

MICROFILM DIVIDER

OMB/RECORDS MANAGEMENT DIVISION
SFN 2053 (2/85) 5M



ROLL NUMBER

DESCRIPTION

2066

2007 SENATE HUMAN SERVICES

SB 2066

2007 SENATE STANDING COMMITTEE MINUTES

Bill/Resolution No. SB 2066

Senate Human Services Committee

Check here for Conference Committee

Hearing Date: 1-08-07

Recorder Job Number: 730

Committee Clerk Signature

Mary K Monson

Minutes:

Senator J. Lee, Chairman opened the hearing on SB 2066 relating to removing the expiration dates on the moratorium on expansion of residential treatment center for children bed capacity and the moratorium on residential child care facility or group home bed capacity. All members were present.

Senator J. Lee reported that there was a fiscal note but no fiscal impact.

Paul Ronningen (Director, Children and Family Services, Dept. of Human Services) See attached testimony #1 in support of SB 2066. There are fewer kids lingering in the custody of the Dept. It looks like the performance base contract with the AASK program is moving kids quicker to adoption.

Senator J. Lee asked Mr. Ronningen to explain what AASK and PATH placements are.

Mr. Ronningen explained that AASK is Adults Adopting Special Kids and they are the contractor to provide the adoption services for special needs kids in the state of ND. That's Catholic charities. PATH is a therapeutic foster care provider in the state of ND. There are 85% of special needs children adopted by their foster parents. What happens is that there is a much higher need for recruiting foster parents, since, when these adoptions occur, those

previously foster parents are now adoptive parents and don't step back into the foster parent role.

Senator Heckaman asked which facilities listed were drug treatment facilities in ND.

Mr. Ronningen said most of them have providers in the residence that provide alcohol and drug. He asked one of his staff members to address the question.

Susan Lorenz (Director at Pride Manchester Health) She said they serve children ages 5-13 in ND. They do accept children with drug and alcohol treatment at that young age, but the primary diagnosis needs to be an emotional disturbance.

Senator Heckaman asked if there was an immediate need for drug treatment for, say, a 15 yr. old, where would they go.

Ms. Lorenz replied that her population would be the pre-teen population from the standpoint of acute care sorts of things and maybe stabilization issues. She suggested that other providers could address that beyond the acute stabilization period.

Senator Heckaman stated that she was working with a student with immediate drug needs and not able to find a placement for them because of who accepts what type of payment.

Ms. Lorenz replied that in addition to the funding issue a complicating issue they face with very young population in ND is there are very few treatment programs that specialize with who are age 5-13 who might be huffing and into other drug and alcohol use.

Jim Vetter (Representing Dakota Boys and Girls Ranch Centers) said they have 12 beds that are designated for addiction services on the Minot campus. The other campuses don't have anything specifically for drug and alcohol, but they do access community services for drug and alcohol while placed in other treatment centers.

Senator J. Lee asked if it was reasonable to say that in most of those other facilities that they will be contracting with some outside source, or whatever counseling services are going to be needed.

Mr. Vetter responded that, depending on the level of care PRTF's, the child would be stabilized and then moved into a lower level of care and then they would contract with community services to provide drug and alcohol treatment and then still manage them in the group home care.

Carlotta McCleary (Executive Director, ND Federation of Families for Children's Mental Health) See attached testimony #2 in support of SB 2066.

Senator Dever asked how broadly her organization represents the young people that are involved in these programs.

Ms. McCleary said the NDFFCMH is a statewide parent run organization. They represent children with emotional, behavioral, or mental disorders.

Senator J. Lee asked Mr. Ronningen for clarification between the two moratoriums.

Mr. Ronningen explained that what was formerly Residential Treatment Center is now the PRTF's. That level of care provides a psychiatrist along with nursing staff to deal with multiple level of needs of those children and families. The RCCF doesn't require psychiatric consults. They do have nursing and is typically a less expensive service.

Senator Mathern (District 11) See written testimony #3 in a neutral position and the Prairie St. John's pamphlet.

