

NORTH DAKOTA LEGISLATIVE COUNCIL

Minutes of the

HUMAN SERVICES COMMITTEE

Tuesday, November 6, 2007
Roughrider Room, State Capitol
Bismarck, North Dakota

Representative Jeff Delzer, Chairman, called the meeting to order at 9:00 a.m.

Members present: Representatives Jeff Delzer, Patrick R. Hatlestad, Curt Hofstad, James Kerzman, Gary Kreidt, Jon Nelson, Vonnie Pietsch, Chet Pollert, Clara Sue Price; Senators JoNell A. Bakke, Dick Dever, Robert S. Erbele, Judy Lee, Jim Pomeroy, John M. Warner

Members absent: Representatives Lee Kaldor, Ken Svedjan, Robin Weisz; Senator Aaron Krauter

Others present: See attached [appendix](#)

Senator Bakke asked that the previous meeting's minutes be changed to indicate on page 5 of the minutes that the temporary assistance for needy families (TANF) block grant allows transfers of block grant money of up to 10 percent to the social services block grant and up to 30 percent to the child care block grant. **It was moved by Senator Lee, seconded by Senator Dever, and carried on a**

voice vote that the minutes of the previous meeting be approved as corrected.

DEPARTMENT OF HUMAN SERVICES UNSPENT APPROPRIATION AUTHORITY

Ms. Brenda Weisz, Director, Fiscal Administration, Department of Human Services, presented information on the department's unspent general fund appropriation authority for the 2005-07 biennium and on actual Medicaid expenditures compared to appropriated amounts for the 2005-07 biennium. Ms. Weisz said during the 2007 legislative session, the department anticipated general fund turnback of \$6.8 million. She said actual general fund turnback for the 2005-07 biennium was \$5.6 million, or \$1.2 million less than estimated. Ms. Weisz presented the following schedule of 2005-07 biennium Medicaid expenditures compared to appropriated amounts:

	2005-07 Appropriation	2005-07 Actual Expenditures	Variance
Traditional Medicaid	\$369,706,833	\$353,302,322	\$16,404,511
Healthy Steps	12,075,542	15,441,375	(3,365,833)
Nursing facilities	343,013,040	322,520,167	20,492,873
Basic care	13,301,971	12,057,997	1,243,974
Home and community-based care	37,697,922	29,986,904	7,711,018
Developmental disabilities	211,749,220	214,341,903	(2,592,683)
Total	\$987,544,528	\$947,650,668	\$39,893,860
General fund	\$312,146,504	\$305,428,091	\$6,718,413
Federal funds/other funds	675,398,024	642,222,577	33,175,447
Total	\$987,544,528	\$947,650,668	\$39,893,860

In response to a question from Representative Delzer, Ms. Weisz said North Dakota's federal medical assistance percentage (FMAP) for federal fiscal year 2009 will be 63.15 percent, a decrease of .93 percent from the 64.08 percent estimate used by the 2007 Legislative Assembly in developing the department's 2007-09 biennial budget. Ms. Weisz said this change will result in the department's need for an additional \$4.3 million of general fund matching funds for state fiscal year 2009. She said the department will be reviewing its budget to determine how to address this shortfall.

Representative Pollert suggested the committee, at future meetings, receive status reports from the Department of Human Services on its budget. Chairman Delzer said he would request approval from

the chairman of the Legislative Council to include this as a committee responsibility.

MEDICAID MANAGEMENT INFORMATION SYSTEM

Ms. Jennifer Witham, Director, Information Technology Services, Department of Human Services, provided a status report on the Medicaid management information system project.

Ms. Witham said the project is on schedule and within budget. Of the \$62.5 million appropriated for the project, she said, \$9 million has been spent through September 2007. A copy of the report is on file in the Legislative Council office.

In response to a question from Representative Pollert, Ms. Witham said the project appropriation includes \$5.6 million for contingencies.

Representative Delzer asked for a comparison of the number of Department of Human Services' information technology employees prior to information technology consolidation compared to the current number employed. Ms. Witham said the department will provide that information to the committee.

Representative Delzer asked whether there are any incentives or penalties included in the project contract. Ms. Witham said there are no specific incentives or penalties; however, she said the project has a fixed price and any additional state expenditures resulting from the vendor not completing the project on time may be charged to the vendor.

