

## **2025 Legislative Session Summary Report**

### **Confluence Public Health Alliance**

#### **AMPHO | MEHA | MPHA**

**May 14, 2025**

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*This summary is an overview of the 69<sup>th</sup> Legislative Session as it relates to public and environmental health priorities and the work of Confluence Public Health Alliance (Confluence). Please note that this report does **not** cover the legislative session in its entirety, nor does it capture all of the impacts to public and environmental health. Additionally, any bill status is subject to change as the Governor has up to 10 days to veto or modify (line-item veto) a bill from the date it arrives on his desk.*

*Confluence is a nonpartisan nonprofit organization that advocates for public and environmental health policies on behalf of its collective membership and the Montana public health system. Confluence's policy work happens year-round during the legislative session and the interim. This summary is not legal guidance or legal analysis. Consult your attorney for guidance.*

## **General Overview**

Montana's 69<sup>th</sup> Legislative Session began on January 6, 2025, and concluded 85 days later on April 30, 2025, five days earlier than required. The legislature was controlled by a GOP majority in both the House and the Senate. The legislative makeup in the House was 58-42 and 32-18 in the Senate. A moderate Republican and Democrat coalition in the Senate played a critical role in advancing key legislation, frustrating hardline Republicans.

Two legislators from Ravalli County left halfway through the legislative session. Representative and Chair of House Public Health and Human Services Committee, Ron Marshall (R), was replaced with Representative Terry Nelson. After long Senate debates regarding ethical violations, Senator Jason Ellsworth (R) was banned from committees and the Senate floor.

There was a total of **1,759** bills and resolutions introduced as compared to the 1,697 bills introduced in 2023. There were **1,036** House bills, **723** Senate bills, **12** Constitutional Amendments, and **78** interim committee study bills introduced. Of the 78, **37** study bills passed through the legislature.

Confluence actively analyzed many bill drafts and language, tracked over 40 bills, and testified/lobbied on over 30 of those bills. Notably, only Confluence staff and Association members testified. Specifically, members of the Montana Environmental Health Association were actively engaged on

key environmental health bills. Confluence's lobbyists never testified but rather performed direct lobbying "in the halls".

Bills passed by the Legislature are sent to the governor, who can sign them into law, issue a veto, or let them become law without his signature. Vetoes can be overridden by two-thirds majority votes in both the House and Senate. To date, **626** bills have been sent to the Governor for his signature and **395** of the 626 await action and **222** have been signed into law. Another **180** bills have been passed by both chambers but have not yet been transmitted to the Governor. To date, at least one bill has been vetoed by the Governor and we expect to see more in the coming weeks. **Nine** bills were sent back to the legislature with recommended amendments.

Lawmakers entered into this session with some difficult issues to address, the top priorities including whether to renew the state's expanded Medicaid program, what to include in the next state budget and how to offer relief from rising residential property taxes. Other dominating issues included how to respond to the *Held v. Montana* ruling, how to address underfunded school districts, and how to address the GOP's proposals aimed at reshaping the state's judicial branch.

Bipartisan wins included the STARS Act to raise teacher pay and restrictions on insurance companies' control over medication access. Despite progress, divisions remained on LGBTQ+ rights, judicial reforms, and the handling of income tax cuts.

### **Budget Overview**

[HB 2](#) passed with \$16.6B in spending authorized for the two-year period that begins July 2025, up about 15% from the budget bill passed in 2023. About \$5B of the current budget bill is from the state General Fund, which is largely composed of state income taxes. The legislature also passed a major endowment proposal, creating a "Growth and Opportunity" trust that now includes more than \$500M from the General Fund. The new trust will backstop the state pension system and housing lending programs in addition to eventually spinning off interest for property tax relief, local bridge repairs, water project maintenance, and child care programs. The "Growth and Opportunity" trust and other reserve accounts will also protect the state from any potential fallout from federal spending cuts.

The roughly \$60M the state collects annually from taxes levied on recreational marijuana also led to long-winded debates. The legislature endorsed two bills giving Montana Fish, Wildlife and Parks the ability to put habitat restoration dollars toward private land projects. One of the bills reallocates marijuana taxes that currently go into the General Fund to bolster substance use disorder treatment, police department operations, homelessness support, and other initiatives.

