

Approved 2-2-1984
Date sh

MINUTES OF THE HOUSE COMMITTEE ON PUBLIC HEALTH AND WELFARE

The meeting was called to order by Marvin Littlejohn at
Chairperson

1:30 a.m./p.m. on January 31, 1984 in room 423-S of the Capitol.

All members were present except:

Representative Joan Wagnon, excused

Committee staff present:

Emalene Correll, Research
Bill Wolff, Research
Norm Furse, Revisor
Sue Hill, Secretary to Committee

Conferees appearing before the committee:

Commissioner Bob Barnum, Youth Services/ SRS
Allan Hurlburt, Legal Council for Youth Services/ SRS
Dr. Joe Hollowell, Kansas Department of Health and Environment
Melissa Hungerford, Kansas Hospital Association

(Attachment No. 1.), for visitor's register.

Chairman called meeting to order, stating hearings this date on
HB 2091, HB 2098, HB 2510.

Hearings on HB 2091:

Commissioner Bob Barnum spoke to committee in that SRS has been delegat-
ed the responsibility to assure that no child is brought, caused to be
brought or sent across state lines for the purpose of adoption without
the prior approval of the receiving state. This language is contained
in KSA 38-1201. He stated further, the thrust is to protect children.
It still will allow adoption, private adoptions within Kansas, and still
allow out of state adoptions, but require that they go through a child
placing agency who abides by and complies by the laws of the Interstate
Compact Act. (See Attachment No. 2.) for further details.

Mr. Barnum and Mr. Hurlburt both answered extensive questioning from
committee, i.e., does this preclude non-resident private adoptions,
how does it affect persons in military adopting, how does this bill
compare with what other states have in force, cost factors, etc.

Hearings closed on HB 2091.

Hearings began on HB 2098:

Commissioner Barnum spoke to this issue, distributing (Attachment No. 3.)
and (Attachment No. 4.), details therein. Basic request he said is
to insert in Section K.S.A. 65-509 a clause prohibiting individuals from
advertising for children to adopt in any form of news media. Mr. Barnum
and Mr. Hurlburt then answered extensive questioning from committee and
staff, i.e. how this will address surrogate mother situations, certain
parts, lines 31/32 are redundant, so will be eliminated, and other
questions.

Dr. Joseph Hollowell then spoke to HB 2098, stating the Department of
Health and Environment support these changes as recommended.

Hearings closed on HB 2098.

CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON PUBLIC HEALTH AND WELFARE,
room 423-S, Statehouse, at 1:30 ~~a.m.~~/p.m. on January 31, 1984

Staff was requested to prepare a summary on Inter-State Compact Act that is 38-1202 in statutes.

Staff also requested to research the impact the language in HB 2098 would have on surrogate mothers.

Hearings began on HB 2510:

Dr. Joseph Hollowell spoke to the establishment of criteria for classification of hospitals handling critical care, i.e., trauma, neo-natal care, spinal injury, burn centers, etc. (See Attachment No.5.) for details.

Once standards are met, the hospitals would be classified and marked so the public could be aware visibly where these defined centers exist. He then answered questions from committee, i.e., costs involved, the open end regulations yet to be set, and does not the professional community already know where specialized treatments can be done, etc. Dr. Hollowell firmly stated he felt the trauma centers needed to be marked.

Frank Gentry, former President of Ks. Hospital Association introduced their spokeswoman, Melissa Hungerford. Ms. Hungerford stated their Association fails to see the need for certification of hospitals being asked for by SRS, and recommends that no action be taken on this bill. Their views have not changed since their testimony on it last year. They question regulations still not defined, how same standards could apply for urban and rural areas. Ms. Hungerford then answered questions from staff and committee. (See Attachment No.6.) for details.

Hearings on HB 2510 closed.

Meeting adjourned at 2:30 p.m.