STUDY OF ECONOMIC ASSISTANCE PROGRAM RESPONSIBILITIES OF THE STATE AND COUNTIES

The Legislative Council staff presented a memorandum entitled [Economic Assistance Program Responsibilities of the State and Counties - Statutory Provisions and Changes](#). The Legislative Council staff summarized each section of 1997 House Bill No. 1041 referred to as the "swap" agreement which identified the responsibilities of the state and counties in the administration of economic assistance programs and subsequent legislative changes.

Ms. Debra McDermott, Assistant Director, Fiscal Administration, Department of Human Services, provided information on grant cost changes and county administrative costs for economic assistance programs resulting from the "swap" agreement since 1997. Ms. McDermott presented the following schedule showing county administrative cost changes since state fiscal year (SFY) 1999:

	SFY 1999	SFY 2000	SFY 2001	SFY 2002	SFY 2003	SFY 2004	SFY 2005	SFY 2006	SFY 2007
County administrative costs included in "swap"	\$19,725,886	\$20,301,458	\$20,950,351	\$21,678,741	\$22,640,962	\$23,722,533	\$24,634,452	\$25,572,647	\$26,373,314
Yearly increase		\$575,572	\$648,893	\$728,390	\$962,221	\$1,081,571	\$911,919	\$938,195	\$800,667
Percentage increase		2.92%	3.20%	3.48%	4.44%	4.78%	3.84%	3.81%	3.13%

Ms. McDermott presented the following schedule of information technology costs paid by the counties to the department since calendar year (CY) 1998. She

said these costs are limited to actual calendar year 1995 costs increased by the consumer price index.

	CY 1998	CY 1999	CY 2000	CY 2001	CY 2002	CY 2003	CY 2004	CY 2005	CY 2006
Technology costs	\$550,943	\$563,064	\$582,208	\$598,510	\$608,086	\$622,072	\$638,868	\$660,589	\$681,728
Yearly increase		\$12,121	\$19,144	\$16,302	\$9,576	\$13,986	\$16,796	\$21,721	\$21,139
Percentage increase		2.20%	3.40%	2.80%	1.60%	2.30%	2.70%	3.40%	3.20%

Ms. McDermott reviewed computer system program changes that have occurred since the "swap" agreement that make it more difficult to compare state and county costs. She said prior to the "swap" agreement, computer systems were programmed so that counties were not charged for medical assistance expenditures for Native American cases in Benson, Sioux, and Rolette Counties. She said this computer program was discontinued in 1999; therefore, Native American cases are no longer segregated.

Ms. McDermott said since 1997 a number of programs and service changes have occurred within the medical assistance program. Ms. McDermott provided a list of these changes. She asked for guidance from the committee to identify, for comparison purposes, the county share of these program and service changes.

Ms. McDermott said prior to the 1997-99 biennium, the department was appropriated \$440,000 to be allocated to Benson, Sioux, and Rolette Counties for assisting in the cost of providing economic assistance programs due to the large amount of tax-exempt land in these counties. She said the 1997 Legislative Assembly provided an additional \$619,000 to the Indian county appropriation for assistance to these counties. Beginning in the 1999-2001 biennium, she said, the Indian county payments were based on a statutory formula. Ms. McDermott presented the following schedule showing Indian county payments since the 1997-99 biennium.

		Locally Administered Economic Assistance Program Costs in Excess of Statewide Average Costs (Expressed in Mills)			
		Formula Effective January 1, 2000	Reimbursed at 90 Percent		Reimbursed at 100 Percent
County	1997-99 Biennium	1999-2001 Biennium	2001-03 Biennium	2003-05 Biennium	2005-07 Biennium
Benson	\$174,086	\$266,641	\$393,794	\$441,930	\$540,101
Dunn		30,132	40,788	59,543	68,122
McKenzie		100,036	167,740	105,352	106,518
Mountrail		140,661	270,437	321,497	415,824
Rolette	704,672	926,269	1,193,203	1,347,762	1,499,962
Sioux	180,236	312,681	415,014	440,542	560,359
Total	\$1,058,994	\$1,776,420	\$2,480,976	\$2,716,626	\$3,190,886
Biennial increase		\$717,426	\$704,556	\$236,650	\$474,260
Percentage increase		67.75%	39.66%	9.50%	17.46%

A copy of the report is on file in the Legislative Council office.