Senator Dever asked what would need to be put in the bill to enable organizations to explore opportunities.

Senator Mathern responded that the following sentence could be added to Section 1. "The restrictions contained in this section do not apply to nor prohibit the department from licensing

additional bed capacity for a residential treatment center for children if the additional beds are designated for the care of children and adolescents who are residents of other states.”

He said that would just provide a provider like Prairie St. John's the option of coming up with a plan, financing mechanism, a formal request to the Dept. of Human Services for additional beds to be licensed in the state.

Senator J. Lee asked if it was correct that the payment for the majority of children who are served comes from Medicaid.

Mr. Ronningen said yes.

Senator J. Lee asked about private pay insurance.

Dan Ulmer (BCBSND) The mental health mandate was changed two sessions ago to expand the allowance for residential treatment. One of the issues was what they had to be a licensed bed.

There was no opposing testimony. The hearing on SB 2066 was closed.

2007 SENATE STANDING COMMITTEE MINUTES

Bill/Resolution No. SB 2066

Senate Human Services Committee

Check here for Conference Committee

Hearing Date: 1-10-07

Recorder Job Number: 866, 884

Committee Clerk Signature

Mary K Monson

Minutes:

Job #866

Senator J. Lee, Chairman opened SB 2066 for discussion.

The committee discussed the usage of the term adolescence in the proposed amendment from Sen. Mathern. They wondered if it should be consistent with language in other bills. The definition of adolescent was also discussed with regards to age. Age 18 is the age they can opt out and age 21 would be the age the person could move to a different provider service.

Senator Dever asked if Sen. Mathern intended his amendment to apply to treatment centers and not to child care facilities.

There was discussion indicating that Section 1 was the appropriate place for the amendment.

Senator Dever asked, if a facility now has residents from out of state, can they seek to relicense those beds under this provision with a larger expansion than what he intended.

Another question posed by Senator Dever was if there are 12 beds and private pay is willing to pay more than what Medicaid pays, are those beds going to be unavailable to ND residents.

Senator J. Lee recessed committee work.

Job #884

Senator J. Lee resumed committee work on SB 2066 and asked Paul Ronningen from the Dept. of Human Services to answer some questions posed earlier and to clarify some points. She asked him if he had seen the proposed amendment from Sen. Mathern.

Mr. Ronningen said it would not affect the Dept. other than the licensing responsibilities they would incur by licensing one or more facilities that are based on occupancies coming from other states.

Senator J. Lee asked if they should include the phrase "and adolescents" in this amendment or will the definition of children cover both groups.

Mr. Ronningen said the previous bill was a housekeeping bill and thought they took the word adolescent out and referred to children. He didn't feel it would matter if it was left in.

Senator Warner asked if an existing home has 12 licensed beds (8 resident beds and 4 out of state beds) could they declare those 4 beds permanent out of state beds and add another 4 to their system without circumventing the procedures for doing that.

Mr Ronningen said that right now the facilities would have the opportunity to take out of state kids if they so choose. For the most part, all of their facilities are not taking out of state kids at this point. That opportunity to keep their occupancy rate high is there should ND kids not be available. He didn't see it as a real issue. The way this is written, additional beds could be licensed for kids coming from out of state. There is a provision in some of the Medicaid rules that a facility can't go over 16 beds or they lose Medicaid for this population.

Senator J. Lee asked if he thought there was a risk of focusing on serving out of state kids and cut back on the number of beds available for ND kids.

Mr. Ronningen replied that has been the opportunity up until now and it has not been an issue.

Senator Heckaman asked what the reason was for the amendment.

Mr. Ronningen answered that this amendment would allow Prairie to add their 40 bed facility, if they deemed the business analysis would support it.

If the amendment passes as written, Prairie would not be able to take in state kids.

Senator Warner asked if there is a distinction between the licensure (quality standard) and the certification (reimbursement standard). Can you be licensed without being authorized to receive it – compensation from Medicaid?

