

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 15, 1991 Hearing Room D 1:00 p.m. Tapes 115 - 119

MEMBERS PRESENT: Rep. Mary Alice Ford, Chair Rep. Beverly Stein, Vice-Chair Rep. Jerry Barnes Rep. Cedric Hayden Rep. John Meek Rep. Jackie Taylor

MEMBER ABSENT: Rep. Hedy Rijken

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

MEASURES CONSIDERED: HB 3280 - Requires health care providers to inform patients of providers' HIV or AIDS infection before commencing invasive procedures - Pub HB 3488 - Requiring personnel policies prohibiting discrimination against person who has tested positive for HIV, or who have been diagnosed as suffering from AIDS or AIDS Related Complex - Pub HB 3503 - Required testing for HIV or hepatitis B of persons coming into contact with police officer, fire fighters or emergency medical technician - Pub

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TAPE 115, SIDE A

010 CHAIR FORD: Calls the meeting to order at 1:06 p.m.

MELANIE ZERMER: Explains HB 3488, HB 3280, and HB 3503 (EXHIBIT A). Submits statutes to HB 3488 (EXHIBIT B) and HB 3503 (EXHIBIT C). - Submits and explains proposed amendments to HB 3488 (EXHIBIT D) and a hand engrossed version of the proposed amendments (EXHIBIT E).

PUBLIC HEARING: HB 3280 Requires health care providers to inform patients of providers' HIV or AIDS infection before commencing invasive procedures Witnesses: Rep. Bill Dwyer, District 42 Scott Bartlett, Rep. Dwyer's Legislative Aid Dr. Lawrence Foster, Oregon Health Division Mike McCracken, Oregon Medical Association Dr. Harold Osterud, Oregon Medical Association Ted Falk, Oregon State Bar, Health Law Section Stevie

Remington, ACLU Jan Peterson, Oregon Dental Association Susan King, Oregon Nurses Association Brian DeLashmutt, Oregon Nurses Association Barbara Lum, Oregon Association of Hospitals Kathy Arnold, Legacy Health System John Baker, Right to Privacy William Warren, Shanti in Oregon Dr. Jim Sampson, Multnomah County Health Department

PUBLIC HEARING: HB 3488 - Requiring personnel policies prohibiting discrimination against person who has tested positive for HIV, or who have been diagnosed as suffering from AIDS or AIDS Related Complex - Witnesses: Rep. Mike Burton, District 17 Rep. Gail Shibley, District 12 Dr. Lawrence Foster, Oregon Health Division Michel Vernon, Portsmouth NeighHB orhood Association Reena Heijdeman, Portsmouth NeighHB orhood Association Kelly Hagen, Oregon State Bar, Health Law Legislative Committee Kenneth Nelms, Citizen Stevie Remington, ACLU John Baker, Right to Privacy

Public HEARING: HB 3503 - Required testing for HIV or hepatitis B of persons coming into contact with police officer, fire fighters or emergency medical technician Witnesses: Dr. Lawrence Foster, Oregon Health Division Rep. Shibley, District 12 Ted Falk, Oregon State Bar, Health Law Section Stan Cargill, Multnomah County Correctional Association Kent Christopher, Multnomah County Correctional Association Barbara Swackhamer, Multnomah County Correctional Association Lt. Glen Rader, Oregon State Police Barbara Lum, Oregon Association of Hospitals Denis Dowd, Oregon Department of Corrections John Baker, Right to Privacy Bob Keyser, Oregon Council of Police Association Pat West, Oregon State Fire fighters Council Tom Chamberlain, Portland Fire fighters Association Stevie Remington, ACLU William Warren, Shanti of Oregon

HB 3280

068 REPRESENTATIVE BILL DWYER, DISTRICT 42: Submits and reads written testimony in favor of HB 3280 (EXHIBIT F). - Patients have a right to know if their provider is HIV infected. - We're talking about a persons life...public health policy should dictate that.

SCOTT BARTLETT, LEGISLATIVE AIDE: Discusses guidelines being produced by the Center of Disease Control relating to health care workers and HIV transmission. Also the Oregon Health Division offers a voluntary program for HIV infected health care professionals which is supported by the Oregon Medical Association and the Oregon Dental Association. - Discusses language in the bill submitted by Dr. Foster regarding AIDS dementiae.

