

# WEST VIRGINIA LEGISLATURE

## SELECT COMMITTEE D ON HEALTH

2006- 2007 Interims

### SENATE MEMBERS

Senator Roman W. Prezioso, Jr. Chair  
Senator Dan Foster  
Senator Evan Jenkins  
Senator Ron Stollings  
Senator Don Caruth  
Senator Vic Sprouse

### HOUSE MEMBERS

Delegate Don Perdue, Chair  
Delegate Barbara Hatfield  
Delegate Charlene Marshall  
Delegate Harold Michael  
Delegate Clif Moore  
Delegate Ralph Rodighiero

### Final Report of

## SELECT COMMITTEE "D" ON HEALTH

Select Committee D on Health was appointed by the Joint Committee on Government and Finance, following the 2007 Regular Session of the 78<sup>th</sup> Legislature. The Committee was assigned the following topics for study during the interim period:

**SENATE CONCURRENT RESOLUTION 82.** Requesting Joint Committee on Government and Finance appoint select interim committee to study health care reform options.

**SENATE CONCURRENT RESOLUTION 77.** Requesting Joint Committee on Government and Finance study certificate of need review process within Health Care Authority.

**HOUSE CONCURRENT RESOLUTION 14.** Requesting the Joint Committee on Government and Finance to study the state of the delivery of health care in West Virginia.

**HOUSE CONCURRENT RESOLUTION 53.** Exploring option to improve school health and healthy lifestyles.

**HOUSE CONCURRENT RESOLUTION 58.** Requesting the Joint Committee on Government and Finance direct the Legislative Oversight Committee on Health and Human Resources Accountability study rebalancing the long-term care system.

**HOUSE CONCURRENT RESOLUTION 81.** Requesting the Joint Committee on Government and Finance study the statistical rate of autism among this state's population and to study existing autism services in this state.

**ORAL HEALTH.** Access to oral health services.

During the course of the 2007 - 2008 interim period Select Committee D met and received information on these topics of study and other important healthcare issues from state agencies, political subdivisions, advocacy groups and other pertinent sources.

The Committee **REPORTS** as follows:

The Committee made a number of administrative requests to the Joint Committee on Government and Finance. These included:

- Allocation of \$100,000 to contract an experience consultant to assist the members in their study of health care in West Virginia;
- Authority to create two (2) subcommittees to study and report back to the full committee on oral health and the certificate of need process;
- Transfer of House Concurrent Resolution No. 53 requesting the Joint Committee on Government and Finance direct the Legislative Oversight Commission on Health and Human Resources Accountability study rebalancing the long-term care system to the Legislative Oversight Commission on Education Accountability; and
- Transfer of House Concurrent Resolution No. 58 requesting the Joint Committee on Government and Finance direct the Legislative Oversight Commission on Health and Human Resources Accountability study rebalancing the long-term care system to the Legislative Oversight Commission on Health and Human Resources Accountability.

All of these requests were approved by Speaker Richard Thompson and President Earl Ray Tomblin by letter dated May 22, 2007. A copy of that letter is attached. Subcommittees were created and were comprised of the following:

**Certificate of Need**

Senate Members

Dan Foster, Chair  
Evan Jenkins  
Vic Sprouse

House Members

Harold Michael, Chair  
Charlene Marshall  
Clif Moore

**Oral Health**

Senate Members

Ron Stollings, Chair  
Don Caruth

House Members

Barbara Hatfield, Chair  
Larry Border

**HEALTH CARE REFORM**

The Committee heard from Sally Richardson from the West Virginia University Institute for Health Policy Research at the Robert C. Byrd Health Sciences Center. Ms. Richardson provided an overview of the work conducted by the Health Care Planning Commission that was done in the early 1990's. This was to set the stage for the Committee to contract with a health care expert and to help them focus on what the desired outcome of the work of the expert might be.

The Committee discussed the direction in which they wished to proceed with contracting services of a health care expert. Staff was directed to conduct research into experts which may be available and interested in offering a proposal to the Committee to contract for the desired services. Extensive time was spent on the qualifications the expert should possess and the focus the Committee wished the expert to proceed with the study.

