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ROLL NUMBER

DESCRIPTION

2068

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LaCosta Rickford
Operator's Signature

10/15/03
Date

2003 SENATE HUMAN SERVICES

SB 2068

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10/15/03

2003 SENATE STANDING COMMITTEE MINUTES

BILL/RESOLUTION NO. 2068

Senate Human Services Committee

☐ Conference Committee

Hearing Date January 13, 2003

| Tape Number | Side A | Side B | Meter # |
|---|--------|--------|--------------|
| 2068 | X | | #6054 - end |
| | | X | #0-481 |
| | | X | # 3621- 3780 |
| Committee Clerk Signature <i>Donna Kramer</i> | | | |

Minutes:

SENATOR JUDY LEE called the meeting to order for SB 2068. This bill is relating to remedial eye care services coverage.

DAVID ZENTNER, Director of Medical Services for the Department of Human Services, provided information in support of Bill 2068. (Written Testimony) (Meter #6145 to end, Side A and Meter 0 - 158, Side B)

SENATOR BROWN: What is the proposed budget for the current biennium?

DAVID ZENTNER: It is the same. (Meter # 178)

SENATOR FAIRFIELD: What happens under the age of 21?

DAVID ZENTNER: Kids under age 21 are eligible for the Medicaid program, primarily the group we wanted to cover is 21 - 65.

SENATOR POLOVITZ: Are programs for after age 65?

DAVID ZENTNER: The assumption would be that Medicare would be involved.

Page 2

Senate Human Services Committee

Bill/Resolution Number SB 2068

Hearing Date January 13, 2003

SENATOR POLOVITZ had a question regarding impaired eyesight for older persons.

Responses by DAVID ZENTNER and SENATOR LEE . (Meter # 276 - 376)

NANCY KOPP representing ND Optometric Association in support of bill testified.

Optometrists have been working with Department of Human Services for years.

Hearing closed on SB 2068. (Meter # 477)

Committee Decision:

Motion made by SENATOR ERBELE to do pass. (Meter # 3621)

Seconded by SENATOR BROWN.

Roll Call. Motion carried. 6 yeas 0 nays.

SENATOR ERBELE will be the carrier.

FISCAL NOTE
Requested by Legislative Council
01/03/2003

Bill/Resolution No.: SB 2068

1A. State fiscal effect: Identify the state fiscal effect and the fiscal effect on agency appropriations compared to funding levels and appropriations anticipated under current law.

| | 2001-2003 Biennium | | 2003-2005 Biennium | | 2005-2007 Biennium | |
|----------------|--------------------|-------------|--------------------|-------------|--------------------|-------------|
| | General Fund | Other Funds | General Fund | Other Funds | General Fund | Other Funds |
| Revenues | | | | | | |
| Expenditures | | | | | | |
| Appropriations | | | | | | |

1B. County, city, and school district fiscal effect: Identify the fiscal effect on the appropriate political subdivision.

| 2001-2003 Biennium | | | 2003-2005 Biennium | | | 2005-2007 Biennium | | |
|--------------------|--------|------------------|--------------------|--------|------------------|--------------------|--------|------------------|
| Counties | Cities | School Districts | Counties | Cities | School Districts | Counties | Cities | School Districts |
| | | | | | | | | |

2. Narrative: Identify the aspects of the measure which cause fiscal impact and include any comments relevant to your analysis.

There is no fiscal impact for this bill. The remedial eye care program is a state funded program designed to provide services in those instances where blindness may occur if preventive actions are not taken and the individual has no other means of payment for these services. The proposed changes will clarify what services are covered under the program. These criteria have been Department policy for many years.

3. State fiscal effect detail: For information shown under state fiscal effect in 1A, please:

A. Revenues: Explain the revenue amounts. Provide detail, when appropriate, for each revenue type and fund affected and any amounts included in the executive budget.

B. Expenditures: Explain the expenditure amounts. Provide detail, when appropriate, for each agency, line item, and fund affected and the number of FTE positions affected.

C. Appropriations: Explain the appropriation amounts. Provide detail, when appropriate, of the effect on the biennial appropriation for each agency and fund affected and any amounts included in the executive budget. Indicate the relationship between the amounts shown for expenditures and appropriations.

| | | | |
|---------------|--------------------|----------------|----------------|
| Name: | Debra A. McDermott | Agency: | Human Services |
| Phone Number: | 328-3695 | Date Prepared: | 01/10/2003 |

Date: 01-13-02
Roll Call Vote #: 1

2003 SENATE STANDING COMMITTEE ROLL CALL VOTES
BILL/RESOLUTION NO. 2068

Senate Human Services Committee

☐ Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken Do Pass

Motion Made By Sen. Erbele Seconded By Sen. Brown

| Senators | Yes | No | Senators | Yes | No |
|-----------------------------------|-----|----|----------|-----|----|
| Senator Judy Lee - Chairman | ✓ | | | | |
| Senator Richard Brown - V. Chair. | ✓ | | | | |
| Senator Robert S. Erbele | ✓ | | | | |
| Senator Tom Fischer | ✓ | | | | |
| Senator April Fairfield | ✓ | | | | |
| Senator Michael Polovitz | ✓ | | | | |
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Total (Yes) 6 No 0

Absent 0

Floor Assignment Senator Erbele

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

REPORT OF STANDING COMMITTEE (410)
January 13, 2003 2:34 p.m.

