

MICROFILM DIVIDER

OMB/RECORDS MANAGEMENT DIVISION

SFN 2053 (2/85) 5M



ROLL NUMBER

DESCRIPTION

2275

2005 SENATE FINANCE AND TAXATION

SB 2275

2005 SENATE STANDING COMMITTEE MINUTES

BILL/RESOLUTION NO. SB 2275

Senate Finance and Taxation Committee

☐ Conference Committee

Hearing Date January 27, 2005

Tape Number	Side A	Side B	Meter #
#1	X		9.1 - 31.1
Committee Clerk Signature <i>Sharon Rengrow</i>			

Minutes: All committee members present.

SEN. URLACHER: called the meeting to order and opened the hearing on SB 2275.

SEN. COOK: appeared as prime sponsor of the bill stating this is a bill that will remove an obstacle that gets in the way of District Health Units trying to consolidate.

LISA CLUTE, Executive Officer of First District Health Unit based in Minot, ND appeared in support with written testimony stating we believe this legislation removes a roadblock to consolidation of local health units. (See testimony with colored map) She also gave clarification of the map to the committee.

She stated there was a wide range of options that a local entity or county, the city govt. Can choose as to how administer their local public health units. It used to be that a local public health unit could choose if they did, to more or less offer just nursing services, now they are forced into know how to respond to a possibility of anthrax threat. The environmental health issues are just continuing the amount and they need to expand their expertise.

SEN. TOLLEFSON: asked if the size of the health units were determined by population, the geographical size to recognize so many people of the state to be serving in their area or how does it break down?

LISA CLUTE: That is really up to the local entities. If Keith's district decided to join with the First District, there is no limit to the amount of geographic area you could serve, you could have 15 counties in a district if you chose to do that. So its really a local decision.

SEN. TOLLEFSON: The population of each of these geographic areas is somewhat balanced? NO, or the amount of services available would be determined by the population of the geography.

LISA CLUTE: Absolutely, there are some that serve more than other, based on the amount of people that you serve, the geographic area that you have, you can levy more and expand your expertise. In ours, we have 60 staff and to do public health well, personally I believe that you have to offer a wide range of expertise.

SEN. WARDNER: So this is so that Eastern districts can come together, is that really the problem?

LISA CLUTE: It allows that to occur. There are no plans that I'm aware of for that to occur, but at this point if somebody wanted to join in with Fargo or Cass County it would stopped immediately because they are limited to 5 mils, so most of their funding comes out of the city. This would allow them to at least have those discussions.

SEN. COOK: This is not a new issue of health districts consolidation, is that right? Yes. Is this now that all of the various district health units support this legislation, is that a new outcome? That's been one of the struggles before to even get to where everyone agreed to it.

LISA CLUTE: Yes, It is the first time that everyone agreed. It's not forcing anything, all it's doing is lifting the barriers, so it still gives the opportunity to make the decision at the local level and choose if they wish to consolidate. It' leaves that control at the local level

SEN. EVERY: What changed between now and then?

LISA CLUTE: It doesn't regionalize or force a local public health structure, it still allows the decision to be made at the local level.

SEN. URLACHER: The 5 mil cap would be there yet, but it would broaden the base?

LISA CLUTE: The 5 mil cap stays as is and basically what it does it says if you want to join together as a district health unit, the financial rules that you were functioning on before, stay the same. And that is what would have stopped it before.

SEN. WARDNER: Out in the West, there are 4 districts and are multi county, did they organize quite awhile ago, before mils got too high, so that wasn't a barrier?

LISA CLUTE: The reason we are called First District Health Unit is because we were the first one to form the district. Quite frankly, I'm not at 5 mils at First District Health Unit, Stutsman is pushing 5 mil levies.

KEITH JOHNSON: Administrator for Custer Health District and the lobbyist for the North Dakota Public Health Assoc. Appeared in support and to give information to the committee and to offer an amendment on page 1, line 17 to insert the word "entity" instead of district.