HB 3280 HB 3503 HB 3488

230 DR. LAWRENCE FOSTER, OREGON HEALTH DIVISION: Submits and reads written testimony on HB 3280 (EXHIBIT G). - Discusses state of Ohio requiring physicians to self report to licensing board if they are HIV infected. Only one doctor in Ohio has self reported. The Oregon Health Division fears if this type of legislation passes, doctors will, out of fear, not provide that information or may choose not to find out, if in fact, they are infected. 376 - Submits and reads written testimony on HB 3503 (EXHIBIT H).

TAPE 116, SIDE A

- Discusses need for follow-up test.

CHAIR FORD: How long, after coming in contact with the AIDS virus will it take to show positive?

FOSTER: 8-10 weeks or longer (rarely up to two years).

060 REPRESENTATIVE STEIN: Education on preventative measures are important. How many health care workers have come forward with information they are HIV infected?

FOSTER: We do not have that information. They would provide that information to the local health department or employer. The Oregon Health Division is set up to be consulted, as a last resort, if the health department is in need of additional information. 074 - Comments on HB 3488. - Important to remember that AIDS is not transmitted by casual contact, as would be the case in the workplace. We advise every workplace to conduct safe measure when handling blood.

090 REP. GAIL SHIBLEY, DISTRICT 12: Testifies in favor of HB 3488. - Testifies in opposition to HB 3503. - Testifies in opposition to HB 3503. - Describes personal experiences of knowing persons having AIDS and those who have died from AIDS. - Discusses the rising numbers of those having AIDS. - Encourages members to visit AIDS hospices. - Encourages the members, as this committee becomes better informed on this subject, to inform the body of the legislature on this issue. 152 - Submits and explains articles on AIDS (EXHIBIT I).

HB 3488

212 REPRESENTATIVE MIKE BURTON, DISTRICT 17: Testifies in favor and introduces HB 3488. This bill was introduced because of an AIDS discrimination case involving Tri-Met. - Explains the proposed amendments (See: Exhibit D).

REPRESENTATIVE HAYDEN: Does this bill involve a fiscal impact to provide medical insurance for those needing medical treatment?

CHAIR FORD: No.

REPRESENTATIVE HAYDEN: This will cause health expenses to someone.

BURTON: This bill does not necessarily address existing staff, but new hires.

HB 3280

400 MIKE McCracken, OREGON MEDICAL ASSOCIATION: Testifies in opposition to HB 3280. Introduces Dr. Osterud.

410 DR. HAROLD OSTERUD, OREGON MEDICAL ASSOCIATION: Submits and reads written testimony in opposition to HB 3280 (EXHIBIT J).

TAPE 115, SIDE B

- Discusses "window period" for HIV tests. 062 - It would cost over 1/4 million dollars for one testing round of the 6,241 physicians currently practicing in Oregon. If they are in the "window period" they will need to be tested again in six months. Feels that the costs for testing does not justify the results.

MCCRACKEN: If a physician did not follow the OMA policy on AIDS/HIV they would lose staff privileges.

REPRESENTATIVE BARNES: Who makes sure that precautions are taken?

OSTERUD: The OMA, hospitals, hospital infection control program, State Health Division, local health departments, Oregon Dental Association, Oregon Nurses Association, and medical staff. It depends on what association you are with. - The mechanism for policing is already there. Is it well policed? I don't know. - We don't want to force physicians to have AIDS/HIV tests because we fear they will not come forth.

140 REPRESENTATIVE HAYDEN: The law states that a person having AIDS cannot be discriminated against. According to this bill, if an infected physician applied to work for the State as a health doctor, we could not refuse employment. How we can reconcile these issues?

MCCRACKEN: The physician agrees to conduct him or herself in accordance with OMA and hospital/medical policies.

REPRESENTATIVE HAYDEN: If that physician were denied employment/hospital privileges they would be able sue for discrimination.

HB 3503 HB 3280 HB 3488

160 STEVIE REMINGTON, ACLU: Submits and summarizes written testimony in opposition to HB 3503 (EXHIBIT K). - Submits testimony in opposition to HB 3280 (EXHIBIT L). - Expresses support for HB 3488.

HB 3280

260 TED FALK, OREGON STATE BAR, HEALTH LAW SECTION: Submits and summarizes written testimony on HB 3280 (EXHIBIT M). - There are many areas in this bill that need work, if you choose to pass this legislation.

REPRESENTATIVE HAYDEN: Does a physician who contracts AIDS become a handicapped person under the discrimination statutes and can that person be denied hospital staff privileges because of the handicap?