*Please visit [www.legmt.gov](http://www.legmt.gov) for additional details regarding the legislature, bill status', interim committees, or to contact your legislator.*

## **Confluence Accomplishments**

This was Confluence's second legislative session as an alliance between the Association of Montana Public Health Officials (AMPHO), the Montana Environmental Health Association (MEHA), and the Montana Public Health Association (MPHA).

**Specific policy achievements include:**

1. Passage of HB 853 *Revise fees for licensed establishments*. Confluence and MEHA worked on HB 853 starting in June 2023. Fees are set in state law and until now had not been changed for 15 years. HB 853 will more adequately fund mandated public health services.
2. Holding off all rollbacks of immunization protections including SB 382, SB 474 and licensed childcare regulatory bills specifically SB 285, SB 269 and SB 467.
3. Strengthened and preserved the Montana Clean Indoor Air Act through the passage of SB 390 and the defeat of SB 150 (cigar bars). SB 390 strengthened our Clean Indoor Air Act by banning the use of e-cigarettes indoors across Montana.
4. Defeated HB 658 *Revise local board of health sanitation powers and rules*, which would have removed local counties of the ability to adopt more stringent onsite wastewater treatment rules than those set by DEQ – posing a significant threat to water quality and environmental health. This victory was the result of persistent, strategic advocacy and the effective elevation of local registered sanitarians as trusted experts.

While the moderation politics in the Senate contributed to Confluence's success this session, **Montana's public and environmental health policy efforts were stronger than ever before as a result of:**

- **Confluence Structure:** Confluence's weekly legislative committee deserves a lot of credit, comprised of 11+ AMPHO, MEHA, and MPHA individual members and member organizations as well as representation from both the Public Health & Safety Division and the Early Childhood and Family Support Division.

Additionally, Confluence's staff has forged strategic connections with influential partners, bridged membership with targeted decisionmakers, and framed public and environmental health positively with a spectrum of policymakers.

- **Membership Engagement:** Ongoing membership engagement was fostered through AMPHO/ MPHA's weekly public health policy call, MEHA's weekly environmental health policy call, select call-to-actions, bi-weekly written updates, and strategic asks to members for **local outreach** to legislative targets. Confluence's virtual legislative kick-off was attended by 78 members and the virtual legislative recap was attended by 95 members.
- **Government Relations:** A contract with two lobbyists allowed for Confluence to be active on the majority of its priorities and get the Legislature to pass HB 853 *Revise fees for licensed establishments*. Notably, Confluence's lobbyists never testified on the record on behalf of Confluence or the Associations but rather strategically lobbied legislators.
- **Legislative Partnerships and Coalitions:** Confluence's priority work was bolstered by its formal and informal relationships with numerous entities including the Montana Restaurant Association, the Alliance for a Healthy Montana, Healthy Montana Coalition (Medicaid Expansion), Montana Families for Vaccines Steering Committee, the MT Chapter of the

Association of American Pediatricians, American Heart Association, American Cancer Society – Cancer Action Network, MT Medical Association and others including childcare.

- **Interim Relationship Building:** AMPHO members hosted 14 pre-session public health forums for legislators in their local health departments through Confluence’s partnership with the Alliance for a Healthy Montana Coalition. Additionally, Confluence and MEHA worked with the Montana Restaurant Association in order to secure their support on HB 853. Confluence also worked closely with the Montana Association of Counties Health & Human Service Committee to inform the local government perspective on HB 853.

**Thank you for being engaged, connected, and speaking for health.**

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## Confluence Legislative Priorities

Throughout the 2025 Legislative Session, Confluence Public Health Alliance focused its policy and advocacy efforts on the following six priority areas:

1. Maintain Funding for Mandated and Foundational Public Health Services
2. Protect Montanans from Preventable Diseases (Immunizations)
3. Support the Continuation of Medicaid
4. Health Promotion, Environmental Health, and Food Safety
5. Preserve Public Health Authority
6. Advocate for Behavioral Health Prevention

The following report highlights the key bills Confluence engaged with during the session, organized by these priority areas.

● = Confluence Supported | ● = Confluence Monitored | ● = Confluence Opposed

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### 1. Maintain Funding for Mandated and Foundational Public Health Services

● **HB 853: Revise fees for licensed establishments**

**Status:** Transmitted to the Governor on 5/7/25.

**Sponsor:** Thank you to Representative George Nikolakakos (R) HD 22

HB 853 will bring an additional \$1 million annually to support county licensed establishment inspection programs across Montana. These inspection programs—mandated by state law—have long been underfunded, with fee levels unchanged for over 15 years. Counties (local taxpayers) have been covering approximately 75% of the cost, with only 25% funded by business license fees.

