

PA 11-137

HB6357

House	6895-6900	6
Human Services	252, 253, 263-265, 370, 371, 475, 476, 482	10
<u>Senate</u>	<u>6567, 6573-6578</u>	<u>7</u>
		<b>23</b>

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**CONNECTICUT  
GENERAL ASSEMBLY  
HOUSE**

**PROCEEDINGS  
2011**

**VOL.54  
PART 20  
6542 – 6897**

jr/dp/rgd/gbr  
HOUSE OF REPRESENTATIVES

411  
June 2, 2011

Total number voting	146
Necessary for adoption	74
Those voting Yea	146
Those voting Nay	0
Those absent and not voting	5

DEPUTY SPEAKER KIRKLEY-BEY:

The bill as amended passes. Will the Clerk please call Calendar 238?

THE CLERK:

On page 38, Calendar 238, Substitute for House Bill 6357, AN ACT CONCERNING ADMINISTRATIVE HEARINGS UNDER THE MEDICAID ELECTRONIC HEALTH RECORD INCENTIVE PROGRAM, favorable report by the Judiciary Committee.

DEPUTY SPEAKER KIRKLEY-BEY:

Representative Tercyak, you have the floor, sir.

REP. TERCYAK (26th):

Thank you very much, Madam Speaker. I move for acceptance of the joint committee's favorable report and passage of the bill.

DEPUTY SPEAKER KIRKLEY-BEY:

The motion before us is acceptance of the joint committee's favorable report and passage of the bill. Will you remark further, sir?

REP. TERCYAK (16th):

Thank you, yes. This bill requires the DSS commissioner in accordance with a provision in the Federal American Recovery and Reinvestment Act to develop and implement a Medicaid Health Information Technology plan, establish a Medicaid Health Record Incentive program to provide incentives for qualifying hospitals and health care providers that adopt and meaning full use of electronic health records. Under the bill providers who are agreed by certain incentive program decisions are entitled to an initial review by the DSS commissioner if still not satisfied they may request a contested case hearing governed by the Uniform Administrative Procedures Act.

We should not that there are 100 percent federal matching funds for incentive payments that we're talking about, the eligible Medicaid providers who adopted and upgrade full use certified electronic health record technology and we also as a state get a 90 percent federal match for related state administrative expenses. Thank you, Madam Speaker.

DEPUTY SPEAKER KIRKLEY-BEY:

Will you remark further on the bill that is

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before us? Will you remark further? Representative Gibbons, you have the floor, ma'am.

REP. GIBBONS (150th):

Thank you, Madam Speaker. I just want to agree with Representative Tercyak that this is a bill that came before us in Human Services. It is largely technical that implements federal regulation in terms of electronic records, who can receive the funds to put in the electronic records, how they can get paid, how they can have a hearing in case they have a disagreement with DSS over payment. I think this is the way the bill reads and I urge my colleagues to support it. Thank you, Madam Speaker.

DEPUTY SPEAKER KIRKLEY-BEY:

Thank you. Will you remark further on the bill that is before us? Representative Tercyak

REP. TERCYAK (26th):

Madam Speaker, the Clerk has an amendment, LCO 6662. I would ask the Clerk to please call the amendment and that I be granted leave of the chamber to summarize.

DEPUTY SPEAKER KIRKLEY-BEY:

Will the Clerk please call LCO 6662?

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**CONNECTICUT  
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THE CLERK:

LCO 6662, House A, offered by Representative  
Tercyak and Senator Musto.

DEPUTY SPEAKER KIRKLEY-BEY:

Representative Tercyak has asked leave to summarize. Is there any objection? Hearing none, please proceed, sir.

REP. TERCYAK (26th):

Thank you very much, Madam Speaker. This amendment came to us as a request from DSS again to conform the language with what's going on federally. All it does is say that the definition of hospital is the same definition that we provide in our statutes presently, that other health care provider means anybody else who is not a hospital and also when we -- when DSS sends notices of decisions, we require a return receipt. This will allow us to accept that return receipt in whatever way it is communicated to us as long as it complies with post office regulations so that we could accept an emailed facsimile of the receipt rather than having to wait for a piece of paper to arrive so we can be more efficient and spend less money. Thank you, Madam Speaker.

