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ROLL NUMBER

DESCRIPTION

2070

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Operator's Signature

LaCosta Rickford

10/15/03

Date

2003 SENATE JUDICIARY

SB 2070

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LaCosta Rickford

Date

10/15/03

2003 SENATE STANDING COMMITTEE MINUTES

BILL/RESOLUTION NO. SB 2070

Senate Judiciary Committee

☐ Conference Committee

Hearing Date 01/14/03

Tape Number	Side A	Side B	Meter #
1	x		17.0 - 39.4
Committee Clerk Signature <i>Maria L Solberg</i>			

Minutes: **Senator John T. Traynor, Chairman**, called the meeting to order. Roll call was taken and all committee members present. Sen. Traynor requested meeting starts with testimony on the bill.

Testimony in support of SB 2070

Nancy McKenzie of the Department of Human Services, Attachment #1 (meter 17.6)

This Bill has already been passed in Minnesota with the exception substance abuse we have added in addition with the mental illness part of the bill. Attachment #3

Sen. Traynor asked if we had a dollar amount that Minnesota pays for our people (meter 22.6)

An exact number was not known but due to our larger facility on the North Dakota side of the MN-ND boarder, ie Grand Forks and Fargo we see many more MN residence. Discussion of the interstate compact agreement applies once a person has already been hospitalized and on a volunteer bases. This would be intended for the involuntary or non competent patient.

Page 2

Senate Judiciary Committee
Bill/Resolution Number 2070
Hearing Date 01/14/03

Senator Stanley W. Lyson, Vice Chairman asked if any contact has been made with Montana? I do not have any statistics from the Montana sides but I am sure with the difficulties of their mental health system we have plenty. We will go state to state with this, starting with MN.

Senator Thomas L. Trenbeath questioned several provisions (meter 24.6) Number 2, section 1,- "an individual who receives treatment for mental illness of chemical dependency in another state under this section is subject to the laws of the state in which treatment is provided and have to be informed of the differences". Under the reciprocal side of that says individuals committed by a court of a bordering state and placed in ND facilities continue to be in the legal custody of the bordering state...." One refers to the payment end and the other refers to the length of stay ect. I would like to refer this on to Karen Larson. Sen. Trenbeath requested clarification on this issue.

Discussion (meter 27.5) on the collections of funds at this time .

Karen Romig Larson, Director of the division of Mental Health and Substance abuse spoke on the location of facilities (29.4) This bill is only for "nonresidential" patients. Discussion regarding the difficulties of service to cross state lines.

Alex C. Schweitzer, Superintendent of ND State Hospital -See attachment #2

Questions: Testimony in opposition of SB 2070:

There was no testimony in opposition of bill.

Neutral Testimony to SB 2070

There was no testimony neutral to SB 2070

Senator Thomas L. Trenbeath requested the bill be held pending language clarification.

Senator John T. Traynor, Chairman Closed the hearing.

2003 SENATE STANDING COMMITTEE MINUTES

BILL/RESOLUTION NO. SB2070

Senate Judiciary Committee

☐ Conference Committee

Hearing Date 02/04/03

Tape Number	Side A	Side B	Meter #
4	X		1.60
Committee Clerk Signature <i>Maria L. Hallberg</i>			

Minutes: Senator John T. Traynor, Chairman, called the meeting to order. Roll call was taken and all committee members present. Sen. Traynor requested meeting starts with committee work on the bill:

Discussion on bill. Senator Thomas L. Trenbeath discussed an E-Mail that viewed his concerns Attachemnt #1

Motion Made to DO PASS SB 2072 by Senator Stanley W. Lyson, Vice Chairman and seconded by Senator Thomas L. Trenbeath

Roll Call Vote: 5 Yes. 0 No. 1 Absent

Motion Passed

Floor Assignment Senator Stanley W. Lyson, Vice Chairman

Senator John T. Traynor, Chairman closed the hearing

FISCAL NOTE
Requested by Legislative Council
01/03/2003

Bill/Resolution No.: SB 2070

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.*

☐ This bill would allow the Department to contract with any appropriate treatment facility in a bordering state (includes MN, MT, SD) for treatment of mental illness or chemical dependency for residents of ND and to contract with providers to provide treatment in ND to residents of those states. Although we are able to determine the cost to provide such treatment, at this time we cannot determine what portion of those costs would be covered by insurance or the Medicaid program of the neighboring states.