ARNOLD THOMAS: Pres. Of the North Dakota Health Care Assoc. Appeared in support stating our interests in public health and emergency services is very keen for a very simple reason. Hospital services change over time as medical advancements occur. Public health however has never its mission nor its purpose nor has emergency services. It's critical that we

remove any impediments that prevent public health from coming together and configuring in such a way to be able to take care and provide services to those populations that are in non-large metropolitan areas. This is a bill that is permissive and talking about 2 key elements that are necessary to make sure the people's health care needs are being addressed. The rich history of the districts in the west as well as you can that they are slowly but surely looking to consolidate and reconfigure as our population and its needs changes, particularly electronics. What your doing here is enabling other conversations to occur which we think would be positive.

NO OPPOSITION. Closed the hearing.

Sen. Cook made a motion to adopt the amendment brought forward, seconded by Sen. Wardner.

Voice vote of 6 - 0 - 0

Sen. Wardner made a motion for **DO PASS AS AMENDED**, seconded by Sen. Every.

SEN. COOK: commented that it was a lot more important than he thought when first asked to submit the issue and the bill.

SEN. URLACHER: also commented that we can appreciate that and also appreciate the entities that are involved that are coming together, makes this job a lot easier. I endorse the concept.

SEN. WARDNER: commented that Sen. Cook spends a lot of time on his property taxes, increase of property taxes, this bill will not increase property taxes other than what is appropriated or in statute at this time. Its a bill that gets the job done without causing any negative impact on local property taxes.

ROLL CALL VOTE: 6 - 0 - 0 , Sen. Cook will carry the bill.

January 27, 2005

PROPOSED AMENDMENTS TO SENATE BILL NO. 2275

Page 1, line 17, replace "district" with "entity"

Renumber accordingly

Date: 1-27-05
Roll Call Vote #: 1

2005 SENATE STANDING COMMITTEE ROLL CALL VOTES
BILL/RESOLUTION NO. *SB 2275*

Senate	Finance and Taxation	Committee
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☐ Check here for Conference Committee

Legislative Council Amendment Number

Action Taken Adopt Amendment

Motion Made By Cook Seconded By Wardner

[illegible]

Total	(Yes)	No
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Absent

Floor Assignment

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

insert "entity" & take out distinct
on page 1, Line 17.

Date: 1-27-05
Roll Call Vote #: 2

2005 SENATE STANDING COMMITTEE ROLL CALL VOTES
BILL/RESOLUTION NO. *SB 2275*

Senate Finance and Taxation Committee

☐ Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken DP as Amended

Motion Made By Wardner Seconded By Evans

[illegible]

Total (Yes) 6 No 0

Absent 0

Floor Assignment Cook

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

REPORT OF STANDING COMMITTEE

SB 2275: Finance and Taxation Committee (Sen. Urlacher, Chairman) recommends AMENDMENTS AS FOLLOWS and when so amended, recommends DO PASS (6 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). SB 2275 was placed on the Sixth order on the calendar.

Page 1, line 17, replace "district" with "entity"

Renumber accordingly

2005 HOUSE FINANCE AND TAXATION

SB 2275

2005 HOUSE STANDING COMMITTEE MINUTES

BILL/RESOLUTION NO. **SB 2275**

House Finance and Taxation Committee

☐ Conference Committee

Hearing Date **March 8, 2005**

Tape Number	Side A	Side B	Meter #
1	X		0.6
Committee Clerk Signature <i>Janice Stein</i>			

Minutes:

REP. WES BELTER, CHAIRMAN Called the committee hearing to order.

SEN. DWIGHT COOK, DIST. 34, MANDAN Introduced the bill. This bill deals with public health districts. It removes an obstacle that these health districts are presently faced with when they try to consolidate.

KEITH JOHNSON, NORTH DAKOTA PUBLIC HEALTH ASSOCIATION Testified in support of the bill. See attached written testimony.

He explained the map which was added to the testimony. The yellow counties, are already districts. The green and the red are single county health departments and single county districts.