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DEPUTY SPEAKER KIRKLEY-BEY:

Will you move adoption, please?

REP. TERCYAK (26th):

I certainly do move adoption and I appreciate the reminder.

DEPUTY SPEAKER KIRKLEY-BEY:

Thank you, sir. Is there any -- will you remark further on the Amendment that's before us? Will you remark further on the Amendment before us? If not, let me try your minds. All those in favor, please indicate by saying aye.

HOUSE:

Aye.

DEPUTY SPEAKER KIRKLEY-BEY:

Those opposed, nay. The ayes have it. The Amendment is adopted. Will you remark further on the bill as amended? Will you remark further on the bill as amended? If not, staff and guests please come to the well. The machine will be open. Members take your seats.

THE CLERK:

The House of Representatives is voting by roll call. Members to the chamber. The House is voting by



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roll call. Members to the chamber please.

DEPUTY SPEAKER KIRKLEY-BEY:

Have all members voted? Have all members voted?  
Please check the board to see that your vote has been  
properly cast. The machine will lock and the Clerk  
will prepare the tally. Will the Clerk please  
announce the tally?

THE CLERK:

House Bill 6357, as amended by House A.

Total number voting	146
Necessary for adoption	74
Those voting Yea	146
Those voting Nay	0
Those absent and not voting	5

DEPUTY SPEAKER KIRKLEY-BEY:

The bill as amended passes. Will the Clerk  
please call Calendar 519?

THE CLERK:

On page 24, Calendar 519, Senate Bill 1069, AN  
ACT CONCERNING DEATH CERTIFICATE FEE WAIVERS FOR  
VETERANS, favorable report of the Committee on  
Planning and Development.

DEPUTY SPEAKER KIRKLEY-BEY:

**JOINT  
STANDING  
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was more specific than just who's incarcerated or who had pending charges. There was a lot more information just about legal involvement, which wouldn't be cross-walked over with the DSC system. That was -- we had to hand get that data. We couldn't keep that in our own records because we don't have the capability to do that.

REP. TERCYAK: Thank you very much. Than you.

Okay. Next up, Commissioner Michael Starkowski from the Connecticut Department of Social Services. Welcome back.

MICHAEL P. STARKOWSKI: I have a series of bills that I'm going to testify on today. My written testimony has been submitted. I'll try to make my remarks a little bit shorter than the written testimony so you can move through it.

<u>HB6357</u>	<u>HB6356</u>
<u>HB5429</u>	<u>HB5895</u>
<u>HB5893</u>	<u>HB5757</u>
<u>HB5434</u>	<u>SB296</u>
<u>SB1042</u>	<u>HB6358</u>
<u>HB6361</u>	<u>HB6360</u>

Good morning, Representative Tercyak and Senator Musto and members of the Human Services Committee. My name is Michael Starkowski. I'm the Commission of the Department of Social Services. I'm going to walk through some of the bills today, as I just said.

On Senate Bill 1041, AN ACT REPEALING A STATUTE CONCERNING FEDERAL AID FOR EMERGENCY RELIEF, the individual family and grant program regulations, which were originally drafted by DSS pursuant to federal law have since been amended by both the fed's and the state government. The state law now transfers the responsibility for the federal assistance for and individual or family disaster-related expenses to the Department of Emergency Management and Homeland Security.

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Since it's been transferred to DMHAS, this is a correction to repeal so DSS is not responsible and there's not conflicts with the state law.

H.B. 6357, AN ACT CONCERNING ADMINISTRATIVE HEARINGS UNDER THE MEDICAID ELECTRONIC HEALTH RECORD INCENTIVE PROGRAM, the bill would provide eligible providers and hospitals the right to request an administrative hearing under Chapter 54 of the Connecticut General Statutes to contest an adverse action in the Medicaid Electronic Health Records Incentive Payment Program.