375 FALK: When a person is considered handicapped they are then put into a somewhat protected legal class where the grounds of employment or other privileges can be affected. - Although it has not been tested in court, I have no doubt that a physician with HIV/AIDS would be considered handicapped within the meaning of Oregon State

disability law and federal law. - Then the question is what consequences would flow from there being a handicap. There is nothing in the handicapped discrimination laws that prevents infection control measures from being taken. - For example, a person with TB could be considered handicapped and if TB can be spread from person to person by taking certain preventative steps, then that does not violate the handicapped discrimination law. - If there were a demonstrable danger of

transmission from provider to patient, and some step that the hospital could take to prevent that, then the handicapped discrimination laws would not prevent that. On the other hand, because the physician with HIV would be considered handicapped, and subject to protection under the discrimination statutes, they would be protected from arbitrary action which would be based on fear. - The answer to your question is yes the person would be treated as handicapped; it is not entirely clear weather it means that person would be entitled to keep their position, that would depend on weather you could show there was some concrete danger.

TAPE 116, SIDE B

CHAIR FORD: Are you referring to a person who has tested HIV positive or a person who actually has AIDS.

FALK: Simply having HIV alone, makes you handicapped. This has been a ruling of the civil rights division in the State of Oregon.

CHAIR FORD: Is Oregon law in line with the federal American Disabilities Act (ADA)?

FALK: Yes. - Continues reading written testimony regarding informed consent. 050 - Discusses civil damages remedy portion of bill which has unclear language.

168 JAN PETERSON, OREGON DENTAL ASSOCIATION: Submits and reads written testimony in opposition to HB 3280 (EXHIBIT O). - An overwhelming spread of infection is from the patient, not from the dentist or dental hygienist. - The Oregon Dental Association policy is that a dentist doing invasive procedures should tell of HIV infection.

220 BRIAN DELASHMUTT, OREGON NURSES ASSOCIATION: Testifies in opposition to HB 3280. - Describes problems in the bill: line 10, page 1 states "a midwife" - I am not aware of a licensing board of midwives. If it is referring to nurse midwives, they are already covered under (C). - Under Section 4 (3), lines 3-8, page 2 - it appears that the burden of proof is put on the provider to prove that they didn't infect the person, who in fact, was infected. The patient may be at multiple risk (i.e. IV drug user) and it would be hard for the provider to prove that he/she did or did not infect the patient.

250 SUSAN KING, OREGON NURSES ASSOCIATION: Submits and reads written testimony in opposition to HB 3280 (EXHIBIT N).

HB 3280 HB 3503

320 BARBARA LUM, OREGON ASSOCIATION OF HOSPITALS: Submits and reads written testimony in opposition to HB 3280 (EXHIBIT P). - Submits and summarizes written testimony in opposition to HB 3503 (EXHIBIT Q).

HB 3280

380 KATHY ARNOLD, LEGACY HEALTH SYSTEM: Submits and reads written testimony in opposition to HB 3280 (EXHIBIT R).

TAPE 117, SIDE A

016 DR. JIM SAMPSON, MULTNOMAH COUNTY HEALTH DEPARTMENT: Testifies on HB 3280. - I don't think this policy will protect public health and has great potential to do harm. - Discusses costs for implementing this policy. - There is adequate protection available to the public against provider infection. - Discusses high costs, in San Francisco, to implement provider infection tracking.

060 JOHN BAKER, RIGHT TO PRIVACY: Testifies in opposition to HB 3280. - Health care workers should continue to receive education on the AIDS and are strongly encouraged to be responsible about their contact. - Presently the Center of Disease Control and the American Medical Association do not feel that restricting health care workers, in such a manner, is necessarily a constructive measure. - Court cases notwithstanding, federal health agencies have found very few cases, if any, of HIV infection of patients from health care workers. - This bill will not make the health system safer, will not help people who are at risk, and will take responsibility and trust from our health care workers.

HB 3280 HB 3503

077 WILLIAM WARREN, SHANTI IN OREGON: Testifies in opposition to HB 3280 and HB 3503. - Form two years of working at Shanti, I can tell you lots of stories about fear people have about HIV and AIDS. - Discusses incidence rate in this rural state, which is high and is a serious problem. - We can educate people and offer support. - Discusses increasing numbers of AIDS patients at Shanti.

