

2017 SENATE HUMAN SERVICES

SB 2118

2017 SENATE STANDING COMMITTEE MINUTES

Human Services Committee
Red River Room, State Capitol

SB 2118
1/11/2017
Job Number 26783

- Subcommittee
 Conference Committee

Committee Clerk Signature



Explanation or reason for introduction of bill/resolution:

A bill relating to gambling disorder prevention, awareness, crisis intervention, rehabilitation, and treatment services.

Minutes:

2 attachments

Chair Senator Lee: Opened the hearing on SB 2118; All Senators were present.

Pam Sagness, Director of the Behavioral Health Division for the DHS: (0:30-1:25) Testimony was provided. See attachment 1. SB 2087 has exact same language except for two areas, which was passed out of the Senate Judiciary on Monday. Discuss the two areas that are different and need to be amended. The rest of SB 2087 changed compulsive gambling to gambling disorder.

Chair Lee: SHMS Intern Ian, please print a copy of SB 2087 (please see attachment #2).

Senator Piepkorn: Explain the changing of compulsive gambling to gambling disorder, what does that do technically, legally, perception wise; for all of us.

Pam Sagness: It is about current language and using the DSM. Gambling disorder originally was compulsive gambling or problem gambling. Want to be consistent with manual that identifies diagnoses. One of the few behavioral addictions that is in the DSM. Recent research shows similarities in substance use disorder and gambling disorder. By recognizing current research, follows closer to the scope for licensed addiction counselors (another bill on that). It is about understanding gambling disorder in its current form and what we know. In regard to payment, payment for gambling use disorder isn't the same as substance use disorder. Discussions are needed on how to classify gambling disorder as a behavioral health disorder.

Chair Lee: Will it make a difference know that we've broadened the language if it moves through the rest of the process here? In the earlier bill that we had allowing addiction counselors to treat other things besides substance abuse will that have an impact on reimbursement?

Pam Sagness: I certainly hope there will be considerations and further discussion as current research does support gambling as being something that is a disorder, similar as a reward system of substance use. This means being closer to understanding the disease of addiction. Being progressive in bringing the topic forward is important. The department does administer the funding that currently supports Lutheran Social Services GamblerND Program or Gambler's Choice program. Currently, the lottery fund and general fund that support the treatment for gambling disorder.

Chair Lee: Here is a hypothetical situation. You are the licensed addiction counselor and I'm the patient. If I have 2 disorders, how does that affect reimbursement?

Pam Sagness: For treatment, because of the scope of work and definitions, you'd have to see 2 different people.

Chair Lee: Once that's fixed, we won't have fixed the reimbursement. How does the patient visit get reimbursed?

Pam Sagness: Usually a primary diagnosis would be utilized.

Senator Piepkorn: Is there opposition or resistance to changing the terminology for any reason.

Pam Sagness: I haven't heard of any resistance.

(8:00-14:00) A general discussion of attachment #2, Senate Bill 2087, and the proposed changes of it in comparison to the changes being requested in Senate Bill 2118.

Senator Piepkorn: How did this happen?

Chair Lee: It was drafted by 2 different committees.

Senator Piepkorn: How does it get resolved?

Chair Lee: I'll visit with Senator Armstrong about this so that he knows we've got it, and we'll end up fixing it the way we want it, because they've already passed it out. Even if it passes, this one will be on the floor later than theirs.

Senator Anderson: My suggestion is that we decide which language and talk to Senator Armstrong. Either amend his bill so that we're happy with it, and pass it on the floor and kill this one or vice versa so that we only have one bill going forward.

Chair Lee: We'd have to have a floor amendment in order to do the other one and it's a kind of technical change. This is already out of committee. I'd like to see them on the same day on the floor. We can ask for it to be hold on the floor schedule. We'll make sure to coordinate and it will not end if we hear one and then hear the next.

Pam Sagness: The other significant change on SB 2118, lines 5-10 and on SB 2087, lines 4-9 on page 2 of each. The key issue is whether or not to identify the DSM in the language.

The definition used on 2118 is a global definition that speaks to the disorder without identifying the specific place of the definition in the DSM.

Chair Lee: Which do you prefer?