In response to a question from Representative Delzer, Ms. McDermott said prior to the "swap" agreement, the counties' share of medical assistance expenditures was approximately 13 percent of the nonfederal share or about 4 percent of total Medicaid expenditures.

Chairman Delzer suggested the department assume that counties would have shared in the cost or savings associated with program or service changes during the last 10 years similar to their share of the Medicaid program costs prior to the "swap" agreement. He asked the department to provide a schedule showing estimated county avoided costs as a result of the "swap" agreement for the next meeting.

Chairman Delzer asked the Department of Human Services and the North Dakota Association of Counties to present information to the committee at its next meeting regarding the positive and negative aspects of the "swap" agreement and any proposed changes to the economic assistance program responsibilities of the state and counties.

Mr. Terry Traynor, Assistant Director, North Dakota Association of Counties, said the "swap" agreement has simplified county budgeting for economic assistance programs by not having the counties share in the grant costs of these programs. He said making counties responsible for the administrative costs of these programs has provided an incentive to the counties to become more efficient in administering the programs.

Mr. Edward Forde, Director, Benson County Social Services, commented on the committee's study. He said counties with Indian reservations differ from other

counties because costs of administering economic assistance programs continues to increase; however, the taxable value of property in these counties has remained fairly stable because much of the land is owned by the Indian tribes.

Chairman Delzer asked the Association of Counties and the Department of Human Services to comment to the committee at its next meeting on any eligibility issues or concerns among the economic assistance programs.

TEMPORARY ASSISTANCE FOR NEEDY FAMILIES STUDY

Ms. Weisz provided information on the TANF block grant funds received by the state and on maintenance of effort requirements. Ms. Weisz said North Dakota's federal TANF block grant totals \$26.4 million per year and has a \$9.1 million annual maintenance of effort requirement. She said the state meets but does not exceed its maintenance of effort requirement.

Ms. Weisz reviewed the 2007-09 estimated TANF block grant expenditures. She said the department anticipates spending \$59.2 million of federal TANF block grant funds during the 2007-09 biennium and anticipates carrying forward to the 2009-11 biennium approximately \$6.8 million. She said the department spends the TANF block grant funds on assistance to needy families, job preparation, formation and maintenance of families, administration, and other related programs, including alternatives to abortion, county emergency assistance, and case management.

Ms. Weisz presented the following schedule showing total TANF expenditures since the 1999-2001 biennium:

Category	1999-2001 Actual Expenditures	2001-03 Actual Expenditures	2003-05 Actual Expenditures	2005-07 Actual Expenditures
Assistance to needy families	\$12,190,046	\$18,964,192	\$11,051,347	\$7,056,645
Job preparation	5,052,408	8,612,796	8,531,892	9,002,755
Formation and maintenance of families	16,684,265	17,344,398	21,673,374	23,392,522
Other	9,891,157	7,223,635	3,454,710	3,726,734
Administration	6,215,538	7,028,860	5,910,949	6,355,467
Total	\$50,033,414	\$59,173,881	\$50,622,272	\$49,534,123

In response to a question from Representative Delzer, Ms. Weisz said the federal TANF program is currently authorized through September 30, 2010.

Chairman Delzer asked the Legislative Council staff to contact the National Conference of State Legislatures (NCSL) to explore the possibility of an NCSL staff person providing information to the committee at its next meeting on the federal TANF program.

Ms. Carol Cartledge, Director, Public Assistance, Department of Human Services, provided information on the TANF program. Ms. Cartledge said from July 2001 through September 2007, 110 TANF cases have been closed because the head of household received the maximum of 60 months of TANF payments. She said during this same time period, 19 cases have received an exemption from the 60-month lifetime limit based on incapacity of the individual, incapacity of a spouse, incapacity of a dependent child, or domestic violence. She said other reasons TANF cases close include paid employment, sanctions for noncooperation with child support enforcement or job requirements, receipt of child support income, excess resources, dependent children no longer in the household, family requested the case to close, and other reasons.

Ms. Cartledge said North Dakota's work participation rate for August 2007 was 50.64 percent. She said each state must achieve a 50 percent minimum overall participation rate reflecting any caseload reduction credit. The caseload reduction credit is 6.1 percent for federal fiscal year 2007. She said during this same time period, an average of 391 TANF clients were in paid employment. She said the quality of jobs being obtained by TANF clients is not available for this report but will be provided to the committee at its next meeting.