Confluence and the Montana Environmental Health Association (MEHA) began working proactively on this legislation in the summer of 2023. Using data collected from 35 counties, we built the case for rebalancing the cost burden between counties and businesses. Working closely with the Montana Association of Counties (MACo) Health & Human Services Committee, we landed on a goal of a 50-50 funding split.

A MEHA-led workgroup convened throughout the interim to develop fair, tiered fee categories and recommend adjustments. In Fall 2024, MEHA worked with the Montana Restaurant Association to build support and address concerns. This early and consistent collaboration paid off: HB 853 was sponsored by a strategic legislator, supported by the Restaurant Association, and backed by multiple businesses that signed on and testified in favor of the bill.

While HB 853 passed smoothly through the House, it encountered significant challenges in the Senate including quickly running out of time before *sine die*. The bill ultimately passed the legislature.

HB 853 is a notable accomplishment in sustainably funding mandated local public health functions—especially at a time when local budgets are tight and broader public health funding remains uncertain. **We are deeply grateful to everyone who contributed to the success of this effort – thank you!**

## **Section B – DPHHS Budget Appropriations**

### **HB 2: General Appropriations Act (State Budget)**

#### **Funding for Tobacco Prevention:**

Funding for the Montana tobacco use prevention program was addressed in two separate line items amended into the Public Health & Safety Division budget in the Senate Finance and Claims Committee. Both amendments authorize funding from the Master Settlement Agreement - state special revenue account (no general fund impact):

1. A \$1 million annual increase to base funding for both FY 2026 and FY 2027.
  - a. [MTUPP funding](#) predominately comes from the MSA with additional funding from the CDC Cooperative Agreement and the JUUL Settlement.
  - b. **This increase would take prevention funding from 40% of the CDC recommended level to 55% (barring a veto).**
2. A \$1.3 million annual appropriation contingency to replace MTUPP's federal funding from the CDC Cooperative Agreement should it be removed or reduced.

- a. **Note:** CDC's Office on Smoking and Health was eliminated entirely in early April. Montana begins its annual grant at the end of April each year. To date, Montana has not received its notice of award for this year's \$1.3 million.

Both of these appropriations are one-time only (OTO). OTO funding means this budget line item will not renew after this biennium without legislative action.

### **Behavioral Health**

The Governor's proposed budget included 10 Behavioral Health Service for Future Generations (BHSFG) recommendations: BHSFG #1, 3, 4, 6, 8, 9, 17, 18, 19 and 22. Ultimately, all of the governor's BHSFG items were fully or partially funded. For more detailed information on the behavioral health items, we encourage you to visit the Behavioral Health Alliance of Montana's (BHAM) website.

#### **[HB 574: Authorizing implementation of the certified community behavioral health clinic model](#)**

**Status: Signed by the Governor.**

**Sponsor:** Jane Gillette (R) HD 77

HB 574 funds BHSFG #22 ([fiscal note](#)), which directs DPHHS to implement CCBHCs and build a more integrated mental health and substance use treatment system with sustainable funding. HB 574 draws \$31.9 million in federal funding down from SAMHSA with a \$8.4 investment from state special revenue.

#### **[● SB 95: Provide funding for suicide prevention](#)**

**Status: Signed by the Governor.**

**Sponsor:** Mike Yakawich (R) SD 24

SB 95 appropriates \$300k to DPHHS to prevent suicide among service members, veterans, and their families. Many local health departments house the state's suicide prevention grants and lead suicide prevention coalitions. SB 95 will bolster existing these efforts and support communities in their strategies specifically for individuals with military service.

### **Medicaid Rate Reimbursement**

A 3% Medicaid provider increase was approved. Provider rate increases continued to be a source of focus for Section B since there currently is not an adequate mechanism for DPHHS and the Legislature to adjust in a timelier manner.

While the 2023 Legislature approved \$339M to bring Medicaid rates up to the Guidehouse rate study guidelines, those guidelines were based on 2020 costs for Medicaid providers. Inflation

and personnel costs continue to increase, and providers are once again well-below the cost of delivering the care (Source: BHAM). HB 419 is one mechanism to keep pace with rate needs.