Date: 1-31-84

GUEST REGISTER

HOUSE

Please Print

PUBLIC HEALTH AND WELFARE

NAME	ORGANIZATION	ADDRESS
Keith Landis	ACCIT	271 Perry KS
KEITH R LANDIS	CHRISTIAN SCIENCE COMMITTEE ON PUBLICATION FOR KANSAS	TOPEKA
Frank L. Gentry	Ks Hospital Assoc	"
Melissa Hungerford	Ks Hospital Assoc	"
Patricia Whetzel	Decatur County	Oberlin Ks.
Tracy Whetzel	" "	" "
Mildred Galds	" "	" "
Sicki Sigmund	" "	" "
Joe Hollowell	KDHE	Topeka
Allan L. Hurkurt	SRS Legal	Topeka
Boo Baker	Youth - Service	Topeka
Robert Fisher	Wichita East-Beacon	Wichita
Bob Barmann	SRS YOUTH SVC	TOPEKA
Ruth Groves	KECY	Topeka

Attn #1.
1-31-1984

STATE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

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1-31-84

Statement Regarding House Bill 2091

1. Title of Bill:

An Act relating to the probate code; concerning venue of proceeding for adoption of children; amending K.S.A. 59-2203 and repealing the existing section.

2. Purpose of Bill:

To eliminate the possibility of out of state residents filing adoption petitions in Kansas to avoid complying with the laws of their state.

3. Why the Bill:

SRS has been delegated the responsibility of assuring that "no child is sent, brought or caused to be brought across state lines for the purpose of adoption without the prior approval of the receiving state (KSA 38-1201). SRS cannot enforce that statute when unlicensed intermediaries or families ignore the Interstate Compact on Placement of Children and file in Kansas courts without other states approval.

Requiring that families file adoption petitions in their county of residence will give assurance that the families are not breaking the laws of the state of residence. It will also give better protection to children as the courts will be in a position to evaluate the families ability to care for the child and obtain medical history for the child.

4. Background of the Bill

Kansas laws concerning adoption of children permit private adoptions. There are no prohibitions concerning unlicensed intermediaries. Many states have passed adoption laws which prohibit private adoptions or prohibit unlicensed intermediaries from placing the children. As a result, out of state families or their intermediaries are arranging for unmarried mothers to come to Kansas to deliver their children. Other out of state families offer to reimburse Kansas girls for their medical and other expenses; if they consent to the adoption. Once the families return to their home states, it often is impossible to obtain genetic history on the child or an adoptive home study on the family. The states which prohibit private or intermediary adoptions consider that the provision of such reports aid families in violating their state's laws. This leaves the children and families at risk, as there is no medical history for the children, no assurance of the families suitability and concern over the legality of the adoption.

5. Possible Problems with the Bill:

No problems are anticipated.

6. SRS Recommendation:

Youth Services recommends full SRS support.

Robert C. Harder, Secretary
Office of the Secretary
Social and Rehabilitation Services
296-3271
1-31-84

Attn. #2
1-31-1984

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1-31-4

STATE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

House Bill No. 2098

1. Short Title of Bill:

An act relating to the disposition of children; amending K.S.A. 65-509 and repealing the existing section.

2. Problem:

Insert in Section of K.S.A. 65-509 a clause prohibiting individuals from advertising for children to adopt in any form of news media.

3. Background of the Bill:

With increased frequency individuals or attorneys representing clients who wish to adopt are running advertisements in newspapers, weekly shoppers and periodicals seeking parents who want to place their children for adoption. Most advertisements are directed toward unmarried mothers who may be vulnerable to exploitation. For the most part the advertisements are placed by individuals residing in states where non-agency adoptions are illegal.

4. Rationale for Support of Legislation:

The practice of advertising for children to adopt encourages the "trafficking" and "marketing" of children across state lines and increases the potential of individuals profiting from the adoption. There is no way for the parent, who may be acting in good faith, to make a determination on whether this is simply a family wanting a child or a front for an illegal operation. Seeking children from states such as Kansas where non-agency adoptions are legal aids families in circumventing the laws of their own state.