Mr. Ronningen explained that licensure is a base level recognition of the facility and accreditation is usually authorized by a national accreditation board. The Dept. of Human Services does the licensing. Then they would go to the national group for accreditation. It is two distinct processes.

Senator Warner Then is there a third process which authorizes them to provide treatment for payment by Medicaid?

Mr. Ronningen If they are licensed and if they are accredited, they are eligible to receive payment from Medicaid.

Senator Warner asked about the language, "licensing additional bed capacity" and if adding "new" would be beneficial language.

Mr. Ronningen said that it clarifies the intent of Sen. Mathern and also runs parallel with the current moratorium.

Senator J. Lee asked Mr. Ronningen for his opinion. Would he like to see the opportunity for out of state children to be served here or does he see the challenge with in state children in Fargo not able to be treated there.

Mr. Ronningen said the Sen. Mathern approach is from an economic development point of view, from a social work perspective, and keeping kids and families together.

Senator J. Lee referred to those children who are out state. The recollection is that they are out of state because they are dealing with issues that cannot be adequately addressed in ND or are out of state to be close to their family.

Mr. Ronningen said there are 51 kids out of state: approximately 18 are out of state because of sexually offending behavior, 13 because no bed was available at the point in time that they needed treatment or they were denied placement by current providers, 8 were extremely aggressive or assaultive, 7 had substance abuse or mental health issues, 2 were referred because the facility was in close proximity to family, 1 had a low IQ, 1 was referred for specific assessment and evaluation.

Senator Dever asked who refers these children.

Mr. Ronningen said the children who are going out of state are going through the Interstate Compact. They are all foster care kids and go through his division. They are from the county social service system, the division of juvenile services, or Carol's custody.

Senator Heckaman suggested that maybe there shouldn't be a moratorium.

Mr. Ronningen gave a little history on when Southwest Key came into the state and took over what used to be the Heartview Foundation building. They set up 40 beds which was a huge impact on the other providers. The Dept., as custodians, are dependent on having a stable provider group. There will still be kids that will continue to be going out of state because of their high needs.

Senator Warner moved to accept the Mathern amendment with the substitution of the word "new" for the word additional. Seconded by **Senator Heckaman**. Roll call vote 3-3-0. **Failed** for lack of a majority.

Senator J. Lee asked if there was a motion on the bill without an amendment.

Senator Dever moved a Do Pass on SB 2066. Seconded by **Senator Warner**.

Roll call vote. 6-0-0. **Passed**. Floor carrier is **Senator Dever**.

2007 SENATE STANDING COMMITTEE MINUTES

Bill/Resolution No. SB 2066

Senate Human Services Committee

Check here for Conference Committee

Hearing Date: 1-16-07

Recorder Job Number: 1234

Committee Clerk Signature *Mary K Monson*

Minutes:

Senator J. Lee, Chairman, reopened SB 2066.

Senator Warner moved to reconsider SB 2066. Second by Senator Heckaman. Carried on a voice vote.

Senator Mathern reported that his amendment was redrafted to clarify putting the word "new" in. The Dept. sees that as a clarification that any licensing they would do would be for a new facility. But it would still apply only to the care of children that are outside the state.

Senator Warner asked about only referring to children.

Senator Mathern said that was no problem. In the field, there is a change to even eliminate the word "adolescent". Children has become the term to cover birth to 18 or 21.

Senator J. Lee asked what to tell the people who live close to the facility and have a child who needs this kind of treatment and they can't go there because they live in state. If they move to MN they could.

Senator Mathern said that is basically the situation we are in with many different services.

That is an issue and a disparity between what different states pay for. But the response, he would say is, even though there is that disparity, we really shouldn't curtail those entities from developing more services. It's a benefit to the region. He also talked about when Medicaid

was established it said that no institutions that care for only persons with mental illness can receive Medicaid reimbursement. Prairie St. John's does not receive any reimbursements for adults there who are on Medicaid, because of the federal law. That's related to the fear that every state will dump their state hospital patients on the Medicaid. If the Medicaid exclusion applies to residential care, Prairie St. John's, if it opened a residential treatment center would have to be open to providing Medicare patients even children at no reimbursement from anyplace.