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:	Brenda M. Welsz	Agency:	Department of Human Services
Phone Number:	328-2397	Date Prepared:	01/13/2003

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L. Costa Rickford
Operator's Signature

10/15/03
Date

Date: February 4, 2003
Roll Call Vote #: 1

2003 SENATE STANDING COMMITTEE ROLL CALL VOTES
BILL/RESOLUTION NO. SB 2070

Senate JUDICIARY Committee

☐ Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken DO PASS

Motion Made By Senator Stanley W. Lyson, Vice Chairman Seconded By Senator Thomas L. Trenbeath

Senators	Yes	No	Senators	Yes	No
Sen. John T. Traynor - Chairman	X		Sen. Dennis Bercier	X	
Sen. Stanley. Lyson - Vice Chair	X		Sen. Carolyn Nelson		
Sen. Dick Dever	X				
Sen. Thomas L. Trenbeath	X				

Total (Yes) Five No ZERO (0)

Absent One

Floor Assignment Senator Stanley W. Lyson, Vice Chairman

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

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10/15/03
Date

REPORT OF STANDING COMMITTEE (410)
February 4, 2003 4:20 p.m.

Module No: SR-21-1656
Carrier: Lyson
Insert LC: . Title: .

REPORT OF STANDING COMMITTEE
SB 2070: Judiciary Committee (Sen. Traynor, Chairman) recommends **DO PASS**
(5 YEAS, 0 NAYS, 1 ABSENT AND NOT VOTING). SB 2070 was placed on the
Eleventh order on the calendar.

(2) DESK, (3) COMM

Page No. 1

SR-21-1656

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LaCosta Rickford

10/15/03

Date

2003 HOUSE JUDICIARY

SB 2070

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Lacosta Rickford

Date

10/15/03

2003 HOUSE STANDING COMMITTEE MINUTES

BILL/RESOLUTION NO. SB 2070

House Judiciary Committee

☐ Conference Committee

Hearing Date 3-17-03

Tape Number	Side A	Side R	Meter #
2	xx		2.9-13.7
Committee Clerk Signature <i>APenrose</i>			

Minutes: 10 members present, 3 members absent (Reps. Maragos, Galvin, Wrangham).

Chairman DeKrey: We will open the hearing on SB 2070.

Nancy McKenzie, Dept. of Human Services: Support (see attached testimony).

Chairman DeKrey: Why is the fiscal note \$0.

Ms. McKenzie: Basically, when we looked at fiscal impact, we're not talking about these individuals in turn paying for their treatment at the ND State Hospital. This question came up on the Senate side, why there wouldn't be a \$411,000 revenue source here. I don't think so. I think what we're going to see is those individuals will not be admitted, very rarely, to the State Hospital, they will be treated in their home state. That's why we believe the revenue impact and fiscal effect will be neutral.

Rep. Delmore: If they were admitted, under this bill, the cost would be borne by the state in which they reside in.

Page 2
House Judiciary Committee
Bill/Resolution Number SB 2070
Hearing Date 3-17-03

Ms. McKenzie: Yes, assuming that we have indeed put into place a specific contract with that state, which of course is our intention.

Rep. Wrangham: So if we have a citizen of North Dakota, who we send to MN for treatment, ND would be paying that MN facility for that care.

Ms. McKenzie: Yes, that is correct, and again, we would only do that if it were a treatment facility that we have entered into a contract with. It's not a wide open door across the board. It simply allows us to enter into contracts with appropriate treatment facilities. So before we would do that, we would have as in any contracting process, we would have taken a look at whether their program meets the standards, what the costs are of that program compared to others, compared to providing care ourselves, etc.

