

MICROFILM DIVIDER

OMB/RECORDS MANAGEMENT DIVISION

SFN 2053 (2/85) 3M



ROLL NUMBER

DESCRIPTION

3050

2001 HOUSE HUMAN SERVICES

HCR 3050

2001 HOUSE STANDING COMMITTEE MINUTES

BILL/RESOLUTION NO. HCR 3050

House Human Services Committee

☐ Conference Committee

Hearing Date February 21, 2001

| Tape Number | Side A | Side B | Meter # |
|---|--------|--------|--------------|
| Tape 1 | X | | 1345 to 2450 |
| Tape 2 | X | | 4070 to 4820 |
| Committee Clerk Signature <i>Corinne Easton</i> | | | |

Minutes:

Chairman Price, Vice Chairman Devlin, Rep. Dosch, Rep. Galvin, Rep. Klein, Rep. Pollert, Rep. Porter, Rep. Tieman, Rep. Weiler, Rep. Weisz, Rep. Cleary, Rep. Metcalf, Rep. Niemeier, Rep. Sandvig

Chairman Price: Open hearing on HCR 3050.

Rep. Sandvig: Presented bill. I introduced the study resolution because after sitting on this committee for my fourth session I've seen how big the Department of Human Services is, and I think it could use a little bit of realigning. People have been in there for years and years. I talked to other several states like Minnesota, Michigan, Nebraska, Texas and Utah - all have put their Medicaid Department under the Department of Health and also their Aging Service Division. Part of the reason for that was they found that it has helped especially the elderly people to go in and apply for Medicaid if they need it and not think they are getting an entitlement program. They think the Department of Human Services is all entitlement programs. Some of the other

states like California, Wisconsin, and Wyoming that have had this in the past. The letter I have passed out from the State of Michigan tells how they went about realigning their departments. It seems it worked well for them. This originally was going to be a bill draft and it was decided it was a little too much to try to tackle in this session, so I thought we could look at it during the interim.

Chairman Price: I share some of your frustrations. I'm just not real optimistic as to what we can accomplish as we had that study in the previous interim that we spent \$90,000 on that didn't get anywhere. Do you foresee this being handled in a different way, like from a different direction? Any suggestions on how you think we can make this work?

Rep. Sandvig: I would just hope they would be more open to doing this. It seems like we need to do something. I don't see why we have to spend an awful lot of money on it and get an outside entity to see what needs to be done. I think that the departments could come in and talk about what's going on, like maybe this one could be combined with that one. The reason I gave up on the bill was that I found out that so many of the different departments are tied together. Aging Services is hooked in with the Human Service Centers. To try to tear them apart may be a bit difficult. We can try for the study resolution.

Rep. Tieman: How many employees are there in the Human Services Department?

Rep. Sandvig: I'm not sure.

Chairman Price: It is in excess of 2,000. Just for an example, Rep. Tieman, there is either 27 or 29 separate children's programs within the state. A lot of times they are kept separate because of the funding - the way the federal monies come in. It is very frustrating that we can't be a little bit more seamless.

Rep. Tieman: How does that compare to 10 years ago?

Chairman Price: There has been a lot of changes in the last 20 years. That was when the Aging Service Centers came. If it worked right, I think it would be a lot of pluses, but I don't think it is working right.

Vice Chairman Devlin: I would like to lend support to Rep. Sandvig's resolution. I would like the committee to at least consider moving some of the divisions from the Department of Human Services to the Department of Health or other agencies where it better serves the people of North Dakota. If we present this study for consideration, I think that it should be amended that way.

Chairman Price: Are you planning on preparing amendments before we act on this resolution.

Vice Chairman Devlin: I think we can amend it in committee very quickly. I will provide wording for that or it may be broad enough that we don't have to. When I originally talked about it with Rep. Sandvig she was talking about moving some of it to the Department of Health, and I think that is an idea that should at least be explored. That maybe too often we get into turf protection more than we do service and I think it would be appropriate for us to take a look at that.

Senator Fischer: I am here to support HCR 3050. I think that the department has some issues that we should be taking a look at.