Pam Sagness: 2118.

Senator Anderson: I suggest we could ask the floor to re-refer the bill to this committee.

Chair Lee: I'd like to lean towards the one with the least complicated one. Five sponsors were on

Pam Sagness: Senator Poolman identified that she was asked by the gambling or lottery commission. One of the organizations that she works with.

Chair Lee: I'll visit with Senator Poolman and Senator Armstrong to discuss an acceptable way to handle this with the prime sponsor and the committee chair.

Pam Sagness: The other changes are exactly the same.

Chair Lee: We're primarily talking about the DSM and the one on page 1, leaving out the individual.

Chair Lee: Any further testimony on 2118? Closed the public hearing on SB 2118.

Committee Discussion: (18:50)

Chair Lee: The gambling commission must have missed that there was another bill. I will visit with those folks and we'll get back to this early next week. Shouldn't be that hard to rectify. Did we have any language changes in SB 2118? I think what I'm going to suggest that this one seems preferable.

Pam Sagness: Senator Poolman thought that the examples were exactly the same. She mentioned to Senator Armstrong that they were identical. I don't think they were aware that there was more than one change to the bill.

Chair Lee closed the hearing on SB 2118


2017 SENATE STANDING COMMITTEE MINUTES

Human Services Committee
Red River Room, State Capitol

SB 2118
1/16/2017
Job Number 26908

- Subcommittee
 Conference Committee

Committee Clerk Signature



Explanation or reason for introduction of bill/resolution:

A bill relating to gambling disorder prevention, awareness, crisis intervention, rehabilitation, and treatment services.

Minutes:

0 attachments

Chair J. Lee: Brought meeting to order on SB 2118. All members present. SB 2118 is very similar to SB 2087, they were drafted by different committees, had to be kept confidential. If you are drafting a bill and don't mind sharing, you need to tell legislative council they can discuss it with others.

V-Chair Larsen: For clarification with the bill that did pass on the floor, only difference is line 6-9 on back page, the definition is a little clearer than the one that passed the chamber.

Chair J. Lee: Page 1, lines 15-18, where it talks about licensed professional operating within the individual's scope of practice. Preferable language according to the folks who testified. So those two areas are different.

V-Chair Larsen: moves do pass SB 2118.

Senator Piepkorn: Seconded.

Senator Heckaman: I was out when this bill was heard in committee.

Chair J. Lee: We are updating language, the verbiage is virtually identical, except for those two areas, it is preferable having the individual scope of practice being mentioned instead of talking about the licensing boards. On page two this is a more global definition does not reference to DSM definition which was preferred.

A roll call vote was taken.

Motion passed. 7-0

Senator Larsen carries.

Chair J. Lee: Closed the hearing.

Date: 1/16 2017
Roll Call Vote #: 1

2017 SENATE STANDING COMMITTEE
ROLL CALL VOTES
BILL/RESOLUTION NO. 2119

Senate Human Services Committee

Subcommittee

Amendment LC# or Description: _____

Recommendation: Adopt Amendment
 Do Pass Do Not Pass Without Committee Recommendation
 As Amended Rerefer to Appropriations
 Place on Consent Calendar

Other Actions: Reconsider _____

Motion Made By Sen Larsen Seconded By Sen. Piepkorn

Senators	Yes	No	Senators	Yes	No
Senator Judy Lee (Chairman)	X		Senator Joan Heckaman	X	
Senator Oley Larsen (Vice-Chair)	X		Senator Merrill Piepkorn	X	
Senator Howard C. Anderson, Jr.	X				
Senator David A. Clemens	X				
Senator Curt Kreun	X				

Total (Yes) 7 No 0

Absent 0

Floor Assignment Sen Larsen

If the vote is on an amendment, briefly indicate intent:

REPORT OF STANDING COMMITTEE

SB 2118: Human Services Committee (Sen. J. Lee, Chairman) recommends **DO PASS**
(7 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). SB 2118 was placed on the
Eleventh order on the calendar.