130 REPRESENTATIVE BARNES: In a court of law, what weight do codes of ethics carry?

FALK: Not easy question to answer; It has a tendency to influence.

CHAIR FORD: Recesses the meeting at 3:10 p.m. - Re-convenes at 3:22 p.m.

HB 3488

164 REENA HEIJDEMAN, PORTSMOUTH NEIGHB ORHOOD ASSOCIATION: Submits and reads written testimony in favor of HB 3488 (EXHIBIT S).

215 MICHEL VERNON, PORTSMOUTH NEIGHB ORHOOD ASSOCIATION: Testifies in favor of HB 3488. - Describes a discrimination suit filed by Joe Griffin against Tri-Met. - Discrimination comes out of fear. There is no medical evidence that casual contact spreads the AIDS virus (EXHIBIT T).

HB 3503

270 BOB KEYSER, OREGON COUNCIL OF POLICE ASSOCIATION: Testifies in favor of HB 3503. - This bill was introduced at our request. - Discusses exposure to bodily fluids. - A person who has potentially been exposed to a communicable disease should have the right to request mandatory testing. - Law enforcement person needs to be notified of exposure only, not the name of person exposing. - Officers need to know in order to make personal changes and decisions in their life. - In a known case, an officer had to go under a lot of stress to prove that he contracted the disease in the line of duty.

260 CHAIR FORD: Are there any state-wide statistics on how many times an officer has contracted a communicable disease from blood exchange, being

bitten, etc.?

KEYSER: Can check to see if that information is available.

CHAIR FORD: The bill does not address who is going to pay for the testing.

KEYSER: Will find out who would be responsible, possibly it may be the affected agency.

400 STAN CARGILL, MULTNOMAH COUNTY CORRECTIONAL ASSOCIATION: Testifies in support of HB 3503.

TAPE 118, SIDE A

- Frequency and costs are small. - Only aware of 2 out of 327 members, that have had some sort of bodily fluid exchange --- they are here today to describe their circumstance. - We, as an independent association are concerned because of the stories you will here from Swackhamer and Christopher. - They wanted to know if the person they had contact with was HIV infected, and we could not answer their question.

070 OFFICER KENT CHRISTOPHER, MULTNOMAH COUNTY CORRECTIONAL ASSOCIATION: Testifies in support of HB 3503. - Was attacked by an inmate, had direct contact with his blood. - Been to three doctors. Feel stressed that I may come down with HIV or hepatitis B. - Currently receiving shots for hepatitis B. - Have three children. - It is rare that this type of contact would occur --- but it did to me. - This bill won't help me, but down the line it will help someone else.

OFFICER BARBARA SWACKHAMER, MULTNOMAH COUNTY CORRECTIONAL ASSOCIATION: Testifies in support of HB 3503. - Had contact with an inmate who was attempting suicide. - Not aware that inmate may be HIV positive when trying to restrain him. - Noticed cut on my body. - Describes terror of not knowing. - Went to three doctors. - Could not obtain positive information if this person was HIV positive. - Been offered experimental drugs (AZT) which has severe side effects. - This incident has caused stress on myself and my family. - Discusses window period. - Information on AIDS/HIV is constantly changing. - Not interested in persons name, just want to know that if they are HIV positive.

CHAIR FORD: What if you had definitely known your exchange of blood with a HIV positive person, what would have you done differently?

SWACKHAMER: Would have gone ahead with experimental drug.

CARGILL: A person assaulting an officer usually will not offer information. - Tells about inmate, that Office Swackhamer had contact with, who said he had AIDS - possibly just to scare the officer.

255 LT. GLEN L. RADER, JR, OREGON STATE POLICE/LAW ENFORCEMENT LEGISLATIVE COUNCIL: Submits and reads written testimony in favor of HB 350 3 (EXHIBIT U). - It costs \$7 to draw blood and \$35 for screening; costs are higher in an emergency room.

REPRESENTATIVE TAYLOR: Do law enforcement officers receive immunizations to protect themselves from hepatitis B?

RADER: Not usually.

REPRESENTATIVE TAYLOR: Different agencies take different approaches to hepatitis B. Some automatically receive the shots before any fluid exchange occurs. - If we were to remove the HIV portion out of the bill, leaving the hepatitis B portion, would the bill still be supported by your association.

RADER: We are concerned about both HIV and hepatitis B, although our number one concern is HIV.