He sees this amendment as giving an opportunity for a ND organization to see if it can figure out how to put together a business plan to address the needs of some people that need this service.

Senator J. Lee said this overlaps with the homeless issue.

Senator Mathern said it also relates to another issue, sending kids out of state who have some sort of diagnosis related to a sexual problem.

Senator Dever asked what the philosophy is behind the moratorium.

Senator J. Lee said money.

Senator Mathern said there are only 3 reasons. (1) The driving factor is the cost.

(2) Keeping the other five providers presently in place up and running. (3) Out of state organizations opening a facility and then not staying in business.

Discussion on the meaning of the amendment. It means beds for the new center. Prairie doesn't now have a residential treatment center for children like this. It would be identifying a residential treatment facility at Prairie. It might mean bricks and mortar in the future but not necessarily.

Senator Heckaman asked if they have projected a number for how many new beds they might need.

Senator Mathern replied that Prairie believes they need to have 40 beds to make it work, to hire the right personnel and to make it financially viable. They really haven't come up with a business plan yet. This is the first step in investing in doing a business plan.

Senator Pomeroy moved to accept the Mathern amendment dated 1-15-07.

Seconded by Senator Heckaman. Roll call vote 6-0-0. Passed.

Senator Erbele moved a **Do Pass as Amended**. Seconded by Senator Dever.

Roll call vote 6-0-0. **Passed**. Floor carrier is Senator Dever.

FISCAL NOTE

Requested by Legislative Council

01/22/2007

Amendment to: SB 2066

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.*

	2005-2007 Biennium		2007-2009 Biennium		2009-2011 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.*

2005-2007 Biennium			2007-2009 Biennium			2009-2011 Biennium		
Counties	Cities	School Districts	Counties	Cities	School Districts	Counties	Cities	School Districts

2A. Bill and fiscal impact summary: *Provide a brief summary of the measure, including description of the provisions having fiscal impact (limited to 300 characters).*

This bill removes the expiration dates on the moratorium on expansion of residential treatment center for children bed capacity and the moratorium on residential childcare facility or group home bed capacity. This amendment makes an exception to the moratorium for new residential treatment centers.

B. Fiscal impact sections: *Identify and provide a brief description of the sections of the measure which have fiscal impact. Include any assumptions and comments relevant to the analysis.*

No fiscal impact as the state would only license the new facility to serve out of state children. The provider would bill the state that is financially responsible for that child.

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, for each agency and fund affected. Explain the relationship between the amounts shown for expenditures and appropriations. Indicate whether the appropriation is also included in the executive budget or relates to a continuing appropriation.*

Name:	Brenda M. Weisz	Agency:	DHS
Phone Number:	328-2397	Date Prepared:	01/22/2007

FISCAL NOTE

Requested by Legislative Council

12/27/2006

Bill/Resolution No.: SB 2066

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.*

	2005-2007 Biennium		2007-2009 Biennium		2009-2011 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.*

2005-2007 Biennium			2007-2009 Biennium			2009-2011 Biennium		
Counties	Cities	School Districts	Counties	Cities	School Districts	Counties	Cities	School Districts

2A. **Bill and fiscal impact summary:** *Provide a brief summary of the measure, including description of the provisions having fiscal impact (limited to 300 characters).*

This bill removes the expiration dates on the moratorium on expansion of residential treatment center for children bed capacity and the moratorium on residential child care facility or group home bed capacity. There is no fiscal impact.

B. **Fiscal impact sections:** *Identify and provide a brief description of the sections of the measure which have fiscal impact. Include any assumptions and comments relevant to the analysis.*

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, for each agency and fund affected. Explain the relationship between the amounts shown for expenditures and appropriations. Indicate whether the appropriation is also included in the executive budget or relates to a continuing appropriation.*

Name:	Brenda M. Weisz	Agency:	DHS
Phone Number:	328-2397	Date Prepared:	01/03/2007

PROPOSED AMENDMENT TO SENATE BILL NO. 2066

Page 1, line 13, after the period insert "The restrictions contained in this section do not apply to nor prohibit the department from licensing additional bed capacity for a new residential treatment center for children if the additional beds are designated for the care of children and adolescents who are residents of other states."