**HB 419: Implementing cost reporting for certain Medicaid service provider types**

**Status:** Transmitted to Governor

**Sponsor:** David Bedey (R) HD 86

HB 419 allows DPHHS to review cost reports for Medicaid providers in senior and long-term care, mental health, substance use disorder and intellectual developmentally disabled programs every other year. Medicaid providers are already five years behind costs in reimbursement. The cost report information will be used to inform the department and the legislature about the adequacy of Medicaid rates.

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## **2. Protect Montanans from Preventable Diseases (Immunizations)**

● **HB 364: Generally revise laws related immunizations**

**Status:** Tabled. Blast motion failed.

**Sponsor:** Melody Cunningham (D) HD 97

HB 364 would have restored DPHHS' authority to collect aggregate data on school immunization rates. Montana is the only state in the nation for which aggregate school vaccination information rates and exemption information are not available. The removal of reporting was an unintended consequence of a 2021 bill (HB 334). HB 364 had bipartisan support in the House which viewed it as an appropriate data bill, but in the Senate HB 364 was turned into a vaccine bill with privacy concerns.

## **Licensed Child Care Regulatory Legislation**

● **HB 747: Authorize certain day-care centers to adopt policy regarding certain immunization exemptions**

**Status:** Tabled in House Business and Labor.

**Sponsor:** Mary Caferro (D) HD 81

HB 747 was the "legislative fix" for New Rule LXV (2) (p. 1341) in [MAR 37-1044](#), the newly active childcare rules, ARM 37.96. New Rule LXV (2) allows smaller family child care providers the choice of whether or not to accept religious exemption to vaccines but required child care centers (>16 children) to accept them. HB 747 would have 1) allowed child care centers the same choice as smaller providers and 2) required child care centers to provide notice to parents of their policy.

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● **SB 285: Generally revise child care administrative rules (i.e. child care center)**

**Status:** Failed 2<sup>nd</sup> Reading - Senate.

**Sponsor:** Dennis Lenz (R) SD 25 (Billings)

Senate Bill 285 would have directed the Department of Public Health and Human Services (DPHHS) to adopt and amend the administrative rules governing child care. Specifically, SB 285 referenced ARM 37.96 which was noticed on 10/20/2023 under [MAR 37-1044](#) with a public hearing on 11/13/23. ARM 37.96 took effect on May 1, 2025.

SB 285 would have:

1. Removed local health authorities' ability to verify vaccination records.
2. Eliminated Montana's deference to ACIP guidelines.
3. Mandated acceptance of religious exemptions for child care businesses.
4. Removed Hepatitis B from required vaccinations.
5. Restricted small child care providers' ability to make enrollment decisions based on immunization status (as allowed by New Rule LXV (2) in MAR 37-1044).

● **SB 269: Generally revise laws regarding family and group day care homes**

**Status:** Failed 2<sup>nd</sup> Reading - Senate.

**Sponsor:** Dennis Lenz (R) SD 25 (Billings)

Senate Bill 269 would have revised Montana's child care family and group day-care homes child care licensing rules/regulations. In addition to creating new policy guidelines for health and sanitation and immunizations, the bill added to MCA 52-2-704 a prohibition on the department from implementing stricter guidelines than contained in this bill. SB 269 would have taken the place of the proposed child care rules (ARM 37.96) package for **family and group** settings.

SB 269 would have:

1. Required providers submit proof of an annual sanitation inspection to DPHHS.
2. Required providers to notify parents and DPHHS, of communicable disease cases but not local health departments, potentially delaying public health response.
3. Allowed child cares to determine when a kid returns after illness, without medical guidance.
4. Required family and group providers to align with school vaccination exemption protocols.
5. Mandated that food be handled per local health guidelines but lacks clear compliance standards.

● **SB 467: Generally revise child care laws**

**Status:** Tabled in Committee - Senate.

**Sponsor:** Dennis Lenz (R) SD 25 (Billings)

While SB 285 and 269 were successfully defeated with strong partner support, SB 467 drew minimal partner attention as it primarily focused on the direct contact that local public health has with child cares.