Ms. Cartledge reviewed the following information on the number of months families received TANF benefits from July 2001 through June 2007:

1. 10,242 clients received TANF from 0 to 12 months.
2. 3,241 clients received TANF benefits for 13 to 24 months.
3. 892 clients received benefits from 37 to 48 months.
4. 489 clients received benefits from 49 to 60 months.
5. 413 clients have received 60 or more months of TANF payments.

Ms. Cartledge said the number of TANF clients no longer receiving benefits but continuing to receive other assistance for the first and second quarters of 2007 include:

Program	First Quarter	Second Quarter
Child care assistance	141	130
Food stamps	522	510
Medicaid	516	479

Ms. Cartledge said of the open TANF cases during 2006, 750 received heating assistance. A copy of the report is on file in the Legislative Council office.

Senator Lee asked the department to provide the number of unduplicated clients who have been on the TANF program. Ms. Cartledge said the department will provide that information for the committee's next meeting.

In response to a question from Representative Delzer, Ms. Cartledge said the penalty for not meeting work participation rates is a 5 percent reduction in the state's block grant allocation. She said the department intends to continue to meet the work participation requirements of the TANF program.

Representative Price asked for information on the history of benefits to recipients, changes since the program began, and the appropriateness of the current payment level. Chairman Delzer asked the department to provide this information for the committee at its next meeting.

Senator Lee asked that the Department of Human Services and the North Dakota Association of Counties comment at its next meeting on whether the various components of the TANF program are still appropriately addressing the needs of the TANF recipients. She asked that the information include the effectiveness of the work programs and whether any changes are needed to make the TANF program more effective and cost-efficient. Chairman Delzer said this information will be requested for the next meeting.

Chairman Delzer asked the Department of Human Services to provide, for comparison purposes, increases provided in benefits to recipients under the TANF program since the program began to other selected program inflationary increases.

The committee recessed for lunch at 12:00 noon and reconvened at 1:00 p.m.

CHILDREN'S HEALTH INSURANCE PROGRAM

Ms. Maggie Anderson, Director, Medical Services Division, Department of Human Services, presented the children's health insurance program annual report. Ms. Anderson said the 2007-09 biennium appropriation for the Healthy Steps program totals \$20,204,746. Through September 2007, Ms. Anderson said \$1,550,094 has been spent. As of September 2007, she said, 3,871 children were enrolled in the Healthy Steps program.

Ms. Anderson said 2007 House Bill No. 1463 directs the department to expand the program's eligibility to 150 percent of the federal poverty level, contingent on adequate federal funding being available to allow for the expansion. She said the program is currently operating under a continuing resolution which ends November 16, 2007. Once the program is reauthorized by Congress, she said, the department will be able to provide an estimate of the funding available to North Dakota and determine whether the funding will allow for the expanded

eligibility level. A copy of the report is on file in the Legislative Council office.

NURSING EDUCATION CONSORTIUM

Dr. Chandice Covington, Dean, University of North Dakota College of Nursing, reported on the status of activities of the Nursing Education Consortium. Dr. Covington reviewed North Dakota's demographics and health issues.

Dr. Patricia Moulton, Center for Rural Health, University of North Dakota School of Medicine and Health Sciences, commented on the projected nurse shortage in the state. She said it is estimated that by 2020, unless change occurs in recruiting, educating, and retaining nurses, North Dakota will see a substantial shortage of nurses.

Ms. Julie Traynor, Director, Dakota Nursing Program, commented on the establishment of the Dakota Nursing Program. She said the program represents Bismarck State College, Lake Region State College, Minot State University - Bottineau, Williston State College, and several nursing program sites, including rural sites in Langdon, Northwood, Rugby, and Fort Berthold.

Dr. Covington commented on the status of the Nursing Education Consortium. She said since its establishment three months ago, the consortium consists of 28 members from education, employers, professional associations, and workforce. She said the consortium has met twice and is developing a web site. In addition, she said, the consortium plans to submit grant proposals to access additional funding. A copy of the report is on file in the Legislative Council office.

DRUG UTILIZATION REVIEW

Dr. Brendan Joyce, Pharmacy Services Administrator, Department of Human Services, reported on the Drug Utilization Review Board's progress in managing the utilization of certain drugs pursuant to 2007 House Bill No. 1422.