Following the preparation of a Request for Proposal (RFP) the Committee received two (2) proposals. The Chairs reviewed both proposals and presented an overview of each to the full committee. Following discussions, it was decided to award the contract to Kenneth E. Thorpe. Mr. Thorpe is Chair of the Department of Health Policy and Management at the Rollins School of Public Health at Emory University. He has worked in health policy and health care economics

for over twenty (20) years. Prior to beginning his work with West Virginia, he had performed similar work for Vermont and served as Deputy Assistant Secretary of Health Policy under President Bill Clinton.

Mr. Thorpe addressed the Committee during the October interims and gave an overview of how he wishes to proceed. He provided an overview of his thoughts and ideas of health care reform in West Virginia and gave the Committee some background on his education and experience.

The Committee **RECOMMENDS** that Senate Concurrent Resolution 82 and House Concurrent Resolution 14 be continued for the next Interim period to allow the Committee to work with Mr. Thorpe and present comprehensive health care reform legislation as early as the 2009 Regular Session of the Legislature.

### **AUTISM SERVICES IN THE STATE**

The Committee heard Dr. Barbara Becker of the West Virginia Autism Training Center at Marshall University on the myriad of services available at that facility. She discussed their outreach, respite and educational services. Additionally, the Committee heard from Loretta Haddy, State Epidemiologist and Director of the Division of Surveillance and Disease Control from the Bureau for Public Health on Thimerosal in vaccinations and the possible link with autism.

The Committee **RECOMMENDS** that the Resolution be continued for the additional study during the 2008 interim period.

### **ORAL HEALTH**

The subcommittee dedicated to oral health heard from a number of providers, advocates and from the National Conference of State Legislators on oral health concerns. Beverly Railey Walter of the Benedum Foundation discussed their efforts to improve oral health services in West Virginia. Drs. Elliott Shulman, Bridget Boggs Stevens, Byron Black and Carol Buffington presented oral health concerns from dentists and oral surgeon perspectives. Additionally, Jennifer Blaskovich and Gina Sharps provided insight into the dental hygienist perspective.

The Committee also heard from Renata Pore, the Director of WV Healthy Kids and Family Coalition about their work. Ms. Pore offered recommendations for improving oral health services throughout the state. The Department of Health and Human Resources provided an overview of the services they provide in presentations made by Phil Edwards, Director of Infant, Child and Adolescent Health at the Bureau for Public Health and Marsha Morris, Commissioner of the Bureau for Medical Services. Pat White the Director the WV Free Clinic also provided information to the Committee on their oral health recommendations.

During the month of September, the Legislature met in meetings in Martinsburg, West Virginia. At that meeting, James J. Crall, DDS spoke. Dr. Crall is the Director of MNCHB, National Oral Health Policy Center and is the Professor and Chair on the Section of Pediatric Dentistry at UCLA School of Dentistry. He spoke under the auspices of the National Conference of State Legislators. He provided an overview of oral health efforts that were currently underway or being considered by other states.

The subcommittee made the following **RECOMMENDATIONS**:

1. That an Office of Oral Health be created within the Department of Health and Human Resources reporting to the Commissioner of Public Health and that a full time director be named. Enacting legislation should continue many of the same responsibilities of the current oral health program but should also include:
  - a. an advisory board to develop a comprehensive state oral health plan with specific goals and required reporting to LOCHHRA;
  - b. move funding from the Division of Maternal and Child Health to the new office, unless specifically earmarked for the division.
2. That a letter be drafted from the full committee to the Secretary of the Department of Health and Human Resources and the Commissioner of the Bureau for Medical Services supporting an increase in the reimbursement for emergency and oral surgery services which would increase reimbursement to the 50<sup>th</sup> percentile of average charges.
3. That reimbursement for dentists be evaluated for an increase to ensure the availability of dentists to Medicaid recipients in the state. Financial implications of this should be sent to the co-chairs for Select D for consideration in the 2008 State Budget.
4. Legislation to create a volunteer dental license, similar to the volunteer physician license, to enable retired dentists to provide free services when possible.
5. Reauthorization of the West Virginia Neighborhood Investment Program and an increase in the available tax credit from the current \$2 million to \$4 million.
6. Preventative oral health care be promoted for all West Virginians, with all health care payers, through an outreach campaign that promotes oral health among children and pregnant women. This would require a cost benefit analysis by both Medicaid and PEIA to study the costs and benefits of providing a limited oral health benefit for prevention and infection control for pregnant women over 21 years of age.
7. Support of any legislation advanced by the W. Va. Dental Association and the W. Va. Dental Hygienists Association that would increase the number of oral health providers and services they may provide in the state.