SB 467 would have:

1. Excluded local health departments from verifying or inspecting childcare vaccination records.
2. Excluded local health departments from responding to child care outbreak (or even questions from child cares), instead providers would have to rely solely on state staff.
3. Removed the requirement for annual sanitation inspections from state law. These inspections—conducted by registered sanitarians—are essential to ensuring that facilities have safe water, proper handwashing stations (including hot water), and meet basic health and safety standards, particularly when operating with private water supplies.

### **Additional Legislation Weakening Immunization Protections**

● **SB 474: Require acceptance of religious and personal medical exemptions to required immunizations**

**Status:** Failed. Passed House Judiciary; Tabled in House Appropriations. Blast motion failed.

**Sponsor:** Daniel Emrich (R) SD 11

SB 474 would have created an informed consent exemption for required school immunizations and religious exemptions for child care centers. SB 474 would have amended MCA [49-2-312](#) (HB 702 from 2021) by removing the carve out for school and childcare vaccination requirements. HB 702 prohibits discrimination based on vaccination status but specifically exempts schools and some child care facilities, therefore allowing for vaccination requirements.

● **SB 382: Requiring acceptance of religious or conscience exemptions to immunizations**

**Status:** Tabled in Senate Public Health.

**Sponsor:** Senator Daniel Emrich (R) SD 11

SB 382 would have accomplished similar objectives as SB 474. Once SB 382 was ultimately amended into SB 474, which created a singular bill aimed at weakening immunization protections.

● **HB 371: Ban mRNA vaccinations (for infectious diseases) in Montana for humans**

**Status:** Failed 2<sup>nd</sup> Reading – House

**Sponsor:** Greg Kmetz (R) HD 36

● **SB 475: Ban aluminum in vaccines**

**Status:** Tabled – Senate Public Health, Welfare and Safety

**Sponsor:** Daniel Emrich (R) SD 11

● **HB 807: Prohibit vaccines allowed under emergency use authorization or undergoing safety trials to be required.**

**Status:** Transmitted to the Governor.

**Sponsor:** J. Hinkle (R) HD 67

HB 807 prohibits vaccines allowed under emergency use authorization or undergoing safety trials to be required. HB 807 does not change the way that vaccines are currently implemented in Montana. The most harmful part HB 807 (similar to Representative J. Hinkle's HB 888) was the dangerous anti-medicine rhetoric in committee.

● **SB 478: Require higher education to pay medical costs associated with mandated COVID-19 vaccination**

**Status:** Tabled in Senate Education and Cultural Resources

**Sponsor:** Theresa Manzella (R) SD 44

● **HB 418: Ban mRNA vaccines in Montana for animals**

**Status:** Tabled in House Agriculture

**Sponsor:** Greg Kmetz (R) HD 36

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### **3. Support the Continuation of Medicaid**

● **HB 245: Revise the Montana HELP Act workforce provisions and termination date**

**Status:** Signed by Governor Gianforte on March 27, 2025.

**Sponsor:** Ed Buttrey (R) HD 21

Confluence played a supportive role on HB 245 through partnering with the Healthy Montana Coalition and sharing information with members as HB 245 progressed.

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### **4. Health Promotion, Environmental Health, and Food Safety**

#### **Tobacco Use Prevention and the MT Clean Indoor Air Act**

● **SB 390: Revise definitions in Clean Indoor Air Act**

**Status:** Signed by the Governor.

**Sponsor:** Willis Curdy (D) SD 49

SB 390 added electronic cigarettes to the Montana Clean Indoor Air Act (CIAA). The CIAA was passed in 2005 prior to electronic cigarettes being widely introduced to the market. SB 390 strengthens Montana's CIAA is a significant accomplishment for public health advocates.

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● **HB 494: Revise tobacco settlement allocations**

**Status:** Tabled in House Human Services

**Sponsor:** Ron Marshall (R) HD 87 – Resigned from the Legislature on March 3.

HB 494 would have gutted funding for local Montana Tobacco Use Prevention Program (MTUPP) efforts, directly affecting local health department programs across Montana.

*Thank you to the 31 AMPHO and MPHA members for signing on and opposing HB 494!*

**Note:** HB 494 was tabled but the Sponsor managed to stir up a lot of interest in how the Master Settlement Agreement funds are used. As a compromise, [LC 4385](#) – Interim Study of Tobacco Funds was created. However, LC 4385 failed to get out of draft status likely as a result of Rep. Marshall's resignation.