Chairman Price: On this one we are pretty much taking a look at the elderly and disabled, do you think we should confine our first look at a couple of areas. If we do the whole thing, it is too much to chew.

Senator Fischer: Yes, rather than the whole department because it would take more than an interim to do that. Developmentally disabled should be looked at as well.

Chairman Price: What about adding Vocational Rehab?

Senator Fischer: That as well.

Chairman Price: Those two are pretty close.

Senator Fischer: I don't think that would take an awful lot more to do. Those I would certainly support as well.

Chairman Price: They have the same director. We will close the hearing on HCR 3050

COMMITTEE WORK:

CHAIRMAN PRICE: Let's go to HCR 3050.

VICE CHAIRMAN DEVLIN: Some suggestions that I would have would that on the end of line 2 where it says "Department of Human Services" put a comma "or moving some divisions or functions to the Department of Health or other state agencies". That gives us the flexibility we're talking about. It may not be the Department of Health, it may be somebody else that we think could do it better. On line 8, I would change the word "would" to "might". I would eliminate "if the department offered a one stop access to services" and replace with "restructuring". On line 9, I would take out the words "the realignment of divisions within" and change to read "whereas a study of".

CHAIRMAN PRICE: (More discussion on amendment.)

REP. WEISZ: I will move the amendment.

REP. TIEMAN: Second.

CHAIRMAN PRICE: We have an amended bill. All those in favor signify by saying Aye (14 Yes).

REP. WEISZ: I will move a Do Pass as amended.

REP. TIEMAN: Second.

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House Human Services Committee

Bill/Resolution Number HCR 3050

Hearing Date February 21, 2001

CHAIRMAN PRICE: We will take a voice vote on this bill for a **DO PASS** as amended.

14 YES 0 NO 0 ABSENT CARRIED BY REP. SANDVIG

VK
2/21/01

HOUSE AMENDMENTS TO HCR 3050

HOUSE HS

2-20-01

Page 1, line 2, after "Services" insert "or moving some divisions or functions to the Department of Health or other state agencies"

Page 1, line 8, replace "would" with "may" and replace "if the department offered a "one-stop" access to services" with "through restructuring"

Page 1, line 9, replace the first "the" with "a study of", remove the first "of", and replace "within" with "and restructuring"

Page 1, line 14, after "Services" insert "or moving some divisions or functions to the Department of Health or other state agencies"

Renumber accordingly

Date: 2.21.01
Roll Call Vote #: 1

2001 HOUSE STANDING COMMITTEE ROLL CALL VOTES
BILL/RESOLUTION NO. HCR 3050

House Human Services Committee

☐ Subcommittee on _____
or
☐ Conference Committee

Legislative Council Amendment Number _____

Action Taken DO PASS The Amendment
as Amended

Motion Made By Weisz Seconded By Tieman

| Representatives | Yes | No | Representatives | Yes | No |
|----------------------------------|-----|----|---------------------|-----|----|
| Rep. Clara Sue Price, Chairman | ✓ | | Rep. Audrey Cleary | ✓ | |
| Rep. William Devlin, V, Chairman | ✓ | | Rep. Ralph Metcalf | ✓ | |
| Rep. Mark Dosch | ✓ | | Rep. Carol Niemeier | ✓ | |
| Rep. Pat Galvin | ✓ | | Rep. Sally Sandvig | ✓ | |
| Rep. Frank Klein | ✓ | | | | |
| Rep. Chet Pollert | ✓ | | | | |
| Rep. Todd Porter | ✓ | | | | |
| Rep. Wayne Tieman | | | | | |
| Rep. Dave Weiler | | | | | |
| Rep. Robin Weisz | | | | | |
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Total (Yes) _____ No _____