2017 HOUSE HUMAN SERVICES

SB 2118

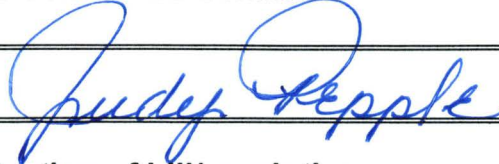
2017 HOUSE STANDING COMMITTEE MINUTES

Human Services Committee
Fort Union Room, State Capitol

SB 2118
2/14/2017
SB 28363

- Subcommittee
 Conference Committee

Committee Clerk Signature



Explanation or reason for introduction of bill/resolution:

Relating to gambling disorder prevention, awareness, crisis intervention, rehabilitation and treatment services.

Minutes:

1

Chairman Weisz: opened the hearing on SB 2118

Pam Sagness, Director of Behavioral Health Division
(Attachment 1)

Vice Chairman Rohr: So can you tell me that if I would come in with a compulsive gambling disorder what would my treatment be?

P. Sagness: Treatment for gambling addiction is very specific. One of the things is that there is national certification currently. If you notice in the bill, the first section in lines 14 – 18 is actually identifying who are the professionals that are trained to treat gambling disorder. The scope of the addiction counselors. There is another bill that is addressing the fact that those would actually be the individuals that would be providing the service. Currently in ND there is no one licensed professional who is able to provide this service. We are going to see another bill that was brought forward by the interim committee and also by the ND Board of Addiction Counseling Examiners. Currently in ND addiction counselors are actually prohibited from providing counseling to individuals with a gambling disorder. I think it is important to note that when we talk about a gambling disorder that doesn't mean any gambling. It means someone who has established loss of control. They would gamble to the point of destroying their relationships, their jobs, their future and everything they hold dear and important to them. Much like someone with a substance use disorder will. There are similarities, so in the diagnostic and statistical manual you actually see similarities with gambling disorder and those that have a chemical or substance use disorder.

Vice Chairman Rohr: So in the tier levels we discussed yesterday there is no one in those levels that could treat this individual?

P. Sagness: They would be able to treat this individual if they got a national certification. However, if they are a licensed addiction counselor they would not be able to use their initials of licensed addiction counselor, because century code currently only allows licensed addiction counselors to work on illicit drugs or alcohol. You will see a bill that will address that. It would be concerning even for tobacco.

Representative Schneider: I assume that 2118 is the preferred bill over the 2087?

P. Sagness: SB 2118 does consider the tiers, so that is why the language is changed in the first section to say "an individual practicing within their scope". It was still using the old language of, "a mental health professional". This would be the version that would be most current to the other policy that is going on currently.

Chairman Weisz: on page 2 where 2087 references the DSM manual. What is the reason you kept the original language defining a gambling disorder instead of using the one in the DSM manual?

P. Sagness: There was much debate about this, because basically legal has advised that we cannot say "the most current version of the DSM". So what this would do is eliminate the need to update every time the book is updated. The belief from the council was that this was a broad enough definition and yet current enough that it wouldn't need to be updated as frequently as is required by the DSM.

Representative McWilliams: If we have a bill coming out that is going to open up the addiction counseling. Why do we have to have multiple specific bills depending on what the addiction is. Why don't we have a bill that just addresses addiction as a whole regardless of what the addiction is?

P. Sagness: I think it is important to note that in this bill we are addressing several different things. There is an appropriation that is provided to the department of human services which is the lottery fund. When you look at the language here, this section is specific to the task force and it is specific to the funding that is provided. It guides, basically, the work for the treatment and prevention fund. You can see in section 2. This is not specific to the licensing boards or all of the things encompassed in addiction. This is very specific to the gambling funds that are provided through the lottery.

Vice Chairman Rohr: Any of the tiers identified yesterday could get this certification? So what is required? Is there a clinical hour component? What would be the cost and who would pay for it?

P. Sagness: Currently in ND those individuals who are nationally certified come from various backgrounds. There is already a prerequisite that someone must, for example, have a master's level counseling degree. That is established at the national level. The individuals who are already providing the service are more concerned that they could get in trouble with their own boards for providing this service. So even though they have the national certification and they want to provide this service, they have gotten letters from the ND Board of Addiction Counselor Examiners saying that you can't do this. It is not in your scope. They then have to identify themselves by only their national certification, not claiming themselves

to be the licensed professionals that they are. It is more that it is a conflict. This would allow the individuals that have the training and the knowledge to provide the service.