The blue are the city districts. There are fifty three counties in North Dakota and twenty eight health districts. If you look at the map, everything from Highway 83 west, is in a district. That is four districts. The other twenty four districts are all from Highway 83 east. At this time, we don't have anyone wanting to be a district. We want to remove the roadblocks so when the time

comes, we want to make it possible for local governments to join together to provide the services.

REP. DROVDAL Is there no expiration date on this legislation?

KEITH JOHNSON That is correct. SB 2335 is where the mill levy cap on districts is placed, that has a long history which started at a half a mill, then went to 2 1/2 mills, in 1985, it was at five mills. The districts have always had that cap, where the departments have not.

REP. DROVDAL Can you give us an example where the two entities have the five mills?

KEITH JOHNSON The cities and counties do not have five mill caps. The green districts would have five mill caps. The red and blue and orange districts would not.

REP. DROVDAL Used the Towner and Cavalier counties as an example, each have five mills on, and they join as a health unit, the Cavalier five mills would not go over into Towner, and Towner would not be put on Cavalier, so it would not go to ten mills, it would just stay at five mills?

KEITH JOHNSON That is correct, where you would see an advantage, is if Trail District would want to join with the city of Grand Forks. Trail is presently capped at five mills, the city of Grand Forks runs at about eight to nine mills. If they wanted to form a district, it would be in Trail County's interest. That will never happen under the present situation, because the city of Grand Forks would not be limited to five mills.

REP. DROVDAL Under current law, they can't combine because Grand Forks would have to reduce their mill levy to five in order to combine?

KEITH JOHNSON That is correct.

ARNOLD THOMAS, PRESIDENT OF THE NORTH DAKOTA HEALTH

ASSOCIATION Testified in support of the bill. This bill has been a long time coming. From the hospital point of view, we have had a significant interest in public health. It is through the public health that we do a lot of public outreach. One of the problems we have had, has been an organizational barrier for local health units to talk about what they might be able to do through certain kinds of consolidation. This measure will eliminate that barrier for that planned discussion at the local level. In terms of our activity for bioterrorism, and in terms of putting it into place regional plans, we are working through and with local public health units and in certain respects, should federal dollars begin to leave us, this would provide an opportunity, not for new money, but for local discussions to occur relative to regional responsibility.

With no further testimony, the committee hearing was closed.

2005 HOUSE STANDING COMMITTEE MINUTES

BILL/RESOLUTION NO. **SB 2275**

House Finance and Taxation Committee

☐ Conference Committee

Hearing Date **March 9, 2005**

Tape Number	Side A	Side B	Meter #
1		X	33.7
Committee Clerk Signature			

Minutes:

COMMITTEE ACTION

REP. DROVDAL Made a motion for a **DO PASS**.

REP. OWENS Second the motion. **MOTION CARRIED.**

11 YES

2 NO

1 ABSENT

REP. CONRAD Was given the floor assignment.

Date:

Roll Call Vote #:

3-9-05

1

2005 HOUSE STANDING COMMITTEE ROLL CALL VOTES
BILL/RESOLUTION NO. SB 2275

House FINANCE & TAXATION

Committee

☐ Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken

Do Pass

Motion Made By

Rep Droidal

Seconded By

Rep Owens

Representatives	Yes	No	Representatives	Yes	No
BELTER, WES, CHAIRMAN	✓				
DROVDAL, DAVID, V-CHAIR	✓				
BRANDENBURG, MICHAEL	✓				
CONRAD, KARI	✓				
FROELICH, ROD	✓				
GRANDE, BETTE		✓			
HEADLAND, CRAIG	✓				
IVERSON, RONALD	✓				
KELSH, SCOT	✓				
NICHOLAS, EUGENE	✓				
OWENS, MARK	✓				
SCHMIDT, ARLO	✓				
WEILER, DAVE		✓			
WRANGHAM, DWIGHT	✓				

Total (Yes)

11

No

2

Absent

Floor Assignment

Rep Conrad

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

REPORT OF STANDING COMMITTEE (410)
March 9, 2005 1:41 p.m.

Module No: HR-43-4524
Carrier: Conrad
Insert LC: . Title: .