Prepared by Chris Rausch, 01-15-07

Updated from prior amendment (addition of word "new" at end of line 2)

Date: 1-10-07
Roll Call Vote #: 1

2007 SENATE STANDING COMMITTEE ROLL CALL VOTES
BILL/RESOLUTION NO. 2066

Senate HUMAN SERVICES Committee

Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken Amendment (Sen. Mathern)

Motion Made By Sen. Warner Seconded By Sen. Heckaman

Senators	Yes	No	Senators	Yes	No
Senator Judy Lee, Chairman		✓	Senator Joan Heckaman	✓	
Senator Robert Erbele, V. Chair	✓		Senator Jim Pomeroy		✓
Senator Dick Dever		✓	Senator John M. Warner	✓	

Total (Yes) 3 No 3

Absent 0

Floor Assignment _____

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

Date: 1-10-07
 Roll Call Vote #: 2

2007 SENATE STANDING COMMITTEE ROLL CALL VOTES
 BILL/RESOLUTION NO. 2066

Senate HUMAN SERVICES Committee

Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken Re Pass

Motion Made By Sen. Dever Seconded By Sen. Warner

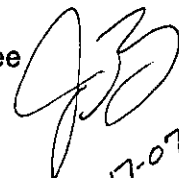
Senators	Yes	No	Senators	Yes	No
Senator Judy Lee, Chairman	✓		Senator Joan Heckaman	✓	
Senator Robert Erbele, V. Chair	✓		Senator Jim Pomeroy	✓	
Senator Dick Dever	✓		Senator John M. Warner	✓	

Total (Yes) 6 No 0

Absent 0

Floor Assignment Senator Dever

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


1-17-07

PROPOSED AMENDMENTS TO SENATE BILL NO. 2066

Page 1, line 2, remove "removing the expiration dates on"

Page 1, line 13, after the period insert "This section does not apply to nor prohibit the department from licensing additional bed capacity for a new residential treatment center for children if the additional beds are designated for the care of children and adolescents who are residents of other states."

Renumber accordingly

Date: 1-16-07

Roll Call Vote #: 1

2007 SENATE STANDING COMMITTEE ROLL CALL VOTES

BILL/RESOLUTION NO. SB 2066

Senate HUMAN SERVICES Committee

Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken accept Mather's Amendment 1-15-07

Motion Made By Sen. Pomeroy Seconded By Sen. Heckaman

Senators	Yes	No	Senators	Yes	No
Senator Judy Lee, Chairman	✓		Senator Joan Heckaman	✓	
Senator Robert Erbele, V. Chair	✓		Senator Jim Pomeroy	✓	
Senator Dick Dever	✓		Senator John M. Warner	✓	

Total (Yes) 6 No 0

Absent 0

Floor Assignment _____

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

Date: 1-16-07

Roll Call Vote #: 2

2007 SENATE STANDING COMMITTEE ROLL CALL VOTES

BILL/RESOLUTION NO. 2066

Senate HUMAN SERVICES Committee

Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken Do Pass as Amended

Motion Made By Sen. Erbele Seconded By Sen. Dever

Senators	Yes	No	Senators	Yes	No
Senator Judy Lee, Chairman	✓		Senator Joan Heckaman	✓	
Senator Robert Erbele, V. Chair	✓		Senator Jim Pomeroy	✓	
Senator Dick Dever	✓		Senator John M. Warner	✓	

Total (Yes) 6 No 0

Absent 0

Floor Assignment Senator Dever

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

REPORT OF STANDING COMMITTEE

SB 2066: Human Services Committee (Sen. J. Lee, Chairman) recommends AMENDMENTS AS FOLLOWS and when so amended, recommends **DO PASS** (6 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). SB 2066 was placed on the Sixth order on the calendar.