● **SB 150: Generally revise alcohol and tobacco laws**

**Status:** Failed – 3<sup>rd</sup> Reading in the House

**Sponsor:** Wylie Galt (R) SD 39

SB 150, the Cigar Bar Bill allowed for smoking cigars in establishments with an all-beverage license. A cigar endorsement would permit smoking cigars on the premises, even in spaces considered enclosed public places, with employees, exempting the establishment from general smoking restrictions of the Clean Indoor Air Act.

**Note:** SB 150 was successfully killed after multiple attempts. Ultimately, a combination of bad amendments and lobbying against the bill led to it failing to pass in the House. However, Senator Galt is a holdover Senator and this bill will likely return in 2027.

● **HB 576: Revise funding for Medicaid and health and support services to children and to adults who are aged, blind, and disabled**

**Status:** Signed by the Governor.

**Sponsor:** Jane Gillette (R) HD 77

HB 576 would allow for the Tobacco Master Settlement Account to fund “other health and support services” potentially creating a pathway to reduce allocations to currently funded programs such as MTUPP and redirect that funding to other health programs and services such as home visiting.

● **HB 149: Generally revise alternative nicotine and vapor products laws**

**Status:** Tabled in House Business and Labor

**Sponsor:** Ron Marshall (R) HD 87 – Resigned from the Legislature on March 3.

HB 149 would have created distinct code for the regulation of alternative nicotine and vapor products. These products should be regulated like tobacco because the presence of nicotine, which is highly addictive and contributes to widespread youth use.

● **[HB 177: Revise tobacco, alternative nicotine, and vapor product laws \(e-cigarette tax\)](#)**

**Status:** Tabled in House Business and Labor

**Sponsor:** Frank Smith (D) HD 31

● **[HB 525: Generally revise laws relating to nicotine and vapor products](#)**

**Status:** Tabled in House Appropriations

**Sponsor:** Amy Regier (R) HD 6

**Note:** Rep. Ron Marshall of Ravalli County resigned citing tensions with big tobacco and a bill ([HB 525](#)) that would have barred sale of non-registered electronic smoking products and devices. The bill promptly died after his resignation, but nonetheless future efforts in this space will likely be easier due to his departure.

● **[HB 826: Generally revise tobacco tax laws](#)**

**Status:** Tabled in House Appropriations

**Sponsor:** Melody Cunningham (D) HD 97

HB 826 would have amended cigarette tax by increasing the current rate of \$1.70 per package of 20 cigarettes by \$1.00, bringing it to \$2.70 per package.

**Note:** Cigarette taxing is a tricky issue as it can lower smoking rates by raising costs while also generating additional state revenue. Since youth are particularly price-sensitive, the tax increase could also decrease their usage. However, increasing taxes may drive some consumers to seek cheaper alternatives, such as e-cigarettes, which currently remain untaxed in Montana.

**Note on Tobacco Taxes:** Electronic cigarettes are untaxed in Montana. A tax on vaping products might be within reach in future legislative sessions as consensus seems to be building between Republican legislators that this loophole should not exist. During the pre-session legislative forums, e-cigarette youth by use was consistently cited as one of legislators' top health concerns within their communities.

## **Environmental Health - Licensed Establishments**

● **[SB 363: Revise the definition of a tourist home](#)**

**Status:** Tabled in the House.

**Sponsor:** Daniel Zolnikov (R) SD 22

SB 363 attempted to revise the definition of tourist homes – if an owner ever stayed one night in their tourist home, then the accommodation would no longer need to be regulated. This change is arbitrary because regardless of whether an owner stays one night a year, all accommodations should provide

clean water, hygienic bedding, pest control, solid waste management etc. MEHA members were effective in tabling this bill.

● **HB 524: Remove boarding and rooming houses from definition of public accommodations**

**Status:** Tabled.

**Sponsor:** Caleb Hinkle (R) HD 68

HB 524 was introduced as a “clean-up” bill aimed at modernizing outdated terms, specifically seeking to remove “boarding and rooming houses” from the definitions of public accommodations. While MEHA agrees these terms are outdated, they remain necessary due to gaps in regulatory coverage.

Currently, few facilities are formally licensed as boarding or rooming houses. However, the definitions still serve a purpose. MEHA offered to work on an amendment that would have clarified the law to specify that facilities where someone stays **30 days or more** fall under a different regulatory category, addressing ambiguity in the law.

