Approved: March 24, 2016

MINUTES OF THE HOUSE HEALTH AND HUMAN SERVICES COMMITTEE

The meeting was called to order by Chairperson Daniel Hawkins at 1:30pm on Thursday, March 03, 2016, 546-S of the Capitol.

All members were present except:

Representative Willie Dove – Excused Representative Jim Ward – Excused Representative John Wilson – Excused Representative Scott Schwab – Excused Representative Brett Hildabrand – Excused

Committee staff present:

James Fisher, Legislative Research Department Renae Hansen, Kansas Legislative Committee Assistant Erica Haas, Legislative Research Department Eileen Ma, Office of Revisor of Statutes Renae Jeffries. Office of Revisor of Statutes

Conferees appearing before the Committee:

Merilyn Douglass, APRN
Monica Scheibmeir, Dean School of Nursing, Washburn University
Michelle Knowles, APRN
Michael Southern, APRN
Jayme Applebee, APRN
Karen Trees, APRN
Betty Smith Campbell

Others in attendance:

See Attached List

There were 34 in the audience including those that signed the guest register.

Informational Hearing:

The Advanced Practice Nurses Association presented an informational hearing on the Nurse Practitioners in the state of Kansas (Attachment 1).

Merilyn Douglass, APRN, Family Nurse Practitioner; President, Kansas Advanced Practice Nurses Association, (Attachment 2) introduced the presentation to the committee. She noted that the nurses practice is unique in that it emphasizes wellness and prevention of illness.

Monica Scheibmeir, Dean School of Nursing, Washburn University, (Attachment 3), spoke to the committee about the qualifications for becoming a nurse practitioner. She noted that the movement

CONTINUATION SHEET

MINUTES of the Committee on Health and Human Services at 1:30pm on Thursday, March 03, 2016 in Room 546-S of the Capitol.

throughout the nation is for the nurse practitioner instead of getting a masters in graduate work, to get a doctorate in nursing. She noted that the APRN students are admitted to a specialty option and this is their defined practice area. They do not have an all-inclusive area of practice like physicians. For the nurse practitioners who are entering into the doctoral NP programs, they will have over 1000 hours of training above and beyond what they received in their undergraduate nursing program in addition to their work clinical experience.

Michelle Knowles, APRN, Family Nurse Practitioner, (Attachment 4), spoke to the committee about how Nurse Practitioners help bridge the gap between loss of physicians in the rural and under-served areas of Kansas. She noted that current law requires the Nurse Practitioners to be tied to a Medical Doctor. She commented that a large part of Kansas is more like the frontier states of the western United States. She noted that Colorado, Nevada, New Mexico, and Wyoming take many of our APRN's.

Michael Southern, APRN, Psychiatric Nurse Practitioner, (Attachment 5), spoke to the committee about the mental health care shortages in the rural areas. He noted that the physician agreement has to be signed on a yearly basis. Currently there is only one psychiatrist that serves southwestern Kansas, serving 13 counties and serves 4 offices of Community Mental Health.

Jayme Applebee, APRN, Family Nurse Practitioner, (Attachment 6), spoke to the committee about her practice in Liberal Kansas. She noted that the 8 nurse practitioners in Liberal serve 50% of the clients in the area. She noted that if her current collaborating physician retires, she would be without a tie that allows her to continue to practice.

Karen Trees, APRN, NP, Family & Women's Health, (Attachment 7), spoke to the committee about the gap that nurse practitioners can make in the health care crisis in our rural and under served areas. She noted that we have changed the way that we look and talk about health care professionals. She noted that her business pays taxes, and provides jobs to others. She commented that a lot of patients are shifting to Nurse Practitioners because they are wanting relationships with their health care providers. She further stated that we must remove barriers and look to creative measures to care for the next generation.

Betty Smith Campbell, (Attachment 8), spoke to the committee from the view point of the patient, one who sees a Nurse Practitioner as her health care professional.

Merilyn Douglass, APRN, gave the committee a summary of the presentation and re-iterated their need to be more autonomous (Attachment 9).

Included with the testimony are:

- Duke study on the economic benefit of less restrictive regulation of advance practice registered Nurses (Attachment 10).
- Policy perspectives on competition and the regulation of advanced practice nurses provided by

Unless specifically noted, the individual remarks recorded herein have not been transcribed verbatim. Individual remarks as reported herein have not been submitted to the individuals appearing before the committee for editing or corrections.

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the Federal Trade Commission (Attachment 11)

Questions were asked and comments made by Representatives: John Edmonds, Les Osterman, Dick Jones, Dan Hawkins, John Whitmer, and Jim Kelly.

It was noted that all health care professionals have a place in health care providing and that each professional stay within the scope of practice for their professional practice, referring to others when necessary. It was stated that we need a regulation that addresses the current state of education for the medical professional. It was noted that nursing is always about the patient and allowing full state of authority will allow them to practice to their full potential and education level.

The next meeting is scheduled for Monday March 7, 2016.

The meeting was adjourned at 2:59 PM.