254-E of the Capitol.

All members were present except:

Representative Carmody, Representative Love, both excused

Committee staff present:

Emalene Correll, Research
Bill Wolff, Research
Norman Furse, Revisor
Sue Hill, Committee Secretary

Conferees appearing before the committee:

John Alquest, Acting Commissioner of Income Support/Medical Services,
Department of SRS. (Mr. Alquest answered questions per request of
Chairperson.)

Chair called meeting to order at 5:08 p.m. (Room 243-E).

Chair opened discussion on bills previously heard.

DISCUSSION BEGAN ON HB 2566.

Chair gave background information on testimony heard on HB 2566.

Representative Alex Scott offered testimony for HB 2566. (Attachment No. 1). He gave a scenario of children of an elderly lady coming home from out of state finding their mother in a state of bad health and dealing with the responsibility of placing her in a nursing home. Rep. Scott stated he had dealt with this problem time after time during private practice as a physician.

Discussion began regarding statistics on how long before a person who enters an adult care home facility as private pay, must revert to being on state assistance; there should be some source where statistics of this type of data could be made available. Concerns were expressed for patients entering a nursing home on state assistance being mandated to pay for a pre-screening procedure.

At this point, Rep. Wagle moved to kill HB 2566. Motion seconded by Rep. Neufeld. Discussion continued, i.e., purpose of bill is to evaluate whether or not persons should go to a health care facility or whether or not they could remain longer in their own homes, but to mandate fees for the pre-screening would be difficult for many; some concepts of the bill are good, but perhaps it is a bit premature; some facilities do have lists of categories of services; public education is needed; some viable options are home sharing and reverse mortgages. There is a need to reach this population for many options available to them. Some feel it would be wiser to continue to try to find solutions rather than to kill the bill. It was indicated the Department on Aging needs to have a strong message sent to them in regard to the lack of information on options of health care that are available, but is obviously not being conveyed to the aging population.

Vote taken, Chair in doubt. Show of hands indicated 8 in favor of motion to kill HB 2566, 7 against. Motion carried. HB 2566 is killed.

CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON PUBLIC HEALTH AND WELFARE,
room 254-E, Statehouse, at 8:00 a/m/p.m. on March 25, 1991

DISCUSSION BEGAN ON SB 314.

It was noted Sec. 2 doesn't need to be in the bill twice. At the request of the Chairperson, Mr. Furse indicated language necessary for the hospital to have authority to request revenue bond for funding.

Rep. Neufeld moved to amend SB 314 in line 23 after "site" to strike "for". In line 24 after "," strike all language through line 27. Motion seconded by Rep. Bishop. Motion carried.

ON SB 314 as a whole, Rep. Bishop moved to pass SB 314 out favorably as amended. Motion seconded by Rep. Cribbs. No discussion. Vote taken. Motion carried.

Representative Weiland will carry SB 314 on the floor of the House.

DISCUSSION BEGAN ON HB 2565.

Commissioner John Alquest was requested by Chairperson to answer questions from committee members. He responded to questions, i.e., costs for co-payments would be for every \$100 spent for medical costs, \$20 of that would be paid by the patient; they thought perhaps a premium of \$30.00 would be workable.

Discussion continued. It was noted HB 2565 is a product of a recommendation of the SRS Task Force and a Commission for the Medically Indigent had also worked towards this goal.

Rep. Bishop moved to TABLE HB 2565. Motion seconded by Rep. Lynch. Discussion continued, i.e., there has been a great deal of work put into this bill and the concept, and it is not the wish of the Committee to have that wasted. It was noted the focus of the Commission on Medically Indigent that each individual should pay a premium based on his/her ability to pay, even if it is only \$.50 (cents) a month. It was the vision of this Commission that the premiums are on ability to pay. Some felt this legislation needs further study, perhaps during Interim.

Vote taken. Motion carried.

Chair thanked all members for their cooperation in their attendance at this evening's meeting. She noted also those issues that members wish to have discussed during Interim will be given further consideration.

Chair adjourned the meeting.

TESTIMONY PRESENTED TO
HOUSE PUBLIC HEALTH AND WELFARE COMMITTEE

HB 2566

Representative Alex Scott

"Mama was all right before daddy died, but she never had paid the bills and things because daddy always did this. And she never drove the car. The doctor told us to get mother out of her 2-story house (she was 78 you know), but we thought mother would be too upset if we moved her into an apartment so soon after daddy died, so we didn't move her."

"We went back to our homes and did not see her again until eight months later. One of the neighbors called us as they thought mother wasn't doing well. It was much worse than we expected. Mother had given the dining room table and chairs to the man who moved her bedroom down to the dining room. She also put in smaller light bulbs and we could hardly see inside the house, but we could see the dust. I forgot to tell you the bathroom was upstairs, so mother was using the half bath and taking sponge baths."

"Oh yes, we don't think she was eating right-just some lunch meat and bread in the refrigerator. She had some cereal in the cabinet and some canned milk."

"We sure hated to put mother in the nursing home. We just had to."

JHW
3-25-91

att #1
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