

Approved \_\_\_\_\_ Date 1-27-87

MINUTES OF THE HOUSE COMMITTEE ON \_\_\_\_\_ PUBLIC HEALTH AND WELFARE \_\_\_\_\_

The meeting was called to order by Marvin L. Littlejohn at \_\_\_\_\_  
Chairperson

1:30 a.m./p.m. on January 22, 1987 in room 423-S of the Capitol.

All members were present except:

Representative Cribbs, absent.

Committee staff present:

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

Conferees appearing before the committee:

Representative Elaine Hassler  
Representative Frank Buehler  
Emalene Correll, Research Department

When quorum was present, chairman called meeting to order at 1:30 p.m.

Chair announced that Dr. Harder had informed him that the color flip-chart was now available, and if members of this committee wished, he would be happy to give his presentation again with these visuals since some said they missed the color charts. Consensus of committee was thanks-----but no thanks-----.

Chair invited Representative Hassler to give comments about the National Conference of State Legislators Seminar she attended this summer.

Representative Elaine Hassler stated she would comment on items studied at Seminar, i.e., Welfare Reform Proposals for the National level, AIDS, Integration, Drug Abuse Programs, and Long Term Care Policies.

It was determined that jobs, (work), education are needed to keep people out of the Welfare trap. Families need to be kept together and perhaps supplemental day care is a way of helping in this area. There will be some new support levels, perhaps transportation is one of them, in order people may be able to get to work place to earn the income to provide for their family. Education for basic skills is also vital. Several conclusions arrived at by trying to keep families together more than present welfare law allows, and from this conclusion, other points were determined, i.e., keep family stability, work/educational training, transition from being a welfare client to becoming independent of the welfare system, help with food services, and minor single parents. In regard to the single parent who is a minor, it was felt that if families of this minor are able to help financially, then the minor single parent would not be eligible for welfare dollars.

Drug programs are being financed with big money from the Corporate sector. There is to be more emphasis on punishing the trafficker of drugs than the user, and it is felt this will help in the war against drug abuse. Findings show expelling students for drug abuse doesn't solve the problem.

AIDS programs indicate there is no big break-through. It may be 5 more years before a vaccine or other (cure) is available. It was stressed that everyday living does not spread AIDS. It cannot be transmitted through non-sexual contact.

Long Term Care studies spoke to catastrophic care of elderly, and will need funding made available since the number of elderly is increasing along with the cost of health care. Incentives for savings for catastrophic care were discussed, i.e., tax credits perhaps, or tax benefits to employers.

Representative Hassler concluded her comments saying there was a multitude of ideas coming out of this seminar.

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 22, 1987

Representative Frank Buehler was invited by Chair to make comments on the Conference he attended this summer.

Representative Buehler stated he served on a Task Force on Health Care at the Mid-West Conference of State Legislators. It was very interesting and many topics were covered, i.e., Organ Donations, Long Term Care for Elderly, Drug Abuse. Meetings were held in Indiana and Florida and one more to be held Mid-February in St. Louis.

Long Term Care for Elderly studies show many persons have insurance benefits terminate after their employment retirement since many do not pick up policies to self-insure themselves. This is creating a huge problem for state and federal programs, and needs to be addressed. We could possibly explore tax breaks, form risk pools for those who are uninsured, try to maximize health care dollars. He spoke to the crisis in health care for rural areas today. Many who are suffering depressed income do not seek needed health care when they need it, and when they finally do the costs are much higher than had they been cared for earlier. Many are too embarrassed to ask for help with health care.

A good definition of the Indigent would help when preparing health care programs. Perhaps some discounts for health care could be provided as is currently being done in other states.

Discussions on drug abuse indicates there is abuse everywhere. There is NO place that is free of this current problem. He said they learned of prescription pad theft, and some states feel that pharmacists might have to check all prescriptions to see they have been legally ordered by physicians. Alcohol abuse is considered a part of drug abuse problem. Studies show to expel or suspend students from school because of drug abuse is THE thing to do, and does help curtail abuse. There is need for TEETH in the law to stop dealers and traffickers. He discussed drug testing, and the complex problems in regard to civil liberties because of testing. Drug abuse is a huge problem for our economics because of loss of man hours. He concluded comments.

Chair invited Emalene Correll to give remainder of her comments on Report of Interim Proposals of the Special Committee on Public Health and Welfare. (Ms. Correll was unable to complete her report on January 15, 1987).

Ms. Correll spoke to the proposal that was requested by Special Committee to look into how to increase Residential Facilities for the Mentally Retarded. Conclusions of the report, i.e., they supported a single waiting list for community services, with potential clients to be admitted to community programs on basis of appropriateness of service and position on the waiting list. Further, even as cut backs cause state resources to be limited, the need to expand state financial support for community services for the mentally retarded is vital. The committee also concluded the authority to increase county mill levies should be made available to those counties that choose to increase support of community residential services. They also concluded the method of allocating state financial assistance to community programs developed by Chapter 245, 1986 Law of Kansas should be clarified and continued.

This Special Committee believes no new vocational programs serving mentally retarded, nor any expansion in existing programs should be licensed or approved by the SRS until the community program includes residential services. Nor should such programs be eligible for state financial assistance unless the program includes one or more levels of residential service. Further, they request review for construction funding for residential facilities submitted by community programs for mentally retarded to the Joint Committee. In conclusion, she reported the Special Committee recommends consideration be given to expanding state funding for community mental retardation programs even though increased funding in 1987 will be difficult.

Meeting adjourned at 2:48 p.m.