Such advertisements tend to entice the parents who feel they are in a particularly desperate situation. Seldom are parents offered any counseling around the relinquishment of their child or given the opportunity to explore alternative plans.

Robert C. Harder, Secretary
Office of the Secretary
Social and Rehabilitation Services
296-3271
January 31, 1984

2502E

*Attn #3
1-31-1984*

HOUSE BILL No. 2098

By Committee on Public Health and Welfare

(By request)

1-25

Attn. #4
1-31-84

Attn. #4
1-31-1984

0018 AN ACT relating to the disposition of children; amending K.S.A.
0019 65-509 and repealing the existing section.

0020 *Be it enacted by the Legislature of the State of Kansas:*

0021 Section 1. K.S.A. 65-509 is hereby amended to read as fol-
0022 lows: 65-509. No person, firm, corporation or association shall,

0023 *except those licensed as child placing agencies as authorized by*
0024 *law, shall promote by any form of news media or public dis-*

0025 *semination or offer to adopt, find a home for, or in any manner*
0026 ~~offer to dispose of or offer to take possession of any child as an~~

0027 inducement to a woman to come to his or its place during
0028 pregnancy, or at, or after delivery; or shall offer such as an

0029 inducement to any parent, guardian or custodian of an infant or
0030 child to place such infant or child in his or its home, institution or

0031 establishment ~~either before or after the birth of a child. Any~~
0032 ~~such violation shall be prosecuted as provided in K.S.A. 65-515.~~

0033 Sec. 2. K.S.A. 65-509 is hereby repealed.

0034 Sec. 3. This act shall take effect and be in force from and
0035 after its publication in the statute book.

Add: "either before or after the birth of a child"

Delete

Delete

Attn. #4

#5
1-31-84

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT

TESTIMONY ON HB 2510

PRESENTED JANUARY 31, 1984 TO THE HOUSE OF PUBLIC HEALTH AND WELFARE COMMITTEE
By Joseph Hollowell, M.D.

This is the official position taken by the Kansas Department of Health and Environment on HB 2510:

BACKGROUND INFORMATION:

Establishment of criteria for classification of hospitals was accomplished by KDHE over two years ago. The establishment process included significant input from physicians around the state as well as from the Kansas Hospital Association. Public hearings were held on the critical care areas described in the bill. These criteria were developed by national professional organizations and modified for Kansas needs. The criteria identify staffing, equipment and operating requirements for a hospital to operate as a critical care center.

STRENGTHS:

The bill would provide for verification of hospital capabilities prior to certification as a critical care center, thus offering a clear method of communicating to the public about the levels and standards of care to be expected in a given facility.

WEAKNESSES:

The bill does not limit the number of hospitals that can be certified, but permits the certification of any number of hospitals which meet the requirements. This may encourage hospitals to develop capabilities beyond existing or anticipated needs. We believe the current marketplace will limit this expansion.

DEPARTMENT'S POSITION:

The department supports this legislation.

H.H. 5



#6
1-31-84

Donald A. Wilson
President

KANSAS HOSPITAL ASSOCIATION
TESTIMONY
HOUSE BILL 2510

January 31, 1984

The Kansas Hospital Association understands the intent of certifying high-level emergency medical services, but questions the need for another level of certification. In the instance of an emergency of this nature, the responding EMS team will still need to take the patient to the nearest emergency room for stabilization. It is the physician's responsibility to assess the needs of the patient, and if transfer is necessary, prepare the patient for an extended travel experience.

Hospitals are already certified by the state, Medicare and/or JCAH for various services and overall licensure. We fail to see the need for another certification process. We also find it difficult to understand how so specific a set of criteria can be applied to both urban and rural facilities.

The Kansas Hospital Association would recommend that no action be taken on this bill without further study of the impact of such a process on the general safety of emergency patients.

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