Chairman Weisz: Further questions from the committee?

Representative Skroch: In the 1980s we started legalizing gambling. Do you have any data indicating whether there was an increase in these kinds of addictions that kind of follows the legalization of gambling?

P. Sagness: At this time we are conducting an evaluation or an assessment of the individuals in ND who are currently struggling with a gambling disorder. We don't have historical data that we could pull to assess that, however, we do overlay our treatment numbers with lottery. Total numbers of dollars that are used in lottery, so we could provide a summary of that. That is one of the continuous quality improvement measures that the task force reviews. What we often see in the research is that first there will be a spike in gambling or the number of dollars that are in lottery and then the disorders tends to follow. Often it is because jobs go away. They had more income and it wasn't a problem and then as their jobs were no longer able to pay for it, we see an increase.

Chairman Weisz: Further questions from the committee.

Further testimony in support of SB 2118?

Is there anyone here in opposition of SB 2118?

Seeing none, we will close the hearing on SB 2118.

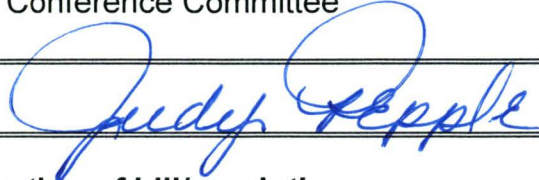
2017 HOUSE STANDING COMMITTEE MINUTES

Human Services Committee
Fort Union Room, State Capitol

SB 2118
2/14/2017
SB 28365

- Subcommittee
 Conference Committee

Committee Clerk Signature



Explanation or reason for introduction of bill/resolution:

Relating to gambling disorder prevention, awareness, crisis intervention, rehabilitation, and treatment services.

Minutes:

Chairman Weisz: Called the committee to order. We will take up SB 2118.
Is there any discussion on SB 2118?

Vice Chairman Rohr: I make a motion for a do pass on SB 2118.

Representative Kiefert: What if you just have a stroke of bad luck. Who determines if you have a gambling disorder?

Chairman Weisz: This defines what it is. A chronic, progressive disease that is characterized by preoccupation with gambling and loss of control. It doesn't affect anyone unless they want services. It is not like they are running around arresting people that have a gambling problem.

Vice Chairman Rohr: I think this might be the individual that is escorted out of the casino.

Chairman Weisz: Did we get a second on the motion?
Representative Skroch: I second it.

Representative McWilliams: Are we currently providing compulsive gambling disorder services? Are we currently doing it or is this introducing gambling services?

Chairman Weisz: I don't remember what session, but we passed it when we started using some of the lottery proceeds. \$100,000 or something came off the lottery. I have no idea what it is now or how we determine that, but it was to provide services. It was a tradeoff back then for passing the lottery. There was money available out of the proceeds to provide services. This is ongoing. It is just redefining the term, I guess we can't say compulsive any more.

Representative McWilliams: Do we have a definition of compulsive gambling, of what that means? I am just wondering if this is an expansive bill that is going to provide more services? Is there a fiscal note that should be attached to it?

Chairman Weisz: We don't need a fiscal note, because it is appropriated through the lottery. If you want to look on page 2, the overstruck was the definition of compulsive and the gambling disorder is the new language. It wouldn't change the fiscal note though.

Vice Chairman Rohr: So do we have any data on that? The funds that are expended and the dollars that are used for actual treatment?

P. Sagness: So just to answer your question. We do receive funding from the lottery proceeds and then that funding is contracted with Lutheran Social Services who provide gambling specific services. Those services are provided state wide and are based on need. We don't go looking for people who gamble and then try to get them services. These are individuals who come in because their lives are struggling. As far as the total dollar amount. I believe our contract with Lutheran Social Services is around \$800,000 and about \$200,000 that is general fund. That is provided through our division. It is \$800,000 total and \$200,000 of that is general fund.

Representative McWilliams: Are we using 100% of those funds currently?