Absent _____

Floor Assignment _____

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

Date: 2-21-01
Roll Call Vote #: 2

2001 HOUSE STANDING COMMITTEE ROLL CALL VOTES
BILL/RESOLUTION NO. HCR 3050

House Human Services Committee

☐ Subcommittee on _____
or
☐ Conference Committee

Legislative Council Amendment Number _____

Action Taken DO PASS AS AMENDED

Motion Made By Weising Seconded By Tieman

| Representatives | Yes | No | Representatives | Yes | No |
|----------------------------------|-----|----|---------------------|-----|----|
| Rep. Clara Sue Price, Chairman | ✓ | | Rep. Audrey Cleary | ✓ | |
| Rep. William Devlin, V, Chairman | ✓ | | Rep. Ralph Metcalf | ✓ | |
| Rep. Mark Dosch | ✓ | | Rep. Carol Niemeier | ✓ | |
| Rep. Pat Galvin | ✓ | | Rep. Sally Sandvig | ✓ | |
| Rep. Frank Klein | ✓ | | | | |
| Rep. Chet Pollert | ✓ | | | | |
| Rep. Todd Porter | ✓ | | | | |
| Rep. Wayne Tieman | ✓ | | | | |
| Rep. Dave Weiler | ✓ | | | | |
| Rep. Robin Weisz | ✓ | | | | |
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Total (Yes) 14 No _____

Absent _____

Floor Assignment Rep. Sandvig

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

REPORT OF STANDING COMMITTEE

HCR 3050: Human Services Committee (Rep. Price, Chairman) recommends AMENDMENTS AS FOLLOWS and when so amended, recommends DO PASS and BE PLACED ON THE CONSENT CALENDAR (14 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). HCR 3050 was placed on the Sixth order on the calendar.

Page 1, line 2, after "Services" insert "or moving some divisions or functions to the Department of Health or other state agencies"

Page 1, line 8, replace "would" with "may" and replace "if the department offered a "one-stop" access to services" with "through restructuring"

Page 1, line 9, replace the first "the" with "a study of", remove the first "of", and replace "within" with "and restructuring"

Page 1, line 14, after "Services" insert "or moving some divisions or functions to the Department of Health or other state agencies"

Renumber accordingly

2001 SENATE HUMAN SERVICES

HCR 3050

2001 SENATE STANDING COMMITTEE MINUTES

BILL/RESOLUTION NO. HCR 3050

Senate Human Services Committee

☐ Conference Committee

Hearing Date March 13, 2001

| Tape Number | Side A | Side B | Meter # |
|---|--------|--------|---------|
| 1 | | X | 32.7 |
| | | | |
| | | | |
| Committee Clerk Signature <i>Carol K. Sandvig</i> | | | |

Minutes:

REPRESENTATIVE SALLY SANDVIG, Sponsor, introduced resolution. Maybe something needs to be done to restructure Human Services Department. They are growing bigger all the time and have the largest budget in the state. Several other states have done this. Aging services, alcohol and substance abuse have been put in Dept. of Health. SENATOR MATERN: Does this make elderly deal with more agencies? REP SANDVIG: All aging services would be in the Dept. Of Health. One stop at Dept. Of Health for all elderly. The idea is to have a study to untangle projects from Dept. Of Human Services.

REPRESENTATIVE DEVLIN, cosponsor of bill, offered comments. This is no reflection on the Dept of Human Services, but confusion results to the people of ND. The department has gotten so big.

No more testimony. The hearing was closed on HCR 3050.

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Senate Human Services Committee

Bill/Resolution Number HCR 3050

Hearing Date March 13, 2001

Discussion ensued. SENATOR FISCHER moved a DO PASS. SENATOR ERBELE seconded the motion. Discussion. Roll call vote carried 5-0-1. SENATOR FISCHER will carry the bill.

Date: 3/13/01

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|--------|----------------|-----------|
| Senate | HUMAN SERVICES | Committee |
|--------|----------------|-----------|

Legislative Council Amendment Number

Action Taken P. Pass

Motion Made By Sen Fischer Seconded By Sen Eschelt

[illegible]

Total (Yes) 6 No 0

Absent 0

Floor Assignment Sen Fischer

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

REPORT OF STANDING COMMITTEE (410)
March 16, 2001 3:12 p.m.

Module No: SR-46-5946
Carrier: Fischer
Insert LC: . Title: .

REPORT OF STANDING COMMITTEE

HCR 3050, as engrossed: Human Services Committee (Sen. Lee, Chairman)
recommends **DO PASS** (6 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING).
Engrossed HCR 3050 was placed on the Fourteenth order on the calendar.