8. Support of any efforts by the Department of Education to require every child entering kindergarten, second and sixth grades to have a dental exam by a licensed practicing dentists.
9. Legislation that would prohibit the use and sale of sugary snacks and sugary beverages in schools in all 55 West Virginia counties.
10. That equity be created between SCHIP and PEIA by providing some oral health coverage for PEIA children who are below 300% of the federal poverty level. Currently, PEIA is statutorily prohibited from using state funds to offer an oral health benefit.
11. That preventative oral health care be integrated into primary care practices. This would require training and reimbursement for primary care practices to do preventive oral health care including fluoride varnishes on primary teeth young children.
12. That a study be conducted on the denial of coverage by several insurance companies in West Virginia for medical costs associated with required dental care in the operating room under general anesthesia for the very young or disabled.
13. That the Subcommittee be continued for the 2008 interim period.

All of these recommendations were adopted by the full committee at a meeting held on December 11, 2007. Draft copies of legislation required for recommendations, 1, 4 and 9 are attached to this report.

### **CERTIFICATE OF NEED**

The subcommittee on Certificate of Need heard from various entities, advocacy groups and government agencies. Marianne Kapinos of the Health Care Authority provided a historical perspective on certificate of need. She discussed why it came about, the process in getting it passed in West Virginia and how it operated at the Health Care Authority. The American Medical Association and the West Virginia Hospital Association also provided their groups thoughts on the need to continue certificate of need. The Committee also received input from the Chamber of Commerce and the insurance industry and heard from the National Conference of State Legislators on trends with certificate of need nationally. Finally, Sonia Chambers, Chair of the Health Care Authority presented her views on the issue.

The Subcommittee **RECOMMENDS** no specific legislation for passage during the 2008 Regular Session of the Legislature. They further recommended that the Subcommittee be continued during the next interim period to address this issue further. Specifically, the Subcommittee wanted to further examine the effect of certificate of need on specific issues currently subject to certificate of need, gather greater, and more detailed and balanced data on both sides of the issue and look particularly at the effects of certificate of need on border counties.

The full committee adopted the recommendations of the subcommittee at a meeting held on December 11, 2007.

### **MISCELLANEOUS**

The Committee also heard from Sharon Carte, Director of the State Children's Health Insurance Program, regarding the deliberations on the federal level with respect to federal reauthorization of the program. Ms. Carte indicated that the West Virginia program appeared to be financially sound enough to weather the storm until the issue was resolved federally.

Respectfully submitted:

Senator Roman W. Prezioso, Jr.  
Co-Chair

Delegate Don Perdue  
Co-Chair





1 ~~accessible to students in an elementary school, middle school or~~  
2 ~~junior high school through vending machines on the premises, in~~  
3 ~~school stores or in school canteens or through fund raisers by~~  
4 ~~students, teachers, groups or by any other means. In elementary,~~  
5 ~~middle school or junior high school, only healthy beverages may be~~  
6 ~~sold in vending machines on the premises, in school canteens or~~  
7 ~~through fund raisers by students, teachers, groups or by any other~~  
8 ~~means. Nothing in this section shall be construed to prohibit or~~  
9 ~~limit sale or distribution of any food or beverage item through~~  
10 ~~fund-raising activities of students, teachers or educational groups~~  
11 ~~when the items are intended for sale off the school grounds.~~

12 ~~(2) Those high schools which permit the sale of soft drinks~~  
13 ~~through vending machines also shall offer for sale healthy~~  
14 ~~beverages. Of the total beverages offered for sale, at least fifty~~  
15 ~~percent shall be healthy beverages. Vending machines containing~~  
16 ~~healthy beverages shall be in the same location or substantially~~  
17 ~~similar location as vending machines containing soft drinks.~~

18 ~~(3) The sale of healthy beverages and soft drinks~~ healthy or  
19 nutritional snacks shall be in compliance with the rules of the  
20 National School Lunch Program and the School Breakfast Program of  
21 the State Board and the Nutrition Service of the United States  
22 Department of Agriculture, which became effective on the  
23 seventeenth day of June, one thousand nine hundred eighty-five.  
24 Seventy-five percent of the profits from the sale of healthy

1 beverages and ~~soft drinks~~ healthy or nutritional snacks shall be  
2 allocated by a majority vote of the faculty senate of each school  
3 and twenty-five percent of the profits from the sale of healthy  
4 beverages and ~~soft drinks~~ healthy or nutritional snacks shall be  
5 allocated to the purchase of necessary supplies by the principal of  
6 the school.