P. Sagness: Those funds are contracted to the provider, so it is not a pay for service reimbursement, so this one is all utilized. They also do work in the community in regard to prevention and education with youth and then also some of the dollars are utilized for evaluation. The data we talked about identifying what is the prevalence of gambling disorder in the state. Also the most recent youth risk behavior survey has now added the question for youth. Have you ever gambled. The first time the question was asked in 2015 it was about 30% said yes, so they are continuing to monitor too if there is potentially a youth gambling issue in the state. That is only one number and they want to see at least 3 years of trend before they would identify that it is a consistent issue.

Representative McWilliams: So is the state of ND paying Lutheran Social Services \$800,000 a year regardless of how many people they treat?

P. Sagness: We don't pay a flat rate per individual, but we do reimburse them based on their contract and their deliverables on the contract. Some of that is outreach services. Some of that is direct clinical services. There is also some advertising that is making people aware of where to seek services, so the contract has several identified requirements. One of the things they have identified is that if people are not aware that the service is available, then people are not able to access it.

Chairman Weisz: Further questions? Further discussion of the motion on the floor? Seeing none, the clerk will call the roll for a do pass on SB 2118.

Roll call vote taken Yes 13 No 1 Absent 0

Chairman Weisz: Motion carried. Do I have a volunteer to carry it?

Representative Seibel: I will carry it.

Chairman Weisz: Thank you Representative Seibel.

We are adjourned until 9:00 tomorrow morning.

Date: 2-14-17
Roll Call Vote #: 1

2017 HOUSE STANDING COMMITTEE
ROLL CALL VOTES
BILL/RESOLUTION NO. SB 2118

House Human Services Committee

Subcommittee

Amendment LC# or Description: _____

Recommendation: Adopt Amendment
 Do Pass Do Not Pass Without Committee Recommendation
 As Amended Rerefer to Appropriations

Other Actions: Place on Consent Calendar
 Reconsider _____

Motion Made By Rep. Rohr Seconded By Rep. Skroch

Representatives	Yes	No	Representatives	Yes	No
Chairman Weisz	✓		Rep. P. Anderson	✓	
Vice Chairman Rohr	✓		Rep. Schneider	✓	
Rep. B. Anderson	✓				
Rep. D. Anderson	✓				
Rep. Damschen	✓				
Rep. Devlin	✓				
Rep. Kiefert	✓				
Rep. McWilliams		✓			
Rep. Porter	✓				
Rep. Seibel	✓				
Rep. Skroch	✓				
Rep. Westlind	✓				

Total (Yes) 13 No 1

Absent 0

Floor Assignment Rep. Seibel

If the vote is on an amendment, briefly indicate intent:

REPORT OF STANDING COMMITTEE

SB 2118: Human Services Committee (Rep. Weisz, Chairman) recommends **DO PASS** (13 YEAS, 1 NAYS, 0 ABSENT AND NOT VOTING). SB 2118 was placed on the Fourteenth order on the calendar.

2017 TESTIMONY

SB 2118

SB 2118
Attach
1
1/11

Testimony
Senate Bill 2118 – Department of Human Services
Senate Human Services Committee
Senator Lee, Chairman
January 11, 2017

Chairman Lee, and members of the Senate Human Services Committee, I am Pamela Sagness, Director of the Behavioral Health Division for the Department of Human Service (Department). I am here today in support of Senate Bill 2118, which was introduced at the request of the Department.

The proposed changes would update the language to be consistent with the current version of the Diagnostic and Statistical Manual of Mental Disorder, for example "Gambling Disorder" instead of compulsive gambling.

In addition, proposed language seeks to ensure individuals providing gambling services are working within the scope of their profession.

Lastly, the proposed changes will utilize person-first language. The bill proposes to change "compulsive gamblers" to "individuals with a gambling disorder".

The North Dakota Problem Gambling Advisory Council provided input to the Department regarding these recommendations. That concludes my testimony. I am available to address any questions.

SB2118
Attach
#2
1/11

17.0373.01000

Sixty-fifth
Legislative Assembly
of North Dakota

SENATE BILL NO. 2087

Introduced by

Senators Poolman, Casper

Representatives Delmore, Maragos

1 A BILL for an Act to amend and reenact sections 50-06-21 and 50-06-22 and subdivision a of
2 subsection 4 of section 53-12.1-09 of the North Dakota Century Code, relating to replacing the
3 term "compulsive gambling" with "gambling disorder."