2001 TESTIMONY

HCR 3050

HCR 3050

STATE OF MICHIGAN



JOHN ENGLER, Governor

DEPARTMENT OF COMMUNITY HEALTH

LEWIS CASS BUILDING

LANSING, MICHIGAN 48913

JAMES K. HAVEMAN, JR., Director

January 29, 2001

The Honorable Sally Sandvig
North Dakota State Legislature - District 21
201 North 11th Street, Apartment 202
Fargo, North Dakota 58102-4652

Dear Representative Sandvig:

It was nice to see you at the Women in Government event. It sounds like you have some interesting legislative options in your state.

To give you some background, when Governor Engler assumed leadership of the State of Michigan on January 1, 1991, there was a separate Department of Mental Health which handled mental health services and services for persons who were developmentally disabled. There was also a separate Department of Public Health, and both directors of these departments were cabinet members.

In addition, within the Department of Management and Budget, there was the Office of Services to the Aging, Crime Victims Services Commission, and Office of Drug Control Policy. The Medicaid program was located within the Michigan Department of Social Services which is now the Family Independence Agency.

In some way, each of these programs dealt with people with particular health needs. There were several problems with this as you can probably gather.

The agencies were not working closely together and departments had a way of practicing their work in "silos." When meetings did take place, it was never clear who was on first and who was in the lead. It was not clear who was responsible for the outcome and there were multiple people doing the same functions, whether it be budgeting, contracting, legislative liaison, and policy development.

The Governor gave me 60 days to come up with a better solution in 1995. We did and proposed the following three areas for his consideration:

January 29, 2001
Page Two

The first was to form a new department entitled, The Michigan Department of Community Health. The second was to move the Medicaid budget from the Family Independence Agency to the new Department of Community Health, which was a major decision. The third was to issue an Executive Order to make this happen. Executive Orders in Michigan have the power of law - they cannot recreate statute but they can move pieces of it around.

When we issued the Executive Orders in 1996, it was interesting that the Legislature, both Republicans and Democrats, very quickly agreed and realigned the legislative policies in the appropriations committees to meet the objectives of the new department. In fact, both sides of the aisle wondered why we had not done this a long time ago. They wanted to take some credit and supported any legislation that we needed, which we did not.

The Governor and I had several briefings with key legislative leaders to give them support of why this should happen. You might guess that the interest groups and all of these various departments and agencies were quite reluctant to give up their "turf" or their "deals" like they had in the past, and were somewhat anxious about dealing with part of a larger agency.

We worked very hard during the transition of bringing the various departments together. This is very hard work and takes key personnel and civil service people to make this happen. We eliminated layers in the bureaucracy and streamlined things considerably. Even though our budget is up considerably since 1991 as a whole, the services are going to where the need is, such as the people of this state. If you add up all of the state employees in 1991 in the various departments and agencies, there were about 13,000. Even after closing state institutions and streamlining the various departments and agencies, we now have about 6,000 employees. We shifted the money to where it belongs - at the community level.

Today people have fully accepted the consolidated department. We eliminated hundreds of various task forces and meetings. Meetings are much more efficient and it is clear who runs them and what the outcomes are. We can provide services holistically, we can move into "one-stop shopping," and you really cannot expect people to integrate their services at the local level unless you are committed to integrate them at the state level. We are now one voice in the Legislature. We have one legislative person and one budget person, and all of our contracts have been consolidated into one office as well as our actuarial divisions. I could list many other areas where consolidation and streamlining took place.

January 29, 2001
Page Three

Many states, when they brought agencies together, just left them as they were and put a "health czar" over all the department directors. I think that is a direction in which you do not want to go, and if you integrate programs, you should do it all the way, and you cannot exclude any group because of some political or interest group activity. Many states have done similar mergers like Michigan's but have left out Medicaid, which is a big mistake.

I hope this information has been helpful. It takes a lot of selling but also takes the boldness of the Legislature and the Governor to make this happen successfully. If you have any questions, feel free to contact me at (517) 335-0267, or you can email me at: haveman@state.mi.us.

My continued best wishes and have a nice day.

Cordially,



James K. Haveman, Jr.

JKH:kjd