Rep. Wrangham: Is there presently a legal reason why you cannot do that.

Ms. McKenzie: Yes, you currently cannot commit that individual across the state line. So the example that I'm most familiar with, as Regional Director of Human Service Center in Grand Forks and Fargo, is that someone presents at an emergency room, maybe over the weekend, brought by law enforcement or family members, whether that is because of an acute mental illness episode or substance abuse problem, they present at the emergency room, it is determined that they need to be admitted to be stabilized, but the determination is made then that if they need ongoing treatment, that they should be committed for that treatment, if they are not willing to pursue that treatment. But if that individual is in the hospital in Fargo or Grand Forks, they are under the jurisdiction of the ND court, and that court can only commit them to the ND State Hospital for that treatment; even though they may have a history of previous admissions to a MN facility, etc. they would have to be admitted to the ND State Hospital because the court can't

Page 3
House Judiciary Committee
Bill/Resolution Number SB 2070
Hearing Date 3-17-03

cross that line, and law enforcement can't transport. You can't ask MN law enforcement come back and transport that individual from a hospital to Fergus Falls treatment facility or whatever. This bill would allow for that, not only allow for establishing of contracts, but it involves the court and law enforcement to have that jurisdiction of people. Only for the sake of emergency or commitment. Anybody who is residing in the hospital or the treatment program within our state, is subject to our laws in terms of treatment.

Rep. Wrangham: If a MN resident is in ND, and is involuntarily committed, and then the ND court would have to assign treatment. If they sent them to treatment in MN, then who would pay. They are a MN resident, they receive treatment in MN but it's a North Dakota order. Who would pay for the treatment.

Ms. McKenzie: You are talking about a MN resident, receiving care in a MN facility...

Rep. Wrangham: Being in North Dakota.

Ms. McKenzie: They are in the ND hospital, but they are a MN resident..

Rep. Wrangham: Right, and then they are transferred to MN for continuing care.

Ms. McKenzie: That would all be done under the jurisdiction of the MN court.

Ms. Larson: Basically it would allow the transport of that MN resident back to the jurisdiction of MN and allow their insurance to pay.

Rep. Wrangham: They would go to MN?

Ms. McKenzie: Right, the state of which the person is a resident is responsible for the costs.

Rep. Onstad: It talks about informing the patient of the implications of different state hospitals.

An example of that would be...?

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House Judiciary Committee
Bill/Resolution Number SB 2070
Hearing Date 3-17-03

Ms. McKenzie: One example might be that one state might have a different law relating to how many days in treatment you can be held before you are entitled to a hearing. What is the process of that emergency hearing, treatment hearing, those can vary across state lines, so we need to be sure that if we've got a person from MN, in a ND hospital or vice versa, that we've explained to them that it may not be exactly the same as what they might have had in a previous hospitalization in another state. Law pertaining to forced medication might be another.

Chairman DeKrey: We won't talk about the number of days.

Ms. McKenzie: Any treatment related law, etc.

Chairman DeKrey: Thank you. Further testimony in support. Testimony in opposition? We will close the hearing.

(Reopened later in the same session.)

Chairman DeKrey: What are the committee's wishes in regard to SB 2070.

Rep. Kretschmar: I move a Do Pass.

Rep. Onstad: Seconded.

10 YES 0 NO 3 ABSENT DO PASS CARRIER: Rep. Boehning

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10/15/03
Date

Date: 3/17/03
Roll Call Vote #: 1

2003 HOUSE STANDING COMMITTEE ROLL CALL VOTES
BILL/RESOLUTION NO. 2070

House Judiciary Committee

☐ Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken Do Pass

Motion Made By Rep. Kretschmar Seconded By Rep. Onstad

Representatives	Yes	No	Representatives	Yes	No
Chairman DeKrey	✓		Rep. Delmore	✓	
Vice Chairman Maragos	AB		Rep. Eckre	✓	
Rep. Bernstein	✓		Rep. Onstad	✓	
Rep. Boehning	✓				
Rep. Galvin	AB				
Rep. Grande	✓				
Rep. Kingsbury	✓				
Rep. Klemin	✓				
Rep. Kretschmar	✓				
Rep. Wrangham	AB				

Total (Yes) 10 No 0

Absent 3

Floor Assignment Rep. Boehning

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

REPORT OF STANDING COMMITTEE (410)
March 17, 2003 12:11 p.m.

