

These minutes contain materials which paraphrase and/or summarize statements made during this session. Only text enclosed in quotation marks

report a speaker's exact words. For complete contents of the proceedings, please refer to the tapes.

HOUSE COMMITTEE ON HUMAN RESOURCES

April 12, 1991Hearing Room D 1:00 p.m.Tapes 113 - 114

MEMBERS PRESENT:Rep. Mary Alice Ford, Chair Rep. Beverly Stein, Vice-Chair Rep. Cedric Hayden (arrive 1:05) Rep. John Meek (arrived 1:04) Rep. Hedy Rijken (arrived 1:28) Rep. Jackie Taylor

MEMBER EXCUSED: Rep. Jerry Barnes

VISITING MEMBERS: Sen. Bill McCoy Sen. Cliff Trow Sen. Shirley Gold

STAFF PRESENT: Melanie Zermer, Committee Administrator Pamela Berger, Committee Assistant

MEASURES CONSIDERED:HB 3088 - Requires registration of tanning facilities with Health Division - Pub HB 3142 - Requires Health Division before adopting rule affecting type A or B hospitals to submit proposed rule to Office of Rural Health for advice

and comment - PAW "Alcohol and Drug Treatment for Pregnant Users" Report - Inf.

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TAPE 113, SIDE A

010 CHAIR FORD: Calls the meeting to order at 1:02 p.m. PUBLIC HEARING: HB 3142 - Requires Health Division before adopting rule affecting type A or B hospitals to submit proposed rule to Office of Rural Health for advice and comment Witness: Rep. Baum, District 58

010 REPRESENTATIVE RAY BAUM, DISTRICT 58: Testifies in favor of HB 3142. - Explains support for proposed amendments to HB 3142 from the Oregon Association of Hospitals (EXHIBIT A).

CHAIR FORD: Discusses 1990 Special Session SB 1197.

PUBLIC HEARING: HB 3088 - Requires registration of tanning facilities with Health Division - Pub Witnesses: Art Keil, Oregon Health Division Dr. Tom Kruse, Oregon Medical Association/Oregon Dermatology Society Barbara Hasek, PTA Jon Stubenvoll, OSPIRG Art Keil, Oregon Health Division Ray Perris, Oregon Health Division Sara Wiley, Oregon Medical Association

Staff submits a fiscal analysis on HB 3088 (EXHIBIT C).

060 DR. TOM KRUSE, OREGON MEDICAL ASSOCIATION/OREGON DERMATOLOGY SOCIETY: Submits and reads written testimony in support of HB 3088 (EXHIBIT B). - 40% of cornea burns are caused from tanning booths. Using cotton balls to cover the eyes is not sufficient protection. There are two types of eye protectors - the ones which don't completely cover the eyes are not sufficient. Employees of tanning facilities are not adequately trained about complications which may occur due for medication or fair skin, etc.

160 REPRESENTATIVE HAYDEN: Do eyelids provide adequate protection of the cornea?

KRUSE: The rays penetrate deeply. It is a form of radiation. You cannot see the ultraviolet rays.

175 CHAIR FORD: Can this cause all kinds of skin cancer or just one specific kind?

KRUSE: Discusses types of cancer caused by tanning beds, mainly melanoma and basal cell cancers.

215 REPRESENTATIVE MEEK: This bill does not deal with cancer.

KRUSE: Not trying to ban tanning booths. Looking for awareness.

257 REPRESENTATIVE TAYLOR: Does your association provide public awareness education?

KRUSE: Yes, we provide state-wide testing and public service announcements.

- Discusses depletion of the ozone layer.

278 ART KEIL, OREGON HEALTH DIVISION: Submits and reads written testimony on HB 3088 (EXHIBIT D). - Suggests registering the tanning bed instead of the facility. - Major concern is to alert the public of misuse of tanning beds.

TAPE 114, SIDE A

RAY PERRIS, OREGON HEALTH DIVISION: Public information would be developed, which would be distributed through the Oregon Medical Association. - We would go into facilities, periodically, to make sure beds were in good working condition.

CHAIR FORD: This is not a year to be raising fees; concerned about costs for inspections and public service announcements.

PERRIS: Probably not necessary to have information in physicians offices; best place would be in tanning facility.

KEIL: We would develop a brochure similar to the one we have on radon.

CHAIR FORD: Where does the funding for the Oregon Health Division's brochures come from?

KEIL: The cost would be very small; a couple of hundred dollars.

REPRESENTATIVE HAYDEN: Discusses fiscal impact.

REPRESENTATIVE HAYDEN: A \$50 fee, per bed, would be costly for a facility with several beds.

KEIL: That could be worked out.

CHAIR FORD: That will need to be worked out before this bill could be sent to the Committee on Ways and Means.

KEIL: We will do that.

115 REPRESENTATIVE RIJKEN: Would private tanning beds be required to be licensed?

PERRIS: No, only public ones.

130 BARBARA HASEK, PTA: Submits and reads written testimony in favor of HB 308 8 (EXHIBIT E), specifically the use of tanning facilities by minors.

REPRESENTATIVE TAYLOR: Are you suggesting that parental permission be required?

HASEK: Yes.

REPRESENTATIVE TAYLOR: Currently, does a waiver need to be signed before a

person uses a tanning bed?