Page 1, line 2, remove "removing the expiration dates on"

Page 1, line 13, after the period insert "This section does not apply to nor prohibit the department from licensing additional bed capacity for a new residential treatment center for children if the additional beds are designated for the care of children and adolescents who are residents of other states."

Renumber accordingly

2007 HOUSE HUMAN SERVICES

SB 2066

2007 HOUSE STANDING COMMITTEE MINUTES

Bill/Resolution No. SB 2066

House Human Services Committee

Check here for Conference Committee

Hearing Date: February 21, 2007

Recorder Job Number: 3574 & 3576

Committee Clerk Signature

Judith Babcock

Minutes:

Chairman Price: We will open the hearing on SB 2066.

Paul Ronningen, Director, Children and Family Services with the Department of Human Services: See attached testimony with other attachments, and proposed amendment.

Representative Porter: We always have the discussion on the numbers outside of the state. Did you provide that data in here?

Mr. Ronningen: Currently in December we have 51 youth out of state. 18 of those are for sexual offending behavior, 13 were placed out of state because there were no beds available, or denied placement in the state of ND. 8 are placed out of state because of assault and aggressive, 7 because of substance abuse and mental issues, 2 of the facilities was in closer proximity for the family in ND than a bed that might have been available in western ND1 because of low IQ, and 1 for assessment and evaluation.

Representative Porter: On the 13 that were denied placement, could we close that loop wall so that the facilities basically could not cherry pick?

Mr. Ronningen: The facilities are asked to evaluate the youth as far as there ability to provide for the youth. Those children because of no bed availability may in fact have been referred

during a period of time all the facilities were full. Once placed out of state the treatment time is 6 months to a year.

Representative Conrad: The pre adoptive homes, are those the homes that are planning to adopt them in placement or are there foster care waiting for adoption?

Mr. Ronningen: The pre adoptive homes are typically homes that are in the process of adopting these children. About 85 % of our children are currently being adopted by foster parents. We are doing a much more extensive search for extended families that you see in our foster care placements are changing dramatically over time. Things are easier with the technology today.

Carlotta McCleary, Executive Director for the ND Federation of Families for Children's

Mental Health: See attached testimony.

Representative Conrad: Is bed competition with services?

Ms. McCleary: I do think we don't have enough of the community base services to do prevent placement. We had an increase in our community base services.

Chairman Price: Do you support looking at the new psychiatric residential treatment for sexual offenders?

Ms McCleary: Yes, we would support adding more services to our state which would allow more children to remain in the state of ND.

Representative Porter: I have a question for Mr. Ronningen, The occupancy rate across the state, where are we? I would also like to see is even based on cutting the state in half and part of the problem is also close to families that we are seeing 100% occupancy in Grand Forks that is causing placements into Minnesota where we are paying higher rate. I would be interested in the regional look.

Mr. Ronningen: I believe we are in the low 90's.

Representative Potter: I would like to ask Ms McCleary if she could expand a little further on you said additional funding to support partnership program, voluntary out of home treatment program. What do those programs do?

Ms McCleary: Voluntary treatment programs allow parents to help their child place in an out of the home placement without having to relinquish custody of their child. This is critical for families. That program is available to families whose children get Medicaid also. The partnership program is a program that is wrapping around the services for children bring together all the different groups of agencies that are involved in that child.

Chairman Price: Anyone else to testify for SB 2066? Any opposition, hearing none we will close SB 2066.

Chairman Price: Committee let's take out SB 2066 for action. We have the proposed amendments from Mr. Ronningen on page 3 of his testimony.

Representative Kaldor moves the amendments, seconded by **Representative Conrad**.

There was a unanimous verbal vote. **Representative Hofstad** moves a do pass as amended, seconded by **Representative Kaldor**. Chairman Price asks for questions and discussion.

Hearing none the vote was taken with 12 yeas, 0 nays and 0 absent. **Representative Conrad** will carry the bill to the floor.