REPRESENTATIVE BARNES: How are we going to make sure the person of contact will submit to a blood test? They are probably not going to volunteer to do this.

RADER: If we need a blood sample, for legal purposes, we have strapped the person down to draw blood, which is legal.

REPRESENTATIVE TAYLOR: How will you get to that person for the second six month test? That would require tracking their whereabouts.

RADER: Many of these individuals are on parole and are being tracked by some agency anyway.

403 FOSTER: Discusses incidence rates. - Discusses window period. - 99.6% or more of HIV test results are correct.

TAPE 117, SIDE B

- Discusses AZT treatment. - There is no evidence that AZT kills the virus, it only suppresses it. - If an officer was able to know they had an exchange with a HIV positive person, they then would be able to make certain life decisions.

CHAIR FORD: Heard that AZT dosage could be cut down dramatically and still be effective with lesser side effects.

FOSTER: Correct.

REP. TAYLOR: Would contact with an infected needle be worse than blood contact?

FOSTER: Needles are a concern, but blood contact is our main concern.

TED FALK, OREGON STATE BAR, HEALTH LAW SECTION: Submits testimony on HB 350 3 (EXHIBIT V). - There are legal problems with the bill. - Explains written testimony. - There should be an element of probable cause included in this legislation.

135 REPRESENTATIVE STEIN: Would someone admitted that they were HIV positive, be considered probable cause?

FALK: I can't really answer that. I'm not sure. I view probable cause as including specific information about the individual. Explains law currently in place. You don't impose an order to get legal authority to impose the test. - Current HIV law defines that if there has been an occupational exposure to blood, you may ask that person to test for HIV. The Oregon Health Division (OHD) will assist in getting consent from

the individual. - If a person refuses to be tested, under certain carefully specified circumstances, the requestor may then go to the court to obtain mandatory HIV testing. - When I refer to "carefully specified circumstances" it depends on what constitutes a substantial exposure, this bill does not carefully define that. - It seems as though the officers were not aware of the current law; they could have requested voluntary testing from the individual.

CHAIR FORD: Officer Swackhamer did request testing.

FALK: After voluntary requesting occurs, current law allows the ability to go into court for a petition to get HIV testing. - Continues explaining written testimony regarding mandatory blood testing being unconstitutional search and seizure (See: page 5, Exhibit V). - Current statute states that enforcement by using a contempt of court citations. - If somebody disobeys a contempt of court citation, they can be locked up.

- Don't believe that there is any constitutional authority to strap a person down and draw blood. - But can use contempt of court and lock them up until they comply with request. - Suggests that sponsors look at current law to see if it meets their needs. - If not, provide an amendment to fill gaps. - We are not opposing the bill but feel that it has constitutional problems.

280 DENIS DOWD, OREGON DEPARTMENT OF CORRECTIONS: Submits and reads written testimony in support of HB 3503 (EXHIBIT W) including an amendment.

300 PAT WEST, OREGON STATE FIRE FIGHTERS COUNCIL: Testifies in favor of HB 2503. - Concerned about 1989 legislation because there have been no known notification to officers, EMTs, or fire fighters on their rights and course of action to take. - If there is no mandatory program when exchange of bodily fluid occurs, there will not be a follow-up test. - We need to have a mandatory program (i.e tracking system).

TOM CHAMBERLAIN, PORTLAND FIRE FIGHTERS COUNCIL: Testifies in favor of HB 3503. - Tells of Lonnie Zimmerman, fire fighter, who died from occupational exposure to AIDS. - Tells of a suicide victim. Through the grape-vine, fire fighters heard that the victim was an AIDS patient and they were able to protect themselves to exposure.

390 REPRESENTATIVE TAYLOR: Since the advent of AIDS, you now are trained to protect yourself.

CHAMBERLAIN: We glove up for every incident. But when getting people out of wrecked vehicle, we are apt to rip gloves and cut self. No matter how much precaution you take, it is a dangerous job.

REPRESENTATIVE TAYLOR: Would you want testing for every person who was bleeding in an accident situation?

CHAMBERLAIN: Only when there is blood to blood contact. We have a RN who would first find out if there was blood contact.

TAPE 118, SIDE B

JOHN BAKER, RIGHT TO PRIVACY: Testifies in opposition to HB 3503. -

Understands concerns that professionals have about contact. - This bill does not address the concern or fear of AIDS. - This bill would give a false sense of security to EMTs, fire fighters, and police officers. - It does not address education. - We should provide further HIV education. - HIV tests do not guarantee protection.

