

ARIZONA HOUSE OF REPRESENTATIVES  
Forty-ninth Legislature –Second Regular Session

**COMMITTEE ON HEALTH AND HUMAN SERVICES**

Minutes of Meeting  
Wednesday, January 13, 2010  
House Hearing Room 4 -- 9:00 a.m.

Chairman Barto called the meeting to order at 9:05 a.m. and roll call was taken by the secretary.

**Members Present**

Mr. Ableser  
Mr. Antenori  
Mr. Boone

Mr. Bradley  
Mrs. Goodale  
Mr. Lopes

Mr. Murphy  
Mr. Court, Vice-Chairman  
Mrs. Barto, Chairman

**Members Absent**

None

**Committee Action**

HB2026 – DP (7-0-0-2)  
HB2027 – DP (7-0-0-2)  
HB2028 – DP (8-0-0-1)

HB2029 – DP (9-0-0-0)  
HB2030 – DP (9-0-0-0)

**STAFF INTRODUCTIONS**

Chairman Barto introduced the Staff: Tina Fairbanks, Administrative Assistant; Steve Moortel, Policy Advisor to the Majority; Linda Taylor, Committee Secretary; Ingrid Garvey, Majority Research Analyst; Holly Baumann, Democratic Research Analyst/Policy Advisor; Gina Kash, Assistant Majority Research Analyst; Rebecca Lund, Democratic Staff Intern and Michael Minerva and Daryl Laux, Pages.

**CONSIDERATION OF BILLS**

**HB2026 – advisory council on aging; continuation – DO PASS**

**Vice-Chairman Court moved that HB2026 do pass.**

Ingrid Garvey, Majority Research Analyst, explained that HB2026 continues the Advisory Council on Aging (Council) until July 1, 2020 (Attachment 1).

Cathy De Lisa, Acting Executive Director, Governor's Council on Aging, in response to questions, acknowledged that the federal government provides two-thirds of the Council's funds and the rest is derived from the Department of Economic Security as part of the General Fund. The federal funds are contingent upon a 25 percent match in state funds. If the state funding is not reappropriated, the Council will continue doing what it did last year, which was to reduce Council meetings and expenses and staff participated in furloughs. It would make the Council's mission challenging, but the Council is resilient and will find ways to make things happen, such as teleconferencing or engaging in partnerships with community agencies.

Vice-Chairman Court announced the names of those who signed up in support of HB2026 but did not speak:

Joyce Finkelstein, representing self

Dollie Chauvin, representing self

Bill Engler, Board Member, Arizona Alliance for Retired Americans, representing self

Bryan Ginter, representing self

Mitch Menlove, Arizona Health Care Association

**Question was called on the motion that HB2026 do pass. The motion carried by a roll call vote of 7-0-0-2 (Attachment 2).**

### **HB2027 – board of psychologist examiners; continuation – DO PASS**

**Vice-Chairman Court moved that HB2027 do pass.**

Ingrid Garvey, Majority Research Analyst, explained that HB2027 continues the State Board of Psychologist Examiners (Board) until July 1, 2020 (Attachment 3).

Dr. Cindy Olvey, Executive Director, Arizona Board of Psychologist Examiners, explained that the Board regulates psychologists, and beginning January 2011, will license and regulate behavioral analysts. The Board accomplishes its mission to protect the public by issuing licenses to individuals qualified to practice psychology, conducting investigations and hearing complaints in response to allegations of unprofessional conduct, taking disciplinary action against individuals who violate laws governing psychologists and providing consumer information to the public. The Board currently licenses 1,836 psychologists; 1,503 are on active status and 333 are on inactive status. The Board receives about 50 complaints every year and 90 applications for licensure. The Board is composed of nine members; three are public members and six are psychologists. The Board is authorized four full-time positions, but currently has two full-time staff and one part-time staff.

Vice-Chairman Court announced the names of those who signed up in support of HB2027 but did not speak:

David Landrith, Vice President of Policy & Political Affairs, Arizona Medical Association

Bryan Ginter, representing self

Susie Stevens, Lobbyist, Arizona Psychological Association

**Question was called on the motion that HB2027 do pass. The motion carried by a roll call vote of 7-0-0-2 (Attachment 4).**

**HB2028 – hard of hearing; commission; continuation – DO PASS**

**Vice-Chairman Court moved that HB2028 do pass.**

Gina Kash, Majority Assistant Research Analyst, explained that HB2028 continues the Commission for the Deaf and Hard of Hearing (Commission) until July 1, 2020 (Attachment 5).

Sherri Collins, Executive Director, Arizona Commission for the Deaf and Hard of Hearing, related that the Commission is the only state agency that provides services across the board for the deaf and hard of hearing. It is nationally recognized for its accomplishments in the last 10 years, such as licensing of interpreters. In response to a question, she advised that the Commission is funded entirely through an excise tax on landlines.