ARRA requires -- ARRA meaning the American Recovery and Reinvestment Act requires that aggrieved providers wishing to contest an adverse action under this program be given the opportunity for a full administrative hearing. However, the state law, Connecticut state law, requires that the right to full administrative hearings under Chapter 54 be granted in statute.

This proposal grants those providers that right and brings the Connecticut statutes in line with federal law.

Just as a sideline, that program has the potential to bring in about \$100 million in federal money to providers over the next five years.

On H.B. 6356, AN ACT CONCERNING A CLARIFICATION OF THE DEPARTMENT OF SOCIAL SERVICES' REQUIREMENT TO GIVE NOTICE REGARDING REPAYMENT OF SERVICES, as required in PA 10 dash 183, the Department is required to provide notice to any individual who may be liable to repay public assistance benefits provided to someone that the individual has a

DENY PAYMENT FOR A PRESCRIPTION DRUG UNDER THE MEDICAID PROGRAM, this issue is currently the subject of a declaratory ruling by the Department. We're currently reviewing whether this is a requirement under federal law. If it's found not to be required under federal law, then this would impose additional requirements on the strained fiscal and administrative staff that we have right now.

It should be noted, though, that there is a policy transmittal that the Department issued to pharmacists. This has to do with pharmacists filling out partial applications or giving a temporary application -- a temporary fill on a prescription to an individual that comes in with a scrip. A policy transmittal actually directs the pharmacist to take the appropriate action to get authorization from the medical provider who signed the scrip, so we think that we have a policy in place already that addresses the ability for an individual to receive that full complement of medication when the scrip is written after the pharmacist receives that prior -- that authorization and the explanation from the medical provider that signed the scrip.

I have staff with me today if there's -- if you have any questions, and thank you for this opportunity.

REP. TERCYAK: Thank you very much, Commissioner. A big social services day. Do we have any questions for the Commissioner?

Yes, sir. Representative Wadsworth?

REP. WADSWORTH: Thank you, Mr. Chair, and thank you, Commissioner, for your testimony today.

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Back on House Bill 6357, you mentioned that there would be the possibility of \$100 million extra funds coming to the state of Connecticut over the next five year?

MICHAEL P. STARKOWSKI: Yes.

REP. WADSWORTH: Is that providing additional services, and could you elaborate on that?

MICHAEL P. STARKOWSKI: No. That's -- the way the program works, it's called meaningful use, so those medical providers, health care providers -- so it could be a physician, a physician's office, independent providers; it could be hospitals -- once they implement an electronic health record, we at the Department have the federal authority to determine criteria where we provide them bonus money for using that electronic health record to enhance the quality of services provided and to enhance the health outcomes for the individuals that they're serving.

So, it's our intent to put a work group together and have that criteria established no later than June of this year, and once that criteria is established, we will have staff explain or send information out to the providers across the state, the physician's offices, and the hospitals and other providers. We will actually educate the providers on what they would have to do to meet that criteria, and we estimate based on the numbers that came out of the University of Massachusetts and numbers that actually came out of the federal government that the combination of dollars that would be moved to individual providers and the combination of dollars that would be moved to hospitals could be as much as \$100 million, and the vast majority of those dollars would be going to

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hospitals in the state of Connecticut, but the providers get somewhere in the range of about 20 percent.

The federal government allows you to make those payments anywhere between 2011 and 2016, so we're in the process, again, trying to put the criteria together and put the plan together that would establish when those types of providers would get those payments and how they would be disbursed.

REP. WADSWORTH: So, that is an opportunity you will pursue then?

MICHAEL P. STARKOWSKI: Yes. We already supported it and, you know, we have asked the Office of Policy and Management. We received approval for the staff to implement the program. We have our management, Medicaid management information system being modified in order to accommodate these additional payments, so things are already in the works to get this money.

REP. WADSWORTH: And, one more, Mr. Chair? Thank you.

House Bill, I think it's 5434, the SNAP program --

MICHAEL P. STARKOWSKI: Yes.