Dr. Joyce said based on June 2007 data, 16 percent of Medicaid drug spending is for antipsychotics, 13 percent for mood stabilizers, 8 percent for antidepressants, 8 percent for ADHD medications, 1.5 percent for oncology, and less than 1 percent for HIV/AIDS-related drugs.

Dr. Joyce said the first class of drugs reviewed by the board this interim was the HIV/AIDS class. He said the board learned that North Dakota already has a formulary through the Ryan White AIDS drug assistance program and the formulary is followed very well by the physicians that prescribe these medications under the Medicaid program. He said the board is not recommending prior authorizing HIV/AIDS medication but believes state law should prohibit action in the future if a physician begins prescribing outside the formulary.

Dr. Joyce said the board is in the process of reviewing the oncology class of medication and will

update the committee at a future meeting on its recommendations.

Dr. Joyce said the board has reviewed ADHD medications and is recommending to:

1. Remove the prior authorization exemption for this class.
2. Prior authorize Vyvanse - Require use of Adderall XR before Vyvanse.
3. Prior authorize Daytrana - Require use of any other product before Daytrana.

Dr. Joyce said the board has begun its review of antidepressants and at future meetings will be reviewing antipsychotics and mood stabilizers. He anticipates all reviews to be completed by September 2008. A copy of the report is on file in the Legislative Council office.

Senator Lee asked for the number of children and the number of adults receiving antipsychotic medications, mood stabilizer medications, and antidepressants under the Medicaid program. Dr. Joyce said he would provide this information to the committee.

IMMUNIZATION PROGRAM TRANSITION

Ms. Arvy Smith, Deputy State Health Officer, commented on the impact of the immunization program transition on local public health units and on the estimated fiscal impact of the transition.

Ms. Smith said in the past, the federal Vaccines for Children Program and federal 317 funding have provided adequate vaccines to provide immunizations for all North Dakota children. She said due to additional vaccines being introduced, cost increases, and stable or declining federal funding, other sources of funding are necessary to vaccinate all North Dakota children.

Ms. Smith said the federal Vaccines for Children Program provides immunizations for children who are Medicaid-eligible, uninsured, American Indian, or underinsured and served at qualified clinics.

Ms. Smith said the estimated cost to vaccinate North Dakota children is estimated to total \$8.3 million for 2008. She said this estimate includes the assumption that 25 percent of children who have not received the new vaccines will seek those immunizations. She said North Dakota is anticipated to receive \$1.6 million of federal 317 funding in 2008 which leaves a funding gap of \$6.7 million.

Ms. Smith said House Bill No. 1435 appropriates \$1.5 million for vaccine purchases above the federal 317 allotment for July through December 2007 and for startup costs. She said the department anticipates spending \$854,223 of this appropriation through December 2007.

Mr. Randy Miller, Director, Provider Choice, State Department of Health, provided an update on the transition to the Provider Choice program. Mr. Miller said under the Provider Choice program, which has been renamed the Protect North Dakota Kids Project,

private providers will purchase vaccines directly from pharmacy companies at private rate prices and local public health units will purchase from pharmacy companies at negotiated prices. He said the department attempted to purchase vaccines directly from the pharmacy companies for all providers; however, the pharmacy companies did not respond to the department's requests. He said the companies indicated they will only sell at discounted prices for "own use."

Mr. Miller said the local public health units will need to have a process in place for purchasing vaccine, collecting insurance information from clients, billing insurance companies, billing clients for copays and coinsurance, and to separately track their vaccine inventories.

Mr. Miller said the public health units will submit claims to Blue Cross Blue Shield of North Dakota which will generate claims weekly for the public health units and pay the appropriate amount within seven days. He said all other insurance claims will be sent to a billing contractor which is tentatively planned to be Medcenter One Health Systems in Bismarck. He said Medcenter One will process the insurance claims for individuals who have insurance with a company other than Blue Cross Blue Shield. Mr. Miller said Blue Cross Blue Shield is anticipating having its system implemented by January 1, 2008. He said the contract with Medcenter One has been prepared. He said the anticipated cost of the contract with Medcenter One is \$89,000 per year.

Mr. Miller anticipates private providers will begin billing insurance for nonfederal vaccines for children immunizations on January 1, 2008, and the billing system will be ready for use by the local public health units by early January 2008.