Mr. Bradley noted that his daughter-in-law is an interpreter in the Tucson school system and seems very busy. He wondered if the demand for interpreters is being met. Ms. Collins replied that education interpreters in K-12 are not required to be licensed. Licensed interpreters are basically community-based such as in courts, doctors' offices, etc. Licensing of interpreters went into effect in 2007 and there are currently 375 licensed interpreters. It is always a challenge to meet the demand, especially in rural communities. She added that the Commission has a non-lapsing fund of \$750,000, which is reserved for interpreter training programs.

Ms. Collins acknowledged that revenue from the tax on landlines is diminishing, so she has been asking legislators to consider reducing that tax and adding it to wireless in the future.

Vice-Chairman Court announced the names of those who signed up in support of HB2028 but did not speak:

Donna Kruck, Director of Advocacy Programs, Arizona Bridge to Independent Living  
Edward Myers, Attorney, Arizona Center for Disability Law  
Tony Dirienzi, Statewide Independent Living Council  
Bryan Ginter, representing self  
David Carey, Arizona Bridge to Independent Living  
Peri Jude Radecic, Director of Public Advocacy, representing self  
Siobhan McCurdy, National Multiple Sclerosis Society Arizona Chapter

**Question was called on the motion that HB2028 do pass. The motion carried by a roll call vote of 8-0-0-1 (Attachment 6).**

**HB2029 – department of health services; continuation – DO PASS**

**Vice-Chairman Court moved that HB2029 do pass.**

Ingrid Garvey, Majority Research Analyst, explained that HB2029 continues the Department of Health Services (DHS) for 10 years (Attachment 7).

Will Humble, Interim Director, Department of Health Services (DHS), advised that DHS' total budget is about \$2 billion; three-fourths federal funds and about \$500 million from the state

General Fund. The vast majority of the \$500 million goes toward the Medicaid match for mental health services for people with behavioral health problems, most of which are enrolled in the Arizona Health Care Cost Containment System (AHCCCS). About \$70 million is used to run the Arizona State Hospital. Some mental health services are provided for people that do not qualify for AHCCCS, which is the non-Title XIX portion of the budget, and the remainder is a small amount of operating funds. Staff salaries, etc., comprise one to two percent of the budget.

In response to questions, Mr. Humble related that a year ago, DHS received \$10 million from the General Fund to run the licensing program. Last week that was shifted to a completely fee-based structure so the budget was reduced this fiscal year by \$5 million. Facilities are being asked to contribute to DHS' inspection programs, so another \$5 million can be given up in 2011. About 80 percent of General Fund monies for public health programs was reduced in the last fiscal year, which went toward underinsured children for childhood immunizations, community health centers, valley fever prevention awareness, etc. As to childhood immunizations, there is a provision within the federal Vaccines for Children (VFC) program that allows community health centers to form delegation agreements with county health departments, which has been done in every county, so federal funds are now used to immunize those underinsured children.

Chairman Barto applauded DHS' ability to make the H1N1 vaccine available and asked if prisoners who are most at risk in the Arizona Department of Corrections (ADC) system are receiving the vaccine. Mr. Humble stated that the first priority is to vaccinate ADC staff, which is probably underway or completed. He is not sure of the status of vaccinating the prisoners, except in Pima County where all inmates and staff were vaccinated, but the supply of vaccine is adequate to begin doing so. ADC is motivated due to the fear that the correctional system would not be able to handle all of the prisoners becoming ill at the same time.

Mr. Humble advised that a good job was done statewide in vaccinating children in cooperation with almost all of the school districts throughout the state. The extent of coverage varies county by county, but about 60 percent of children in schools in Maricopa County received the vaccination. That does not mean 40 percent did not want the vaccine, but some children forgot or lost the permission slip or were absent when the vaccine was given. The ideal immunity level is 80 percent among children in order to stop the spread of the virus, which can also be done by relaying the message to parents to keep sick children at home. That is also true in the workplace.

In response to further questions, Mr. Humble advised that agreements with counties for childhood immunizations are a solution that will continue if the federal government keeps the VFC program intact, but he is not aware of any planned changes. The federal government deserves credit for the H1N1 response because many resources were provided to states for pandemic readiness four years ago when the bird flu was a concern, so the federal government and states had operational plans in place to deal with the H1N1. The Centers for Disease Control listened to states and altered some of its early recommendations such as school closures, so there was very good communication with the federal government.

Dr. Laura Nelson, Acting Deputy Director, Department of Health Services (DHS), explained that during the last Special Session a \$14 million lump sum reduction was made to DHS, which will be absorbed in the Behavioral Health Division, \$10 million through equity adjustments that will be available by May 2010 relating to sanctions or unearned incentives by regional behavioral

health authorities (RBHA), and \$5 million through capitation rate adjustments. As far as the future, at the Cabinet meeting in December 2009, the Governor instructed agencies to identify and hold back on non-required special line items to anticipate needs for that funding to pay for mandatory services, so the Division has been working with RBHA providers to identify those.