7 (b) For the purposes of this section:

8 ~~(1) "School day" means the period of time between the arrival~~  
9 ~~of the first student at the school building and the end of the last~~  
10 ~~instructional period; and~~

11 ~~(2) (1) "Healthy beverage" means water, one hundred percent~~  
12 ~~fruit and vegetable juice with no added sugars, flavored or~~  
13 ~~unflavored non-fat or low-fat milk. and other juice beverages with~~  
14 ~~a minimum of twenty percent real juice; Fruit and vegetable juice~~  
15 ~~portion sizes should be limited to no more than 4 ounces for~~  
16 ~~elementary students and no more than 8 ounces for middle or high~~  
17 ~~school students per product or package. Coffee, coffee-based~~  
18 ~~products and caffeine containing beverages, with the exception of~~  
19 ~~those containing trace amounts of naturally occurring caffeine~~  
20 ~~substances, are prohibited; and~~

21 ~~(2) "Healthy or nutritional snacks" means fruits, vegetables,~~  
22 ~~cheese, yogurt, grain foods containing whole grain as the first~~  
23 ~~listed ingredient, nuts and/or seeds. Nutritional elements on~~  
24 ~~healthy snacks should:~~

1       (A) Limit total calories to no more than 200 per product or  
2 package;

3       (B) Limit total fat to no more than 35% of calories per  
4 product or package excluding nuts, seeds or cheese;

5       (C) Limit saturated fat to less than 10% of the total  
6 calories;

7       (D)Limit trans fat to less than or equal to 0.5 grams per  
8 product or package;

9       (E) Reduce sugar content of food items to no more than 35% of  
10 calories per product excluding fruits;

11       (F) Limit sodium to no more than 200 milligrams per product or  
12 package;

NOTE: The purpose of this bill is provide that only healthy beverages and healthy or nutritional snacks may be sold in the county school system.

Strike-throughs indicate language that would be stricken from the present law and underscoring indicates new language that would be added.

1  
2  
3  
4  
5  
6  
7  
8  
9

H. B. /

(By Delegates /)

[Introduced ; referred to the  
Committee on .]

10 A BILL to amend and reenact §16-41-1, §16-41-2, §16-41-3, §16-41-4,  
11 §16-41-5 and §16-41-6 of the Code of West Virginia, one thousand  
12 nine hundred thirty-one, as amended, relating to the establishment  
13 of the Office of Oral Health in the Bureau of Public Health,  
14 creation of a full time director and the establishment of an  
15 advisory board and the responsibilities of the Office of Oral  
16 Health.

17 *Be it enacted by the Legislature of West Virginia:*

18 That §16-41-1, §16-41-2, §16-41-3, §16-41-4, §16-41-5 and §16-  
19 41-6 of the Code of West Virginia, one thousand nine hundred  
20 thirty-one, as amended, be amended and reenacted to read as  
21 follows:

22 **ARTICLE 41. Office of Oral Health**

23 **§16-41-1. Short title.**

24 1. This article may be cited as the "West Virginia Oral Health

1 Improvement Act".

2 **§16-41-2. Oral health program and director.**

3 1. (a) The commissioner of the bureau for public health shall  
4 establish and maintain an Office of Oral Health ~~oral health~~  
5 ~~program to report directly to the commissioner.~~

6 (b) The commissioner of the bureau for public health shall employ  
7 a full time director. The director shall have at least three  
8 years' experience in health or management in a health care  
9 related setting. The director shall employ any administrative or  
10 professional employees required for the proper administration of  
11 the programs provided in this article. The director shall appoint  
12 a consulting ~~appoint a dentist licensed in this state, as~~  
13 ~~director of the oral health program who~~ The director shall  
14 administer the program pursuant to the provisions of section  
15 three of this article.