Module No: SR-05-0506
Carrier: Erbele
Insert LC: . Title: .

REPORT OF STANDING COMMITTEE
SB 2068: Human Services Committee (Sen. J. Lee, Chairman) recommends DO PASS
(6 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). SB 2068 was placed on the
Eleventh order on the calendar.

2003 HOUSE HUMAN SERVICES

SB 2068

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La Costa Rickford

Date

10/15/03

2003 HOUSE STANDING COMMITTEE MINUTES

BILL/RESOLUTION NO. SB 2068

House Human Services Committee

☐ Conference Committee

Hearing Date February 26, 2003

| Tape Number | Side A | Side B | Meter # |
|--|--------|--------|-----------|
| 1 | x | | 0.6 - 8.2 |
| | | | |
| | | | |
| Committee Clerk Signature <i>Sharon R. [Signature]</i> | | | |

Minutes:

Maggie Anderson, Assistant Director of Medical Services for the Dept. of Human Services appeared in support with written testimony.

Rep. Potter: wanted to know how the ages got switched from between 21 and 65.

Answer: The age did not change, we are just clarifying that in the rules to clean up the language that specifically identifies the population that is covered with this program.

Rep. Potter: Is there another program for people less than 21? Answer: Yes, regular Medicaid, this is a state funding program only.

Rep. Amerman had question on prior authorization and how it is done.

Nancy Kopp, ND Optometric Association appeared in support stating this is basically a house keeping bill.

Rep. Price asked Ms. Anderson if there was a hole right now for the 19-20 & 21 yr olds.

Page 2

House Human Services Committee

Bill/Resolution Number SB 2068

Hearing Date February 26, 2003

Kaye Doll replied stating anyone that is between the ages of 0 and 21 are covered under the Medicaid system. It depends on the financial eligibility.

Rep. Price: noted that we are getting conflicting information because we are told that the 19-20 & 21 yr olds are getting left out of the loop unless the funding changes.

Ms. Doll: If they are in the home they are covered until the age of 21 and if not they would fall back into the disability and come into the age of _____. If they are on their own and out of the home, they would fall under this remedial program. If they have children, they would fall into the ND Medicaid because they would be incapacitated parents.

Rep. Price: If there is any individual over the age of 21, how would the 19 yr olds fit in there.

Ms. Doll: They would have to be determined if they vote or fit into that criteria.

Rep. Price: How many are covered in a year and what kind of expenses are we looking in the budget in the biennium? Answer: There is probably 12 to 15 right now and \$44,000.00 per biennium.

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10/15/03
Date

2003 HOUSE STANDING COMMITTEE MINUTES

BILL/RESOLUTION NO. SB 2068

House Human Services Committee

☐ Conference Committee

Hearing Date March 4, 2003

| Tape Number | Side A | Side B | Meter # |
|--|--------|--------|-------------|
| 2 | x | | 41.7 - 61.7 |
| 2 | | x | 0.0 - 1.1 |
| Committee Clerk Signature <i>Sharon Penrow</i> | | | |

Minutes: Committee Work

Rep. Price: (Ages 18 through 20) read letter from Maggie Anderson of Dept. of Human Services who states through age 20, will be covered under the regular Medicaid Program for eye care services.

Nancy Kopp: CHIP Program only goes through age 18 and there is no other adult program and would have to disagree with the Dept.

Rep. Price: If we would change line 9 to over the age of 18, we should be catching those.

Rep. Weisz: So the actual age of 21 would be excluded.

Nancy Kopp: Recommends over age of 18 and under the age of 65.

Nancy Kopp: Keep in mind that this program is not for Medicaid eligible, this is for those that have fallen through the cracks and don't have insurance. Feels they just wanted to narrow that window of 3 years.

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10/15/03
Date

Page 2

House Human Services Committee

Bill/Resolution Number SB 2068

Hearing Date March 4, 2003

Rep. Potter: made a motion to amend in Section 1, line 9 from the age of 21 to 18, second by Rep. Niemeier.

Rep. Porter: Wondering why we need a lower limit now that hasn't been there in the past. Our people falling through the cracks off the Medicaid system that were 10 years old that received treatment under this program and the budget is what it is and no more money can be expended over that amount, why do we have to worry about a lower floor as an age limit on this particular program? Not convinced they need a floor on this program but understands the ceiling.