Duane Huffman, Legislative Liaison, Department of Health Services (DHS), stated that the equity hold back and change to the capitation rates can be reflected in the non-Title XIX lines, so the \$14 million adjustment from the Fifth Special Session will not be reflected in the non-Title XIX lines.

Vice-Chairman Court announced the names of those who signed up in support of HB2029 but did not speak:

Barbara Fanning, Legislative Liaison, Arizona Hospital and Healthcare Association  
Pete Wertheim, Chief Legislative Liaison, IASIS Healthcare; Health Choice Arizona  
Susan Cannata, Attorney, Arizona Academy of Family Physicians  
David Landrith, Vice President of Policy & Political Affairs, Arizona Medical Association  
Bryan Ginter, representing self  
Jason Bezozo, Senior Program Director, Government Relations, Banner Health  
Amanda Weaver, Executive Director, Arizona Osteopathic Medical Association  
Bruce Liggett, Executive Director, Arizona Child Care Association  
Tim Vaske, Director of Government Affairs, American Heart Association  
Mitch Menlove, Arizona Alzheimer's Consortium  
Jeff Gray, Legislative Liaison, March of Dimes Arizona Chapter  
Tara Plese, Arizona Association of Community Health Centers  
John Kaites, Magellan; PMT Ambulance

**Question was called on the motion that HB2029 do pass. The motion carried by a roll call vote of 9-0-0-0 (Attachment 8).**

**HB2030 – homeopathic board; continuation – DO PASS**

**Vice-Chairman Court moved that HB2030 do pass.**

Gina Kash, Majority Assistant Research Analyst, explained that HB2030 continues the Board of Homeopathic and Integrated Medicine Examiners (Board) until July 1, 2020 (Attachment 9).

Dr. Todd Rowe, President, Arizona State Board of Homeopathic and Integrative Medicine, stated that the Board regulates physicians with M.D. or D.O. licenses who practice integrative medicine. In 2006, the Board underwent a performance audit, and as part of the process, sought legislation to amend statutes to enable its ability to make changes to address Auditor General recommendations. This was accomplished in the 48<sup>th</sup> Legislative Session and new statutes became effective October 1, 2008. The principal changes were to implement continuing educational requirements, align licensing requirements with the Arizona Medical Board in relation to practitioners with previous actions against their licenses and to require an informed consent process for all licensees. The Board accomplished those goals. Of the 20 findings in the audit, only two remain to be completed. The first pertains to an examination validation process, which should be done by June 2010. The second recommendation relating to continuing medical

education requirements was delayed because of a rules moratorium, but the Board was granted an exemption in October 2009, so it is now moving forward and should be in place by June 2010. He added that continuance of the Board is critical for protection of the public and to serve a growing need for alternative health care. He asked the Members to vote for a 10-year continuation of the Board.

Christine Springer, Executive Director, Arizona State Board of Homeopathic and Integrative Medicine, advised that the Board is funded as a 90-10 agency. Fees are paid by licensees; 10 percent is remitted to the General Fund and 90 percent is retained for operating expenses.

Chairman Barto remarked that she received many emails in support of continuation of the Board, and she appreciates all of the improvements that have been made over the last few years.

Vice-Chairman Court announced the names of those who signed up in support of HB2030 but did not speak:

Lisa E. Platt, Arizona Homeopathic & Integrative Medical Association (AHIMA)  
Bruce Shelton, President, AHIMA; representing self  
Melanie Chimes, MD, MD(H), CCH, representing self  
Martha M Grout, MD, MD(H), representing self  
Joseph Abate, Counsel, AHIMA  
Patrick Hesselmann, HMA, representing self  
David Landrith, Vice President of Policy & Political Affairs, Arizona Medical Association  
Bryan Ginter, representing self  
Amanda Weaver, Executive Director, Arizona Osteopathic Medical Association  
Beata George, representing self  
Linda Heming, Choice for Health  
Abram Ber, MD (H), representing self  
Ann Harris, representing self  
Russell Olinsky, Environmental Specialist, representing self

Chairman Barto remarked that the Auditor General's Office did not handle the Board per se, but did a good job on the audits of DHS and other agencies.

**Question was called on the motion that HB2030 do pass. The motion carried by a roll call vote of 9-0-0-0 (Attachment 10).**

Without objection, the meeting adjourned at 10:10 a.m.

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Linda Taylor, Committee Secretary  
January 15, 2010

(Original minutes, attachments and audio on file in the Chief Clerk's Office; video archives available at <http://www.azleg.gov>)