Module No: HR-47-4900
Carrier: Boehning
Insert LC: . Title: .

REPORT OF STANDING COMMITTEE
SB 2070: Judiciary Committee (Rep. DeKrey, Chairman) recommends **DO PASS**
(10 YEAS, 0 NAYS, 3 ABSENT AND NOT VOTING). SB 2070 was placed on the
Fourteenth order on the calendar.

(2) DESK, (3) COMM

Page No. 1

HR-47-4900

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10/15/03
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2003 TESTIMONY

SB 2070

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10/15/03
Date

Nancy
#1

Senate Bill 2070
Senate Judiciary Committee
January 14, 2003
John T. Traynor, Chairman

Chairman Traynor, members of the Senate Judiciary Committee, I am Nancy McKenzie of the Department of Human Services. I am here to testify in support of the relating to interstate contracts for the treatment of individuals with mental illness or chemical dependency.

- This bill would allow the department to contract with any appropriate treatment facility in a bordering state (includes Minnesota, Montana, or South Dakota) for the treatment of mental illness or chemical dependency for residents of North Dakota, and to contract with providers to provide treatment in North Dakota to residents of those bordering states.
- This bill also allows the placement in North Dakota of individuals who are on emergency holds or who have been involuntarily committed in a bordering state; and, would enable the temporary placement in a bordering state of patients who are on emergency holds in North Dakota.
- Responsibility for payment for the cost of care of a resident of a bordering state would remain with the state of which that individual is a resident; responsibility for North Dakota residents remains with North Dakota.
- A bill allowing for such agreements between MN and ND for treatment of persons with mental illness was passed by the MN state legislature in 2002; passage of North Dakota's bill will allow for such agreements to be implemented.

Zacosta Rickford
Operator's signature

10/15/03
Date

- Such contracts may not include treatment for persons serving a sentence, who are on probation and parole, and are the subject of a presentence investigation.
- During the current biennium, 35 out-of-state residents have been admitted to the North Dakota State Hospital; of these, 20 were Minnesota residents, 5 South Dakota residents, and 2 were Montana residents. Half of the MN admissions were screened into the State Hospital by SEHSC staff. These patients are not able to have their care paid by MN Medical Assistance, and therefore must be directly billed for their care. Most often, they are unable to pay for the care received. Cost to North Dakota for provision of care of out of state residents at the State Hospital during the current biennium is \$411,289.

This concludes my testimony.

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10/15/03
Date

AH #2

Senate Bill 2070
Senate Judiciary Committee
January 14, 2003
John T. Traynor, Chairman

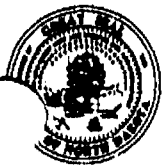
Chairman Traynor, members of the Senate Judiciary Committee, I am Alex C. Schweitzer, the Superintendent of the North Dakota State Hospital. I support the passage of Senate Bill 2070, which relates to interstate contracts for the treatment of individuals with mental illness or chemical dependency.

The hospital supports the passage of this bill for two reasons;

- 1) The North Dakota State Hospital would see a decrease in the number of out of state admissions from bordering states (especially the State of Minnesota) and we would see a decrease in the amount of uncompensated care provided to out of state admissions.
- 2) Minnesota residents would now have an option, to have their care paid for by the State of Minnesota, when they receive treatment in a public or private treatment facility in the State of North Dakota.

I hope your committee considers the passage of this legislation, which will enhance the ability of treatment facilities in border states to contract for the provision of services and the payment of such services.