REP. WADSWORTH: I heard some testimony in Appropriations that there may be up to \$100 million a year, an opportunity there to provide services for people in the state of Connecticut and then enhance the local economy, and just looking for a commitment to pursue that as much as we could, too?

MICHAEL P. STARKOWSKI: You know, we are. You

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Justice to give me an award next year if I'm doing a good job. But, thank you.

REP. TERCYAK: Thank you very much. Mag Morelli, and after that, we'll have Carlos Alvarez and Jim Palaia followed by Karyl Lee Hall. Welcome.

MAG MORELLI: Thank you very much. Good afternoon, Senator Musto, Representative Tercyak, members of the Committee. My name is Mag Morelli, and the president of the Connecticut Association of Not-for-profit Providers for the Aging, or CANPFA, a membership organization representing over 130 mission-driven and not-for-profit providers of aging services including nursing homes.

On behalf of CANPFA, I want to submit testimony on Senate Bill 299, and also comments on House Bill 6357.

Regarding Senate Bill 299, AN ACT CONCERNING THE ENFORCEMENT OF SURETY CONTRACTS BY NURSING HOMES, last year at this time CANPFA presented testimony to this Committee on a bill similar to the one that you have before you today. At that time, we raised concerns with the bill, and as a result of that testimony, we were given the opportunity to work with the proponent of the bill throughout the session in an attempt to address these concerns.

The bill before you today reflects the work that was done during the session, and we are grateful for the acknowledgment of that effort.

The issue addressed in the bill is of vital importance to CANPFA's nursing home members because the ability to put some level of responsibility on an individual that has legal

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access to a nursing home resident's income or resources is crucial in the effort to complete pending Medicaid eligibility cases.

In the last several years, we've worked with state legislators to find solutions to the very real issue of nursing home receivables that are growing as the result of pending Medicaid cases. Pending Medicaid eligibility claims, intentionally transferred assets resulting in Medicaid penalty periods and the non-payment of applied income are all Medicaid related receivable issues that are negatively affecting cash flow for our nursing homes.

We thank you for taking our concerns into consideration in this bill, and we would ask for your continued assistance on the issues surrounding pending Medical eligibility. One suggestion that could be added to this bill is a requirement that the Department of Social Services provide consumers with more comprehensive and understandable information about the Medicaid eligibility process.

We also are requesting that the effective date be put a little bit later on to this bill.

And then regarding House Bill 6357, AN ACT CONCERNING ADMINISTRATIVE HEARINGS UNDER THE MEDICAID ELECTRONIC HEALTH RECORD INCENTIVE PROGRAM, we would support this bill, and we would also request the Committee's assistance in ensuring that long-term care providers are included in the incentive program.

Thank you. I'd be happy to answer any questions.

REP. TERCYAK: Thank you very much. Do we have any questions? Are we sure? Good job, ma'am. Thank you very much.

**canpfa**

The Connecticut Association of Not-for-profit Providers For the Aging

**Testimony to the Human Services Committee****Senate Bill 299, An Act Concerning the Enforcement of Surety Contracts by Nursing Homes****&****House Bill 6357 An Act Concerning Administrative Hearings under the Medicaid Electronic Health Record Incentive Program****Presented by Mag Morelli, CANPFA President  
March 1, 2011**

Good afternoon Rep. Tercyak, Sen. Musto and members of the Committee. My name is Mag Morelli and I am the President of the Connecticut Association of Not-for-profit Providers for the Aging (CANPFA), a membership organization representing over 130 mission-driven and not-for-profit provider organizations serving elderly and disabled individuals across the continuum of care including nursing homes, residential care homes, housing for the elderly, continuing care retirement communities, adult day centers, home care and assisted living agencies. CANPFA members are sponsored by religious, fraternal, community, and municipal organizations that are committed to providing quality care and services to their residents and clients. Our member organizations, many of which have served their communities for generations, are dedicated to providing the services that people need, when they need them, in the place they call home.

On behalf of CANPFA I would like to submit the following testimony regarding Senate Bill 299, An Act Concerning the Enforcement of Surety Contracts by Nursing Homes and House Bill 6357, An Act Concerning Administrative Hearings under the Medicaid Electronic Health Record Incentive Program.