HASEK: Not to my knowledge.

244 JON STUBENVOLL, OSPERG: Submits and reads written testimony in favor of HB 308 8 (EXHIBIT F).

SARA WILEY, OREGON MEDICAL ASSOCIATION (OMA): OMA will be responsible for drafting amendments for HB 3088.

PUBLIC HEARING: HB 3142 - Requires Health Division before adopting rule affecting type A or B hospitals to submit proposed rule to Office of Rural Health for advice and comment Witnesses: Ed Patterson, Oregon Association of Hospitals Karen Whitaker, Office of Rural Health

300 ED PATTERSON, OREGON ASSOCIATION HOSPITALS (OAH): Testifies on HB 314 2. - Discusses 1990 Special Session SB 1197. - Describes proposed amendments from OAH (EXHIBIT A).

TAPE 113, SIDE B

034 KAREN WHITAKER, OFFICE OF RURAL HEALTH: Submits and reads written testimony on HB 3142 (EXHIBIT G). - Discusses report on rural health.

PATTERSON: Even though formula is developed, there is currently no statutory authority.

WHITAKER: The formula was developed with involvement from many hospital administrators.

150 PATTERSON: Discusses risk formula ties with workers compensation.

WHITAKER: The formula itself makes distinctions between type A and type B hospitals.

WORK SESSION: HB 3142 - Requires Health Division before adopting rule affecting type A or B hospitals to submit proposed rule to Office of Rural Health for advice and comment

250 MOTION: REPRESENTATIVE MEEK MOVES ADOPTION OF THE PROPOSED AMENDMENTS (EXHIBIT A).

VOTE: THERE BEING NO OBJECTIONS, THE AMENDMENT IS ADOPTED.

MOTION: REPRESENTATIVE MEEK MOVE HB 3142, AS AMENDED, TO THE FLOOR WITH A DO PASS RECOMMENDATION.

VOTE: THE MOTION PASSES UNANIMOUSLY. REPRESENTATIVE BARNES IS EXCUSED. REPRESENTATIVE RIJKEN CARRIES HB 3142 TO THE FLOOR.

CHAIR FORD: Recesses the meeting at 2:17 p.m. - Re-convenes the meeting at 3:25

INFORMATIONAL HEARING: "Alcohol and Drug Treatment for Pregnant Users" Report Witnesses: Kevin Concannon, Department of Human Resources Mike Skeeles, Office of Alcohol and Drug Dr. Grant Higgenson, Consultant, Oregon Health Division

Members of the Senate Committee on Human Resources join the House committee to hear the report from the Department of Human Resources on alcohol and drug treatment for pregnant users.

295 KEVIN CONCANNON, DEPARTMENT OF HUMAN RESOURCES: Introduces a report "Alcohol and Drug Treatment for Pregnant Users" (EXHIBIT H).

366 MICHAEL SKEELES, OREGON HEALTH DIVISION: Describes finding contained in the report.

TAPE 114, SIDE B

- Discusses summary of national and Oregon specific data (See: Page 8, Exhibit G).

020 DR. GRANT HIGGENSON, CONSULTANT, OREGON HEALTH DIVISION: Further describes findings contained in the report. - Discusses recommendation for a state-wide prevalence study (See: Pages 9-11, Exhibit G). - Discusses implementation of strategies, programs, and services (See: pages 12-19, Exhibit G).

100 SKEELES: Discusses appendixes A, B, and C.

HIGGENSON: Discusses social and economic statistics.

CHAIR FORD: Why not coordinate with existing programs?

190 CONCANNON: We could do more agency coordination but feel that a fuller picture could be obtained by involving private industry and others (See: Appendix B, Exhibit G).

CHAIR FORD: Are so many case managers needed?

SKEELES: This provides flexibility at the local level.

CHAIR FORD: Will AFS (JOBS) have the flexibility to receive needed funds?

CONCANNON: An agency lead person would remain involved to ensure that needed funds would be available.

CONCANNON: Suggests one pilot project in a small rural area and one in a larger metropolitan area.

SKEELES: Our committee discussed and supports the need for flexibility.

SKEELES: Discusses costs to conduct prevalent study. - Discusses expenditures (See: page 31, Exhibit G).

HIGGENSON: Further discusses funding of the program.

SENATOR TROW: What will be your source of funding?

CONCANNON: Currently it is an unidentified funding source. Recommend other potential general funds.

330HIGGENSON: It costs \$8,000 per drug addicted child, to care for during the first year of life.

CONCANNON: Discusses different alcohol and drug treatment for different genders and age groups.

CHAIR FORD: Adjourns the meeting at 4:00 p.m.

Submitted by,

Reviewed by,

Pamela Berger

Melanie Zermer

EXHIBIT LOG: A - HB 3142 - Proposed amendments - Patterson - 1 p. B - HB 3088 - Testimony - Kruse - 1 p. C - HB 3088 - Fiscal analysis - staff - 1 p. D - HB 3088 - Testimony - Keil - 2 pp. E - HB 3088 - Testimony - Hasek - 4 pp. F - HB 3088 - Testimony - Stubenvoll - 4 pp. G - HB 3142 - Testimony - Whitaker - 4 pp. H - Drug and Alcohol Treatment for Pregnant Users - Concannon - 49 pp.