HH #3



**NORTH DAKOTA DEPARTMENT
OF HUMAN SERVICES**

John Hoeven, Governor
Carol K. Olson, Executive Director

Executive Office

(701) 328-1814
Fax (701) 328-1545
Toll Free 1-800-472-2622
TTY (701) 328-3480

January 15, 2003

TO: Senate Judiciary Committee
John T. Traynor, Chairman

FROM: Nancy J. McKenzie, Regional Director of Northeast and Southeast Human
Service Centers, N.D. Department of Human Services

RE: SB 2070

COST COMPARISON - INPATIENT TREATMENT

North Dakota State Hospital and the Fergus Falls Regional Treatment Center of Minnesota

Facility	Average Daily Cost
North Dakota State Hospital	\$346
Fergus Falls Regional Treatment Center (MN)	\$366

600 East Boulevard Avenue Department 325 -- Bismarck, ND 58505-0250
www.state.nd.us/humanservices

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10/15/03
Date

DeNae H. Kautzmann
01/28/2003 10:45 AM

To: Thomas L. Trenbeath/NDLC/NoDak@NoDak, Dick D.
Dever/NDLC/NoDak@NoDak
cc: Karen A. Larson/DHS/NoDak@NoDak, Nancy J.
McKenzie/DHS/NoDak@NoDak, Tom A. Mayer
<tmayer@state.nd.us>
Subject: SB 2070

Senators:

I was asked to respond to your question relative to whether there is a conflict or inconsistency between Section 2 and Section 5 of the bill.

The provisions of section 2 and section 5 are not inconsistent. Section 2 regards what law applies when the individual is treated in another state. For treatment purposes the individual is subject to the laws of the state in which treatment is provided. The language in Section 5 does not conflict with Section 2. Section 5 provides that when a person is committed by a court in a bordering state, that the individual continues to be in that state's legal custody. The bordering state's laws would govern commitment issues such as the length, reexaminations, extensions. Section 5 goes on to provide that in all other respects the residents of bordering states placed in ND facilities are subject to ND laws.

In a nutshell, Section 2 refers to the individual being subject to the laws in the state where he/she is receiving treatment and Section 5 refers to a committed individual being subject to the commitment laws of the committing state.

DeNae Kautzmann
Appeals Supervisor
Legal Services
Department of Human Services
600 E. Blvd. Ave. Dept. 325
Bismarck, ND 58505
701-328-2341

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10/15/03

Date

TESTIMONY
SB 2070 - DEPARTMENT OF HUMAN SERVICES
HOUSE JUDICIARY
REP. DUANE DeKREY, CHAIRMAN
March 17, 2003

Chairman DeKrey, I am Nancy McKenzie of the Department of Human Services. I am here today to provide you an overview in support of the bill relating to interstate contracts for the treatment of individuals with mental illness or chemical dependency.

- This bill would allow the department to contract with any appropriate treatment facility in a bordering state (includes Minnesota, Montana, or South Dakota) for the treatment of mental illness or chemical dependency for residents of North Dakota, and to contract with providers to provide treatment in North Dakota to residents of those bordering states.
- This bill also allows the placement in North Dakota of individuals who are on emergency holds or who have been involuntarily committed in a bordering state; and, would enable the temporary placement in a bordering state of patients who are on emergency holds in North Dakota.
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- A bill allowing for such agreements between MN and ND for treatment of persons with mental illness was passed by the MN state legislature in

2002; passage of North Dakota's bill will allow for such agreements to be implemented.

- Such contracts may not include treatment for persons serving a sentence, who are on probation and parole, are the subject of a presentence investigation.
- During the current biennium, 35 out-of-state residents have been admitted to the North Dakota State Hospital; of these, 20 were Minnesota residents, 5 South Dakota residents, and 2 were Montana residents. Half of the MN admissions were screened into the State Hospital by SEHSC staff. These patients are not able to have their care paid by MN Medical Assistance, and therefore must be directly billed for their care. Most often, they are unable to pay for the care received. Cost to North Dakota for provision of care of out of state residents at the State Hospital during the current biennium is \$411,289.

Mr. Chairman, this concludes my testimony. I would be happy to answer any questions you may have.

Salvatore Rickford
Operator's Signature

10/15/03
Date