**Note on SB 363 and HB 524:** A key concern remains with public accommodation definitions and particularly for **tourist homes**, which are only inspected upon initial licensure and then if a complaint arises. Complaints are rare, as the public doesn’t associate tourist home health and sanitation issues with health department oversight. **MEHA has identified public accommodation definitions as an opportunity for interim work.**

● **HB 407: Create the kratom consumer protection act**

**Status:** Tabled

**Sponsor:** Nelly Nicol (R) HD 53

HB 407 aimed to regulate the sale and distribution of kratom, an addictive, herbal product that is being sold in natural and synthetic forms throughout Montana. MEHA opposed HB 407 because the sale of kratom is not allowed in licensed food establishments by the Montana Food Code since the FDA determined kratom is an unsafe food additive. Without clear regulations, registered sanitarians face difficulty in inspecting kratom within licensed establishments. From a public health standpoint, kratom needs to be regulated in ways that consider the health and safety of Montanans, not just industry interests.

## **Environmental Health – Air Quality**

● → ● **HB 291: Revise laws related to air quality standards**

**Status:** Signed by the Governor.

**Sponsor:** Greg Oblander (R) HD 38

HB 291 was introduced in response to the *Held v. Montana* ruling and prohibits Montana from implementing air quality regulations that are more stringent than federal standards.

HB 291 originally eliminated local control, which is critical because the federal Clean Air Act sets broad guidelines intended for states and localities to tailor more detailed and protective regulations based on local pollution conditions.

MEHA successfully advocated for an amendment preserving some local control. Under the amendment, local air pollution control programs may adopt stricter regulations than state or federal standards if the area is currently in non-attainment, maintenance status, or the regulation is necessary to prevent the area from falling into non-attainment. This amendment is essential for maintaining proactive local responses to air pollution challenges.

### **Environmental Health – Land Use**

#### ● **SB 532: Revise county zoning to allow accessory dwelling units**

**Status:** Transmitted to the Governor.

**Sponsor:** Forrest Mandeville (R) SD 28

SB 532 was presented as a revenue bill with platting act pieces touted as an affordable housing bill. The bill proposed an accelerated DEQ review timeline of 15 days. While not clear in the bill itself, during testimony the sponsor indicated that the intent was to construe an accessory dwelling unit as additional bedrooms which conflicts with existing statute and rules. MEHA and DEQ were able to correct the record, but this is a theme that we have seen in previous sessions and expect it will come up next session.

As originally proposed, the bill would have required a 15-day review of a developed property with existing onsite wastewater (septic) systems. MEHA suggested an amendment which would limit this expedited review timeline to only those lots which are connected to public water and wastewater systems. This amendment was incorporated successfully into the bill on the House side and DEQ was able to support the bill as amended.

#### ● **HB 180: Revise sanitation in subdivision laws related to mixing zones**

**Status:** Signed by the Governor.

**Sponsor:** Courtenay Sprunger (R) HD 7

HB 180 aimed to fix the issues from SB 275 which was vetoed in 2023. Essentially, this bill requires local boards of health to prohibit mixing zones from leaving parcel boundaries if the parcel was created after March 30, 2011. MEHA was able to work with DEQ and the sponsor to amend the bill language during drafting so that old lots wouldn't be rendered undevelopable. The bill language does allow the ability for a landowner to leave the lot if there is an easement.

MEHA supported this bill because it protects neighboring property owner rights, while allowing the ability for agreeing neighbors to enter into an agreement.

● **HB 534: Allow county water and/or sewer districts to connect to a system beyond capacity**

**Status: Signed by the Governor.**

**Sponsor:** Courtenay Sprunger (R) HD 7

This bill allows county water and sewer districts who employ or retain a professional engineer to sell capacity beyond what has physically been constructed and in operation IF they have approved development plans which reflect those additional connections. This brings eligible water and sewer districts closer to being regulated like municipal systems and allows better ability for those districts to fund the necessary improvements.

● **HB 742: Revise nuisance compliance laws**

**Status: Signed by the Governor.**

**Sponsor:** Steve Gist (R) HD 25

## **5. Preserve Public Health Authority**

● **HB 658: Revise local board of health sanitation powers and rules**

**Status:** Tabled in Senate Local Government.

**Sponsor:** J. Hinkle (R) HD 67

The intent of HB 658 was to prohibit local health departments from having septic regulations more stringent than the state. DEQ creates minimum standards, but in some areas, for example Seeley Lake where systems are contaminating the groundwater with nitrate, those minimum requirements are not protective of groundwater or public health.