Rep. Weisz: Current statute just says age 65, does make a question on why they want that 3 year window, makes no sense or what's their rationale.

Rep. Niemeier: Covering that gap makes sense and its for remedial eye care (serious).

Rep. Sandvig: Any age could be covered from 0 to 65 if she understands Rep. Porter so she would agree with him.

Rep. Price: The only thing that they may be hoping is that Medicaid and CHIPS is the choice that people make for their children and that any money be saved for the 18 to 65 yr. olds.

Nancy Kopp: Assumes they just want to make it policy.

Vote: Motion failed

Rep. Porter: made a motion to amend, second by Rep. Wieland

Vote: 13 - 0 - 0 Passed Rep. Amerman to carry the bill.

3-4
Date: February, 2003
Roll Call Vote #:

2003 HOUSE STANDING COMMITTEE ROLL CALL VOTES
BILL/RESOLUTION NO. SB 2068

House _____ HUMAN SERVICES _____ Committee

☐ Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken DP as Amended

Motion Made By Rep Porter Seconded By Rep Wieland

| Representatives | Yes | No | Representatives | Yes | No |
|------------------------------|-----|----|---------------------|-----|----|
| Rep. Clara Sue Price - Chair | ✓ | | Rep. Sally Sandvig | ✓ | |
| Rep. Bill Devlin, Vice-Chair | ✓ | | Rep. Bill Amerman | ✓ | |
| Rep. Robin Weisz | ✓ | | Rep. Carol Niemeier | ✓ | |
| Rep. Vonnie Pletsch | ✓ | | Rep. Louise Potter | ✓ | |
| Rep. Gerald Uglem | ✓ | | | | |
| Rep. Chet Pollert | ✓ | | | | |
| Rep. Todd Porter | ✓ | | | | |
| Rep. Gary Kreidt | ✓ | | | | |
| Rep. Alon Wieland | ✓ | | | | |
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Total (Yes) 13 No 0

Absent 0

Floor Assignment Rep Amerman

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

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10/15/03
Date

REPORT OF STANDING COMMITTEE (410)
March 5, 2003 4:47 p.m.

Module No: HR-39-4042
Carrier: Price
Insert LC: 38209.0101 Title: .0200

REPORT OF STANDING COMMITTEE
SB 2068: Human Services Committee (Rep. Price, Chairman) recommends
AMENDMENTS AS FOLLOWS and when so amended, recommends **DO PASS**
(13 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). SB 2068 was placed on the Sixth
order on the calendar.

Page 1, line 9, remove "over the age of twenty-one and"

Renumber accordingly

2003 TESTIMONY

SB 2068

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10/15/03
Date

**TESTIMONY BEFORE THE SENATE HUMAN SERVICES COMMITTEE
REGARDING SENATE BILL 2068
JANUARY 13, 2003**

Chairman Lee, members of the committee, I am David Zentner, Director of Medical Services for the Department of Human Services. I appear before you today to provide information and support this bill.

The Aid to the Blind Remedial Program is a small state funded program that is designed to pay for remedial eye care services to prevent blindness or to restore eyesight for certain individuals who do not otherwise have health care coverage. If treatment were not available, these individuals would be subject to permanent loss of their eyesight. Common diagnosis would include detached retina, injuries to the eye, and cataracts.

The budget for the current biennium is \$44,948. Persons eligible must not be considered permanently blind and must be between the ages of 21 and 65 years of age.

The proposed changes in the law would clarify the eligibility process in that individuals would have to apply for services and receive authorization from the Department before payment could be authorized. Exceptions would be made for needed emergency services.

The bill also clarifies what is meant by remedial eye care services in that it does not include coverage of impairments or loss of eyesight caused by certain diseases. It also does not include payment for routine services.

The proposed changes will put into law the current policies used by the Department to determine eligibility and pay for services to eligible individuals. With the limited budget, it is imperative that funds be used to aid individuals who

could lose their eyesight from diseases of the eye rather than providing maintenance or routine services.

We do not anticipate any fiscal impact from the changes proposed in this bill. The Department recommends a do pass on this bill.

I would be happy to answer any questions you may have.

**TESTIMONY BEFORE THE HOUSE HUMAN SERVICES COMMITTEE
REGARDING SENATE BILL 2068
FEBRUARY 26, 2003**

Chairman Price, members of the committee, I am Maggie Anderson, Assistant Director of Medical Services for the Department of Human Services. I appear before you today to provide information and support this bill.

The Aid to the Blind Remedial Program is a small state funded program that is designed to pay for remedial eye care services to prevent blindness or to restore eyesight for certain individuals who do not otherwise have health care coverage. If treatment were not available, these individuals would be subject to permanent loss of their eyesight. Common diagnosis would include detached retina, injuries to the eye, and cataracts.

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