**Senate Bill 299, An Act Concerning the Enforcement of Surety Contracts by Nursing Homes**

Last year at this time, CANPFA presented testimony to the Human Services Committee on a bill similar to the one before you today. At that time we raised concerns with the bill and as a result of that testimony we were given the opportunity to work with the proponent of the bill throughout the session in an attempt to address these concerns. The bill before you today reflects the work that was done during that session and we are very grateful for the acknowledgement of that effort.

The issue addressed in this bill is of vital importance to CANPFA's nursing home members because the ability to put some level of responsibility on an individual that has legal access to a nursing home resident's income or resources is crucial in the effort to complete pending Medicaid eligibility cases.

In the last several years, we have worked with state legislators to find solutions to the very real issue of nursing home receivables that are growing as the result of pending Medicaid cases. Pending Medicaid eligibility claims, intentionally transferred assets resulting in Medicaid penalty periods, and the non-payment of applied income are all Medicaid related receivable issues that are negatively affecting cash flow for our skilled nursing homes.

A Medicaid application must be completed and verified before benefits are granted. For nursing home residents this can be a very complicated process as the individual often has a long and complicated financial history that must be accounted for during the eligibility determination

process. More often than not, the resident is not capable of completing and filing the Medicaid application, and so a family member or other representative must do so on the resident's behalf. That is why requiring assistance from such an individual, one who has legal access to a resident's income or resources, is so crucial.

The issue is not always urgent for families because a private pay nursing home resident needs only to *apply for* Medicaid coverage to garner the statutory protections that prevent a nursing home from discharging or transferring due to non-payment. The resident does not need to complete an application, but to simply submit one - and simply submitting an application does not grant someone Medicaid benefits. If one is submitted but never completed, the resident becomes yet another pending Medicaid case, protected from discharge or transfer, but with no other payer source. If a third party is not held responsible in some manner for completing that Medicaid application, it may never get done.

We thank you for taking our concerns into consideration in this bill and we would ask for your continued assistance on the issues surrounding pending Medicaid eligibility. One suggestion that could be added to this bill is a requirement that the Department of Social Services provide consumers with more comprehensive, understandable information about the Medicaid eligibility process.

*Suggested language: Section 3. The Commissioner of Social Services shall reorganize its web site to ensure that (1) information about the Medicaid application process is accessible, complete and understandable for consumers and (2) such information includes links to additional resources for the Medicaid application process. All written and electronic information published by the department about the Medicaid eligibility process shall include notification that institutionalized individuals determined eligible for Medicaid may be required, as part of the eligibility determination, to pay social security income, pension payments and other such applied income to the facility.*

We would also ask that you make the effective date of this legislation October 1, 2011 to provide nursing homes time to implement requirements in their admissions agreements and policies and also to make it clear that the new requirements only apply to contracts entered into on or after the effective date.

*Suggested language: Section 2. This Act shall not apply to any contract with a third party guarantor or any admissions agreement, as described in Section 1(b), that is entered into before October 1, 2011.*

### **House Bill 6357 An Act Concerning Administrative Hearings under the Medicaid Electronic Health Record Incentive Program**

CANPFA supports this bill which would give eligible health care providers the right to request an administrative hearing under chapter 54 of the general statutes to contest an adverse decision made by the Commissioner of Social Services under the Medicaid electronic health record incentive program. We would also request the Committee's assistance in ensuring that long term care providers are included in the incentive program.

Thank you for your consideration of this testimony.

**Mag Morelli**, President of CANPFA, [mmorelli@canpfa.org](mailto:mmorelli@canpfa.org), (860) 828-2903



*Testimony before the Human Services Committee*

*Commissioner Michael P. Starkowski*

*March 1, 2011*

HB6356 HB5429  
HB5895 HB5893  
HB5757 HB5434  
SB296 SB1042  
HB6358 HB6361  
HB6360

Good morning, Senator Musto and Representative Tercyak and members of the Human Services Committee. I am pleased to be here this morning to present testimony on legislation introduced at the request of the department and would like to thank the Committee for raising these bills. In addition, I am providing testimony on several other bills that impact the department.