REPORT OF STANDING COMMITTEE

SB 2275, as engrossed: Finance and Taxation Committee (Rep. Belter, Chairman)
recommends **DO PASS** (11 YEAS, 2 NAYS, 1 ABSENT AND NOT VOTING).
Engrossed SB 2275 was placed on the Fourteenth order on the calendar.

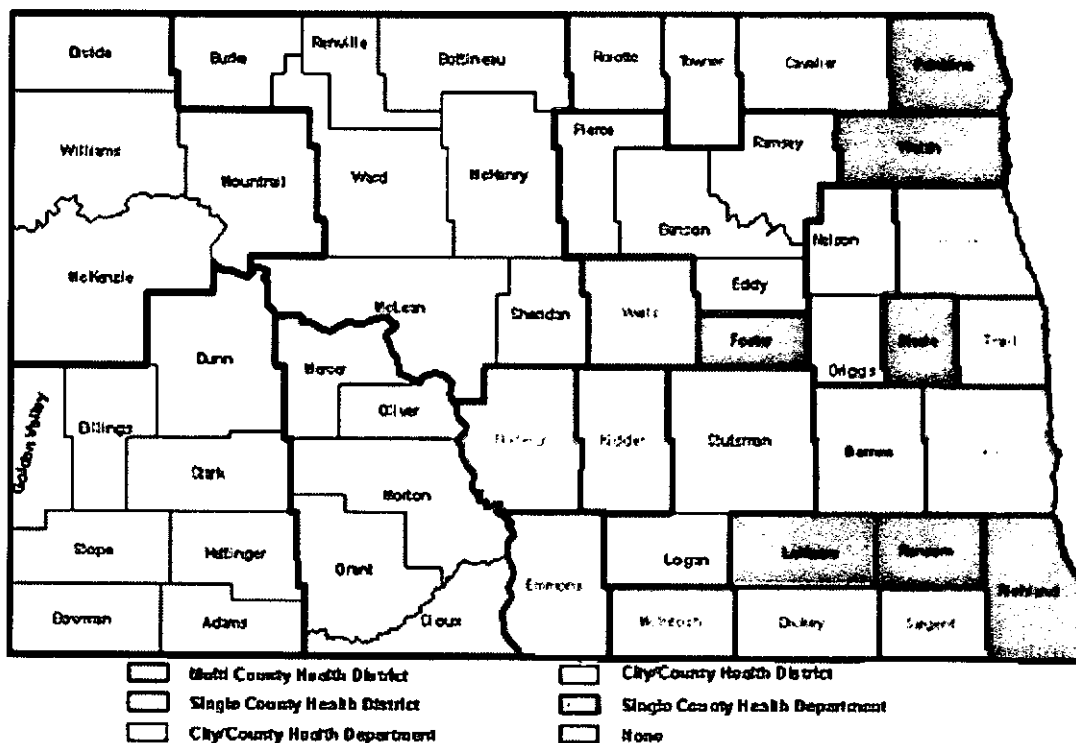
2005 TESTIMONY

SB 2275

Testimony in support of SB2275
Keith Johnson, ND Public Health Assn.
Lisa Clute, Director, First District Health
January 27, 2005

As you can see from the drawing, North Dakota has many small health units. These units face the challenge of providing a wide range of services, many times with one nurse and a receptionist. This pressure is causing them to look to banding together to provide services. At present, city and county departments are not limited by a levy cap. If they join together to form a district, however, they are then limited by a 5 mil cap. All of the city departments and many of the county departments already are above that cap. Therefore, the discussion to form a district never occurs because of the financial penalty that would be incurred. SB2275 makes it possible for that discussion to happen by allowing entities that had greater levy authority to retain that into the process of forming a district. No new taxing authority is granted; if a district that was capped at 5 mils joins a new district, that area in the old district is still capped.

We believe that this legislation removes a roadblock to consolidation of local health units. We ask that you would grant a Do Pass to this legislation.



Testimony in support of SB2275
Keith Johnson, ND Public Health Assn.
March 8, 2005

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