Mr. Miller said the project plans a media campaign to educate the public on the immunization program changes. A copy of the report is on file in the Legislative Council office.

Representative Price said the local public health units are concerned with being financially responsible for uncollectible accounts. Ms. Smith said the program provides that the billing entity (Medcenter One) will pay the local public health units for the full cost of the immunization less an administrative fee; therefore, uncollectible accounts will be the responsibility of the billing entity (Medcenter One).

Mr. Dan Ulmer, Blue Cross Blue Shield of North Dakota, provided information on the immunization program transition. He expressed concern that the system being developed will be complicated to administer. He said Blue Cross Blue Shield is on schedule to begin paying for immunizations beginning January 1, 2008.

Mr. Ulmer said Blue Cross Blue Shield's immunization-related costs are anticipated to increase from approximately \$400,000 in 2004 to \$4.8 million in 2008 which will have an impact on health insurance

premiums in North Dakota. A copy of the report is on file in the Legislative Council office.

Ms. Mary Zimmerman, Director, Business Services and Reimbursement, Medcenter One, provided information on the local public health unit billing system. Ms. Zimmerman said Medcenter One has been collaborating with the State Department of Health and the local public health units to develop a billing mechanism for immunizations that need to be billed to non-Blue Cross Blue Shield insurance plans.

Ms. Zimmerman said the local public health units will enter data into the North Dakota immunization information system and claims will be sent to Medcenter One for processing. She said Medcenter One will bill the insurance companies for the immunizations and administrative fees. She said clients will be billed for any copays, coinsurance, or deductibles. She said the public health units will receive reimbursements from Medcenter One on a monthly basis. She said the system is anticipated to be available on January 1; however, if it is not available on that date, insurance companies can be billed retrospectively at a later date.

Ms. Zimmerman said Medcenter One has agreed to participate on a cost-only basis. She said the State Department of Health is charged only for what it costs to start and maintain the system. She said one-time startup costs are estimated at \$23,000 and ongoing annual costs are estimated at \$89,000. A copy of the report is on file in the Legislative Council office.

Ms. Julie Ferry, Nurse Administrator, Nelson Griggs District Health Unit, commented on the immunization program transition. She said the local public health units are recommending the State Department of Health delay full implementation of the program until completion of a successful pilot program which may be as late as July 1, 2008. She said the local public health units are suggesting a three-month pilot program beginning January 1, 2008, at Custer District Health Unit and the Nelson Griggs District Health Unit. She said before the system is implemented statewide, it is important to test the system on a smaller scale to correct any problems or concerns with the system.

Ms. Mary Kay Herman, Director, Fargo Cass Public Health Department, commented on the immunization program transition. Ms. Herman said the Fargo Cass Public Health Department does not plan to be involved in billing third parties for immunizations. She said the Fargo Cass Public Health Department does federal Vaccines for Children Program immunizations; however, most other child immunizations done in Cass County are provided by either private providers or its federally funded community health center.

Ms. Lisa Clute, Executive Officer, First District Health Unit, commented on the immunization program transition. She said it has always been the intention of the public health units to conduct a pilot project prior to fully implementing the new immunization program. She said initially it was anticipated the pilot

project would be conducted between July and December 2007; however, because of delays, this did not occur. She suggested beginning the pilot project in January 2008 and fully implementing the program when the pilot project is successfully completed.

In response to a question from Senator Lee, Ms. Clute said that the funds appropriated in 2007 House Bill No. 1435 should be adequate to pay for vaccines for up to a year which will allow enough time to conduct the pilot project.

Chairman Delzer said the committee will continue to get updates on the immunization program transition at each of its meetings.

Representative Price expressed support for conducting the pilot project at the public health units beginning in January 2008 with full implementation after a successful pilot project has been completed. She said the state needs to maintain its high immunization rates, and in accordance with provisions of 2007 House Bill No. 1435, if the appropriation included in the bill is not adequate, the department

may seek state contingency funds from the Emergency Commission.

Chairman Delzer announced the next committee meeting may be in January 2008, or earlier if necessary. **It was moved by Senator Warner, seconded by Senator Dever, and carried on a voice vote that the committee adjourn subject to the call of the chair.** The meeting was adjourned at 4:50 p.m.

Allen H. Knudson
Assistant Legislative Budget Analyst and Auditor

Jim W. Smith
Legislative Budget Analyst and Auditor

ATTACH:1