4 **BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:**

5 **SECTION 1. AMENDMENT.** Section 50-06-21 of the North Dakota Century Code is
6 amended and reenacted as follows:

7 **50-06-21. ~~Compulsive gambling~~ Gambling disorder prevention, awareness, crisis**
8 **intervention, rehabilitation, and treatment services.**

9 The department of human services shall contract with qualified treatment service providers
10 for the development and implementation of a program for gambling prevention, awareness,
11 crisis intervention, rehabilitation, financial counseling, and mental health treatment services. The
12 program may provide outpatient services, partial care services, aftercare services, intervention
13 services, financial counseling services, consultation services, or other forms of preventive,
14 rehabilitative, or treatment services for ~~compulsive gamblers~~ an individual with gambling
15 disorder. An individual who provides treatment services must be a mental health professional as
16 defined in section 25-03.1-02 and meet the minimum standards for certification as a gambling
17 counselor as established by rule by that mental health professional's licensing board. An
18 individual who provides financial counseling services must be a certified consumer credit
19 counselor with an accredited financial counseling agency. The department of human services
20 may establish a sliding payment scale for services under the program. The department of
21 human services may establish a centrally located repository of educational materials on
22 identifying and treating ~~compulsive gambling~~ an individual with gambling disorder. Any service
23 fee collected by qualified treatment service providers for services provided under the contract
24 must be applied toward the program's ~~compulsive gambling~~ disorder services. The term

2118
#2
4/11

Sixty-fifth
Legislative Assembly

1 "qualified treatment service provider" means an entity based in North Dakota which is
2 experienced in and capable of delivering ~~compulsive~~ gambling disorder education, prevention,
3 awareness, crisis intervention, rehabilitation, financial counseling, and mental health treatment
4 services as defined by the department of human services. The term "~~compulsive gambler~~"
5 ~~means an individual who is chronically and progressively preoccupied with gambling and the~~
6 ~~urge to gamble and with gambling behavior that compromises, disrupts, or damages personal,~~
7 ~~family, or vocational pursuits~~"gambling disorder" has the meaning set forth in the "Diagnostic
8 and Statistical Manual of Mental Disorders" (fifth edition; American psychiatric association,
9 2013).

10 **SECTION 2. AMENDMENT.** Section 50-06-22 of the North Dakota Century Code is
11 amended and reenacted as follows:

12 **50-06-22. ~~Compulsive gambling~~Gambling disorder prevention and treatment fund -**
13 **Continuing appropriation.**

14 Funds deposited in the ~~compulsive~~ gambling disorder prevention and treatment fund under
15 section 53-12.1-09 are appropriated to the department on a continuing basis for the purpose of
16 providing the services under section 50-06-21.

17 **SECTION 3. AMENDMENT.** Subdivision a of subsection 4 of section 53-12.1-09 of the
18 North Dakota Century Code is amended and reenacted as follows:

- 19 a. Eighty thousand dollars must be transferred to the state treasurer each quarter
20 for deposit in the ~~compulsive~~ gambling disorder prevention and treatment fund;

Att. 1
SB 2118
2/14/17

Testimony
Senate Bill 2118 – Department of Human Services
House Human Services Committee
Representative Weisz, Chairman
February 14, 2017

Chairman Weisz, and members of the House Human Services Committee, I am Pamela Sagness, Director of the Behavioral Health Division for the Department of Human Service (Department). I am here today in support of Senate Bill 2118, which was introduced at the request of the Department.

The proposed changes would update the language to be consistent with the current version of the Diagnostic and Statistical Manual of Mental Disorder, for example "Gambling Disorder" instead of compulsive gambling.

In addition, proposed language seeks to ensure individuals providing gambling services are working within the scope of their profession.

Lastly, the proposed changes will utilize person-first language. The bill proposes to change "compulsive gamblers" to "individuals with a gambling disorder".

The North Dakota Problem Gambling Advisory Council provided input to the Department regarding these recommendations. That concludes my testimony. I am available to address any questions.