16 **§16-41-3. Duties and directives of the office of oral health**  
17 **program.**

18 (a) The director of the ~~oral health program~~ Office of Oral Health  
19 shall implement and maintain the oral health program to include,  
20 but not be limited to, the following goals and objectives:

21 (1) ~~The development of a comprehensive dental health plans~~  
22 ~~within the framework of the state plan of operation, provided for~~  
23 ~~in subsection (f), section six, article one of this chapter, to~~

1 ~~maximize use of all available resources~~ The establishment of an  
2 advisory board to advise the director in the development of a  
3 comprehensive plan with designated benchmarks and responsible  
4 parties to improve the oral health of citizens in the state. The  
5 advisory board shall consist of the director of the Office of  
6 Oral health who will serve as the chairperson, a representative  
7 of the West Virginia Dental Association, the West Virginia Dental  
8 Hygienist Association, the WVU Dental School, the West Virginia  
9 Primary Care Association, the Free Clinics in West Virginia, a  
10 dentist and a dental hygienist working in private practice in the  
11 state, a pediatrician and family practice physician, a  
12 representative of the Bureau of Medical Services, a  
13 representative of the SCHIP program and the Public Employee  
14 Insurance Program, a representative of the Department of  
15 Education and other representaives of state agencies and private  
16 sector entities who the director believes will bring a broad  
17 prevention prespective to the board;

18 (2) Providing the consultation necessary to coordinate federal,  
19 state, county and city agency programs concerned with dental  
20 health;

21 (3) Encouraging, supporting and augmenting the efforts of local  
22 boards of health and boards of education in the implementation of  
23 a dental health component in their program plans;

24 (4) Providing consultation and program information to, at a

1 minimum, health professions, health professional educational  
2 institutions, school educators, extension specialists and  
3 volunteer agencies;

4 (5) Providing programs aimed at preventing and detecting oral  
5 cancer in the state, with a primary focus of meeting the needs of  
6 high-risk under-served populations, with the intent to reduce  
7 oral cancer mortality;

8 (6) Providing programs addressing oral health education and  
9 promotion, including:

10 (A) Public health education to promote the prevention of oral  
11 disease through self-help methods, including the initiation and  
12 expansion of preschool, school age and adult education programs;

13 (B) Organized continuing health education training programs for,  
14 at a minimum, health care providers, school educators and  
15 extension specialists; and

16 (C) Preventive health education information for the public;

17 (7) Facilitation of access to oral health services, including:

18 (A) The improvement of the existing oral health services delivery  
19 system for the provision of services to all West Virginia  
20 residents;

21 (B) Outreach activities to inform the public of the type and  
22 availability of oral health services to increase the

1 accessibility of oral health care for all West Virginia

2 residents; ~~and~~

3 (C) Design of oral health programs that assure children entering  
4 kindergarten, grade two and grade six have an oral health exam  
5 and appropriate preventative programs including recommendations  
6 for potential funding sources;

7 (D) Design of a training program for pediatricians, -primary care  
8 providers and their staff in certain preventive oral health  
9 procedures;

10 ~~(C)~~ (E) Assistance and cooperation in promoting better  
11 distribution of dentists and other oral health professionals  
12 throughout the state;

13 (8) Providing programs specifically targeting prevention of tooth  
14 loss and the restoration of existing teeth to the extent that  
15 funds are available.

16 (9) Providing oral or dental health services to individuals in  
17 need, to the extent funds are available for the services; and

18 (10) Provide evaluation of these programs in terms of preventive  
19 services.

20 (b) In consultation with dental care providers, the ~~commissioner~~  
21 director shall develop and implement ongoing oral cancer  
22 educational programs in the state:



1 (1) To train health care providers to screen and properly refer  
2 patients with oral cancers; and

3 (2) To promote the cessation of the use of alcohol and tobacco  
4 products with a primary focus of meeting the needs of high-risk  
5 under-served populations.

6 (c) The programs developed and implemented under this section  
7 shall address:

8 (1) The risk factors that lead to oral cancer;

9 (2) The signs and symptoms of oral cancer;

10 (3) The high-risk behaviors that may lead to oral cancer; and

11 (4) The accessibility of screening to detect oral cancer.

12 (d) In addition to the duties and responsibilities required under  
13 this section, the director of the oral health program shall  
14 administer and supervise all dental health programs within the  
15 bureau for public health.

16 **§16-41-4. Receipt of funds; special revenue account.**

17 1. (a) ~~The secretary of the department of health and human~~  
18 ~~resources may, in his or her discretion,~~ Secretary of Health and  
19 Human Resources shall transfer funds previously used in the oral  
20 health program unless specifically earmarked for the Division of  
21 Maternal and Child Health and from other programs within his or

1 her control, to the special revenue account created in this  
2 section for the purposes established in this article.