HB 3488

040 KELLY HAGEN, OREGON STATE BAR HEALTH LAW SECTION: Submits and reads written testimony on HB 3488 (EXHIBIT X) addressing the discrimination disabilities statutes.

114 CHAIR FORD: Does this bill actually change anything in current law?

HAGEN: No, if the intent of Section 1 is to bring into consideration the issues of reasonable accommodation, job safety, etc. - Yes, if the intent of Section 1 is to create a flat prohibition (one that does not admit to qualifications concerning job safety, job performance, etc.).

CHAIR FORD: Do we do that for other disabilities?

HAGEN: No.

140 KENNETH NELMS, CITIZEN: Submits and reads written testimony in favor of HB 348 8 (EXHIBIT Y). Gives support from Senator Trisha Smith on HB 3488. - Submits pamphlet (EXHIBIT AA).

JOHN BAKER, RIGHT TO PRIVACY: Testifies in support of HB 3488. - This is an important bill for state employees. - Feel that the intent of this bill is if AIDS infected employees are able and willing to work, that they will be allowed to. - Suggests amendment: in addition to covering those with AIDS, to include those who are at risk of, or are perceived to be at risk of, contracting AIDS. People who are considered to be at risk are gay people.

211 CHAIR FORD: So are drug abuser. Giving this type of complete immunity to everybody who uses illegal drugs, we will have a real problem.

BAKER: Don't think this bill is aimed at that population. Concerned that an employee, who is gay, may be perceived as high risk and that employer may not want that employee on staff.

CHAIR FORD: Isn't that protection already in current law?

BAKER: There is no protection for leSB ians and gays and that is why we are introducing an omnibus leSB ian and gay rights bill.

Submitted for the record, testimony on HB 3488, HB 3280, and HB 3503 from Paul Starr, Cascade AIDS Project (EXHIBIT Z). - Testimony from Gwendolyn Johnston on HB 3280 (EXHIBIT BB). - Testimony from Karen Roach, Executive Department on HB 3488 (EXHIBIT CC).

- Testimony from unknown source on HB 3280 (EXHIBIT DD). - Testimony from William Hamilton, M.D., 12th Street Surgical (EXHIBIT EE).

CHAIR FORD: Adjourns the meeting at 4:52 p.m.

Submitted by,

Reviewed by,

Pamela Berger

Melanie Zermer

EXHIBIT LOG: A - Expanded Agenda - staff - 2 pp. B - HB 3488 - statutes - staff - 3 pp. C - HB 3503 - statutes - staff - 4 pp. D - HB 3488 - amendments - staff - 1 p. E - HB 3488 - amendments - staff - 2 pp. F - HB 3280 - testimony - Dwyer - 13 pp. G - HB 3280 - testimony - Foster - 4 pp. H - HB 3503 - testimony - Foster - 1 p. I - HB 3488/HB 3280/HB 3503 - articles - Shibley - 8 pp. J - HB 3280 - testimony - Osterud - 5 pp. K - HB 3503 - testimony - Remington - 3 pp. L - HB 3280 - testimony - Remington - 3 pp. M - HB 3280 - testimony - Falk - 11 pp. N - HB 3280 - testimony - King - 3 pp. O - HB 3280 - testimony - Peterson - 2 pp. P - HB 3280 - testimony - Lum - 1 p. Q - HB 3503 - testimony - Lum - 1 p. R - HB 3280 - testimony - Arnold - 4 pp. S - HB 3488 - testimony - Heijdeman - 4 pp. T - HB 3488 - testimony - Vernon - 28 pp. U - HB 3503 - testimony - Rader - 2 pp. V - HB 3503 - testimony - Falk - 6 pp. W - HB 3503 - testimony - Dowd - 2 pp. X - HB 3488 - testimony - Hagen - 5 pp. Y - HB 3488 - testimony - Nelms - 1 p. Z - HB 3280/HB 3488/HB 3503 - testimony from Paul Starr, Cascade AIDS - staff - 3 pp. AA - HB 3488 - pamphlet - Nelms - 37 pp. BB - HB 3280 - testimony from Gwendolyn Johnston - staff - 2 pp. CC - HB 3280 - testimony from unknown source - staff - 2 pp. EE - HB 3280 - testimony from William Hamilton, 12th Street Surgical - staff - 2 pp.