HB 658 also would have made it impossible to require upgrades to septic systems for new or increased use. An overused septic system can back up into homes, onto lawns or create preferential saturated flows that are more likely to contaminate groundwater. HB 658 would have required health departments to send all the regulations and any updates to all landowners with existing septic systems, which would be a poor use of resources particularly in counties where many homes utilize onsite wastewater treatment (e.g. Flathead County).

MEHA worked incredibly hard to table HB 658.



● → ● **HB 318: Require appeal process for certain local government health requirements**

**Status: Signed by the Governor.**

**Sponsor:** Larry Brewster (R) HD 43

As amended by Confluence, HB 318 provides for an appeal to challenge instances when septic permit requirements are more stringent than state or local standards. Until an appeals process is included in local regulations, the property owner can appeal to the local governing body. This provides counties discretion in their appeal process as long as it is included in their local onsite wastewater treatment regulations. Originally, HB 318 provided for an appeal in a narrow circumstance directly to the local governing body, undermining board of health authority.

Confluence and MEHA members worked with the bill sponsor and multiple committee members. Senator Hertz ultimately suggested a revision that improved our proposed amendment.

**Note on HB 318 and HB 658:** These bills shared some similar themes – that local registered sanitarians are subjectively applying regulations and over regulating. MEHA members provided expert testimony explaining the nuances of a myriad of situations and where in rule and law their authority is prescribed. These bills were a direct response to a few constituents personal situations.

● **HB 888: Revise local board of health rules for isolation and quarantine**

**Status: Transmitted to the Governor.** Confluence submitted a veto request with 18 AMPHO members signed on.

**Sponsor:** J. Hinkle (R) HD 67

HB 888 amends MCA 50-2-116 Powers and duties of local boards of health to include:

*A local board of health may not require a person currently under an isolation or quarantine order to receive any type of vaccination, medication, supplement, or other type of drug treatment.*

Under current Montana law, local boards of health only have the legal authority to require medical treatment as allowed under MCA 50-17.

- Public health professionals do **not** diagnose or treat patients. Our role is to ensure that individuals are no longer infectious to others in the community.
- Decisions about treatment are made between an individual and their healthcare provider.
- Local boards of health may require that a sick individual is no longer contagious before being released from isolation for certain infectious diseases like pertussis or measles.
- MCA 50-17 addresses tuberculosis control, which is the rare circumstance in which treatment is the only way to ensure someone is no longer infectious. MCA 50-17 includes legal due process that protects individual rights.

HB 888 introduces legal clutter and undermines public trust in Montana's public health professionals, who serve all 56 counties in alignment with state law and professional ethics.

## **6. Advocate for Behavioral Health Prevention**

Confluence prioritized behavioral health prevention because of the prevalence of behavioral health within local public health community health assessments and community health improvement plans as well as to continue engaging with the work done by the Behavioral Health System for Future Generations. However, capacity inhibited Confluence's ability to engage.

### **SB 369: strengthen suicide prevention efforts in schools**

**Status:** Signed by the Governor

**Sponsor:** Mike Yakawich (R) SD 24

SB 369 requires the Office of Public Instruction to ensure low-cost, no-cost options for youth suicide awareness and prevention training for schools and requires training for certain OPI employees.

## **Interim Study Bills**

### **SJ 11: Interim study on farmer's markets and food systems**

**Sponsor:** Bruce Gillespie (R) SD 9

### **SJ 48: Interim Study of the Public Health and Safety Impacts of Marijuana Legalization**

**Sponsor:** Mike Yakawich (R) SD 24

### **SJ 49: Interim Study of Youth and Family Behavioral Health Prevention**

**Sponsor:** Mike Yakawich (R) SD 24

### **HJ 28: Interim study to identify and improve access to federal grant opportunities for the state of Montana, tribal governments, and local government entities**

**Sponsor:** Luke Muszkiewicz (D) HD 79

### **SJ 37: Interim survey of behavioral health services in Montana**

**Sponsor:** Denis Lenz (R) SD 25

### **SJ 13: Study resolution for emergency medical services**

**Sponsor:** John Fuller (R) SD 4