3 (b) The director may apply for and receive for the ~~oral health~~  
4 ~~program~~ Office of Oral Health any financial aid granted by any  
5 private, federal, state or local or other grant or source.

6 (c) There is hereby established in the state treasury a special  
7 revenue account designated the ~~"Oral Health Program Fund"~~ "Office  
8 of Oral Health Fund". All funds received by the director for the  
9 oral health program shall be deposited in the special revenue  
10 account.

11 (d) Moneys deposited in this fund shall be used exclusively to  
12 provide oral health services to accomplish the purposes of this  
13 article. Expenditures of moneys deposited in this fund are to be  
14 made in accordance with appropriation by the Legislature and in  
15 accordance with article three, chapter twelve of this code and  
16 upon fulfillment of the provisions of article two, chapter ~~five-a~~  
17 ~~eleven-b~~ of this code: ~~Provided, That for the fiscal year~~  
18 ~~beginning the first day of July, two thousand two, expenditures~~  
19 ~~are authorized from deposits rather than pursuant to~~  
20 ~~appropriation by the Legislature.~~ The director may disburse funds  
21 from the special revenue account as required by this article.

22 **§16-41-5. Contracts.**

23 1. The director may enter into contracts and agreements necessary

1 to facilitate the efficient and economical provision of oral  
2 health services under this article, including contracts for the  
3 purchase of services, equipment, and supplies from qualified  
4 providers, if included in the plan.

5 **16-41-6. Reporting requirements.**

6 1. On or before the first day of December of each year, the  
7 commissioner shall submit a report on the commissioner's findings  
8 and recommendations to the governor, the Legislative Oversight  
9 Commission on Health and Human Resource Accountability and the  
10 ~~joint committee on government and finance~~ Joint Committee on  
11 Government and Finance on the Office of Oral Health ~~oral health~~  
12 ~~programs~~ established under this article. The report shall include  
13 a summary of program accomplishments during the preceding year  
14 and the identification of existing barriers to proper oral health  
15 care in the state and recommendations addressing the removal of  
16 the barriers.

17 ~~§16-41-7. Continuation of the Oral Health Program.~~

18 ~~1. Pursuant to the provisions of article ten, chapter four of~~  
19 ~~this code, the Oral Health Program shall continue to exist until~~  
20 ~~the first day of July, two thousand seven, unless sooner~~  
21 ~~terminated, continued or reestablished.~~

22

Note: The purpose of the bill is to create an Office of Oral Health under the Bureau of Public health and to authorize a full time director.

Strike-throughs indicate language that would be stricken from the present law, and underscoring indicates new language that would be added.



WEST VIRGINIA LEGISLATURE  
STATE CAPITOL  
CHARLESTON, WEST VIRGINIA 25305

EARL RAY TOMBLIN  
PRESIDENT OF THE SENATE

RICHARD THOMPSON  
SPEAKER OF THE HOUSE

May 22, 2007

Honorable Roman W. Prezioso, Jr.  
Co-Chair, Select Committee D  
State Capitol  
Charleston, West Virginia 25305

Honorable Don Perdue  
Co-Chair, Select Committee D  
State Capitol  
Charleston, West Virginia 25305

Senator Prezioso and Delegate Perdue:

We have approved \$100,000.00 to be paid from the Joint Committee account to hire an experienced consultant to assist the members of Interim Select Committee D in their study of Health Care in West Virginia as set forth in SCR 82. You should work with Legislative Manager Aaron Allred to conduct the search and negotiate the contract with the consultant.

We approve you creating two sub-committees to study and report back to Select Committee D dealing with Certificate of Need and the issue of Oral Hygiene in West Virginia. Please forward us a list of the sub-committee members.

We also approve transferring the HCR 53, Exploring the option to improve school health and healthy lifestyles from Select Committee D to LOCEA.

Finally, we approve transferring HCR 58, studying rebalancing the long-term care system from Sub-Committee D to LOCHHRA since LOCHHRA has previously studied this issue.

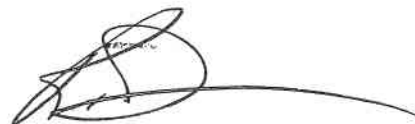
Senator Prezioso and Delegate Perdue  
May 22, 2007  
Page 2

Should you have questions, feel free to contact us.

Sincerely



Earl Ray Tomblin  
Senate President/Lt. Governor



Richard Thompson  
Speaker of the House