**Bills raised at the request of the Department:**

**S.B. No. 1041 (RAISED) AN ACT REPEALING A STATUTE CONCERNING FEDERAL AID FOR EMERGENCY RELIEF.**

The Individual and Family Grant program regulations, which were originally drafted by DSS pursuant to federal law (section 411 of Public Law 100-707), have since been amended by both federal and state law. CGS 28-9d transfers the responsibility for the federal assistance for individual or family disaster-related expenses to Department of Emergency Management and Homeland Security.

The department has requested that this statute (17b-13), therefore, be repealed, so as not to present any possible conflicts with state law.

**H.B. No. 6357 (RAISED) AN ACT CONCERNING ADMINISTRATIVE HEARINGS UNDER THE MEDICAID ELECTRONIC HEALTH RECORD INCENTIVE PROGRAM.**

This bill would provide eligible providers and hospitals the right to request an administrative hearing under chapter 54 of the Connecticut General Statutes to contest an adverse action in the Medicaid Electronic Health Record Incentive Payment Program.

The American Recovery and Reinvestment Act requires that aggrieved providers wishing to contest an adverse action under the Medicaid Electronic Health Record Incentive Payment Program be given the opportunity for a full administrative hearing. However, Connecticut law requires that the right to full administrative hearings under chapter 54 be granted in statute. This proposal grants providers that right and brings Connecticut in line with federal law.

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Calendar 630, House Bill Number 6631.  
Move to place on the Consent Calendar.

THE CHAIR:

So ordered.

SENATOR LOONEY:

Thank you, Madam President.

Calendar 631, House Bill Number 6357.  
Move to place on the Consent Calendar.

THE CHAIR:

So ordered.

SENATOR LOONEY:

Thank you, Madam President.

A final item on calendar page 32 is Calendar  
632, House Bill Number 6642.

Move to place on the Consent Calendar.

THE CHAIR:

So ordered.

SENATOR LOONEY:

Thank you, Madam President.

Moving to calendar page 33, Calendar 634, House  
Bill Number 5431.

Madam President, move to place the item on the  
Consent Calendar.

THE CHAIR:

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Mr. Clerk.

THE CLERK:

Immediate roll call's been ordered in the Senate on the Consent Calendar. Will all Senators please return to the Chamber. Immediate roll call's been ordered in the Senate on the Consent Calendar. Will all Senators please return to the Chamber.

THE CLERK:

Madam President, the items placed...

THE CHAIR:

I would ask the Chamber to be quiet please so we can hear the call of the Calendar for the Consent Calendar.

Thank you.

Please proceed, Mr. Clerk

THE CLERK:

Madam President, the items placed on the first Consent Calendar begin on calendar page 5, Calendar 336, House Bill 5697.

Calendar page 7, Calendar 421, Substitute for House Bill 6126.

Calendar page 8, Calendar 449, Senate Bill 1149.



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Calendar page 10, Calendar 470, Substitute for House Bill 5340. Calendar 474, Substitute for House Bill 6274. Calendar 476, House Bill 6635.

Calendar page 12, Calendar 499, Substitute for House Bill 6638. Calendar 500, House Bill 6614. Calendar 508, House Bill 6222.

Calendar page 13, Calendar 511, House Bill 6356. Calendar 512, Substitute for House Bill 6422. Calendar 514, House Bill 6590. Calendar 515, House Bill 6221. Calendar 516, House Bill 6455.

Calendar page 14, Calendar 517, House Bill 6350. Calendar 519, House Bill 5437. Calendar 522, House Bill 6303.

Calendar page 15, Calendar 523, Substitute for House Bill 6499. Calendar 524, House Bill 6490. Calendar 525, House Bill 5780. Calendar 526, House Bill 6513. Calendar 527, Substitute for House Bill 6532.

Calendar page 16, Calendar 528, House Bill 6561. Calendar 529, Substitute for House Bill 6312. Calendar 530, Substitute for House Bill 5032. Calendar 532, House Bill 6338.

Calendar page 17, Calendar 533, Substitute for House Bill 6325. Calendar 534, House Bill 6352.

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Calendar 536, House Bill 5300. Calendar 537, House  
Bill 5482.

calendar page 18, Calendar 543, House Bill 6508.

Calendar 544, House Bill 6412. Calendar 546,  
Substitute for House Bill 6538. Calendar 547,  
Substitute for House Bill 6440. Calendar 548,  
Substitute for House Bill 6471.

Calendar page 19, Calendar 550, Substitute for  
House Bill 5802. Calendar 551, House Bill 6433.  
Calendar 552, House Bill 6413. Calendar 553,  
Substitute for House Bill 6227.

Calendar page 20, Calendar 554, Substitute for  
House Bill 5415. Calendar 557, Substitute for House  
Bill 6318. Calendar 558, Substitute for House Bill  
6565.

Calendar page 21, Calendar 559, Substitute for  
House Bill 6636.

Calendar page 22, Calendar 563, Substitute for  
House Bill 6600. Calendar 564, Substitute for House  
Bill 6598. Calendar 566, House Bill 5585.

Calendar page 23, Calendar 568, Substitute for  
House Bill 6103. Calendar 570, Substitute for House  
Bill 6336. Calendar 573, Substitute for House Bill  
6434.

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Calendar page 24, Calendar 577, Substitute for  
House Bill 5795.

Calendar page 25, Calendar 581, House Bill  
6354.

Calendar page 26, Calendar 596, Substitute for  
House Bill 6282. Calendar 598, Substitute for House  
Bill 6629.

Calendar page 27, Calendar 600, House Bill  
6314. Calendar 601, Substitute for House Bill 6529.  
Calendar 602, Substitute for House Bill 6438.  
Calendar 604, Substitute for House Bill 6639.

Calendar page 28, Calendar 605, Substitute for  
House Bill 6526. Calendar 608, House Bill 6284.

Calendar page 30, Calendar number 615,  
Substitute for House Bill 6485. Calendar 616,  
Substitute for House Bill 6498.

Calendar page 31, Calendar 619, Substitute for  
House Bill 6634. Calendar 627, Substitute for House  
Bill 6596.

Calendar page 32, Calendar 629, House Bill  
5634. Calendar 630, Substitute for House Bill 6631.  
Calendar 631, Substitute for House Bill 6357.  
Calendar 632, House Bill 6642.

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Calendar page 33, Calendar 634, Substitute for  
House Bill 5431. Calendar 636, Substitute for  
House, correction, House Bill 6100.

Page 34, Calendar 638, Substitute for House  
Bill 6525.

Calendar page 48, Calendar 399, Substitute for  
Senate Bill 1043.

Calendar page 49, Calendar 409, Substitute for  
House Bill 6233. Calendar 412, House Bill 5178.  
Calendar 422, Substitute for House Bill 6448.

Calendar page 52, Calendar 521, Substitute for  
House Bill 6113.

Madam President, that completes the item placed  
on the first Consent Calendar.

THE CHAIR:

Thank you, sir.

We call for another roll call vote. And the  
machine will be open for Consent Calendar number 1.

THE CLERK:

The Senate is now voting by roll on the Consent  
Calendar. Will all Senators please return to the  
Chamber. The Senate is now voting by roll on the  
Consent Calendar, will all Senators please return to  
the Chamber.

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Senator Cassano, would you vote, please, sir.

Thank you.

Well, all members have voted. All members have voted. The machine will be closed, and Mr. Clerk, will you call the tally?

THE CLERK:

Motion is on option Consent Calendar Number 1.

Total Number Voting	36
Those voting Yea	36
Those voting Nay	0
Those absent and not voting	0

THE CHAIR:

Consent Calendar Number 1 has passed.

Senator Looney.

SENATOR LOONEY:

Thank you, Madam President.

We might stand at ease for just a moment as we prepare the next item..

THE CHAIR:

The Senate will stand at ease.

(Chamber at ease.)