

Approved 3/16/87
Date

MINUTES OF THE SENATE COMMITTEE ON PUBLIC HEALTH AND WELFARE

The meeting was called to order by SENATOR ROY M. EHRLICH at
Chairperson

10:00 a.m./p.m. on March 3, 1987 in room 526-S of the Capitol.

All members were present except:

Committee staff present:

Emalene Correll, Legislative Research
Bill Wolff, Legislative Research
Norman Furse, Revisor of Statutes Office
Clarene Wilms, Committee Secretary

Conferees appearing before the committee:

E. W. (Dub) Rakestraw, Legislative Chairperson, Association of Community Health Centers
of Kansas
Rita Wolf for Jack D. Walker, M.D., Secretary, Kansas Department of Health & Environment
Thomas R. Coleman, Ph.D., President, Kansas Psychological Association
Mary Ann Gabel, Executive Secretary, Behavioral Sciences Regulatory Board
Clyde L. Rousey, Ph.D., President, Kansas Association of Professional Psychologists
Dwight L. Young, M.D., President, Kansas Organization of Professional Psychologists
Written testimony, Gerald T. Hanna, Ph.D., Commissioner, SRS
Letter to Coordinating Council concerning SB-33
Written testimony, Dr. Lois Scibetta, Executive Administrator, Kansas State Board of
Nursing, SB-300
Written testimony, Raymond W. Morrison, President, Kansas Association of Human Services
Technologies, SB-300
Written testimony, Lila Pasley, The Association for Retarded Citizens of Kansas, Inc.
SB-301
Written testimony, Kathy Johnson, Families Together, Inc., SB-301
Written testimony, Marla Mack, Council on Early Childhood Developmental Services, SB-301

Others attending: see attached list

The minutes for February 23, 24, 25, and 26 were presented for approval or correction.
Senator Morris moved adoption of the minutes. Senator Kerr seconded the motion. The
motion carried.

E. W. (Dub) Rakestraw presented written testimony and appeared before the committee as a
proponent for SB-288. Mr. Rakestraw stated that the public could best be served by
registering masters level psychologists. It was also stated that these providers have
been known as masters level psychologists and to title them anything else would create
public confusion. (attachment 1)

Rita Wolf testified and presented written testimony for Jack D. Walker, Secretary, KDHE
on SB-288. Ms. Wolf stated that this group had fulfilled the criteria and it was con-
cluded that the need for credentialing of psychologists at the master's degree level
does exist in Kansas. Registration was recommended as the appropriate level of
credentialing. (attachment 2)

Thomas R. Coleman, Ph.D. testified and presented written testimony on SB-288. Dr. Coleman
stated the Kansas Psychological Association supported the idea of statutory regulation of
professions but voiced strong objections to the use of the title "Registered Masters
Level Psychologist" stating the title should be reserved for those with doctoral degrees.
(attachment 3)

Mary Ann Gabel testified and presented written testimony on SB-288. Ms. Gabel stated
the board did not take a position on this bill, but concerns regarding this bill are
listed in attachment 4.

Clyde L. Rousey, Ph.D. testified and presented written testimony concerning SB-288. Dr.
Rousey stated that this legislation would promote consumer confusion by using the title
requested and would further legitimize the high cost of mental health care administered
by SRS. (attachment 5)

CONTINUATION SHEET

MINUTES OF THE SENATE COMMITTEE ON PUBLIC HEALTH AND WELFARE,

room 526-S, Statehouse, at 10:00 ~~a.m.~~ ^{p.m.} on March 3, 1987

Dwight Young testified and presented written testimony in support of SB-288. Mr. Young stated that registration of Masters Level Psychologists will result in the regulation of the only major provider group in the mental health centers which are not now regulated. (attachment 6) Mr. Young presented a letter from Gerald T. Hannah, Ph.D., Commissioner, SRS stating support of registration of masters level psychologists but which expressed concern about the considered title change. (attachment 7)

The committee was presented with a copy of the letter sent to the Coordinating Council by the chairman, requesting an interium study on SB-33. (attachment 8)

Written testimony by Dr. Lois R. Scibetta in support of SB-300 was presented to the committee. Dr. Scibetta stated the changes in SB-300 are essential and will allow the board of nursing to define unprofessional conduct by rules and regulations. (attachment 9)

Written testimony by Raymond H. Morrison, President, KAHST was presented to the committee recommending passage of SB-300. Mr. Morrison urged that the board of nursing be empowered to set and enforce meaningful standards. (attachment 10)

Written testimony was presented to the committee by Lila Paslay in support of SB-301. Ms. Pasley stated that The Association for Retarded Citizens of Kansas, Inc. believe this bill will provide protection of the rights of families. (attachment 11)

Kathy Johnson presented written testimony in support of SB-301. Ms. Johnson stated this bill will provide necessary information so that all children born with a disability can receive vital services when they are most needed. (attachment 12)

Marla Mack presented written testimony in support of SB-301. Ms. Mack stated early identification of handicaps in Kansas is inadequate, thus SB-301 would allow adequate services and planning for our children. (attachment 13)

The chairman announced that final action on SB-113 would be addressed tomorrow, March 4, 1987. The subcommittee report on SB-78 will also be presented to the committee at the next meeting, March 4, 1987, 10 a.m., in room 526-S. Following action on SB-113 and the report on SB-78 the committee will return to the published agenda.

The meeting adjourned at 10:55 a.m.

SENATE
PUBLIC HEALTH AND WELFARE COMMITTEE

DATE 3-3-87

(PLEASE PRINT)
NAME AND ADDRESS

ORGANIZATION

Ron Hein

Ks. Org. of Prof. Psychologists

Paul M. Klotz

ASSOC OF CMHCs OF Ks.

Rebecca Crosshaw

Ks. Org. of Prof. Psychs.

Dwight Young

Kansas Organization of Prof. Psys.
ASSN. of CMHC

Elizabeth C. Taylor

Ks. Assoc. of Prof. Psychologists
Ks. Assn. for the Education of Prof. Psychs.

Raymond V. Morrison

Ks. Assn. of Human Services
Technologists

Dr. Lois R. Sibbitt

Ks. St. Bd. of Nursing
557 Lauder Blvd - 66001 Topeka

Charles V. Hamm

Kans. Dept. of Health & Environment

Gerald Anderson Topeka

USA

Sharon Young

Kansas NARAL

Sharon Russell Coffeyville

4 City Mental Health Center

Wileen Stephen

KACD

Jacquie Jakes

KACD

Allyce Conroy

Ks. Assn. Prof. Psychologists

Don Coleman

Ks. Psychological Assoc.

John Peterson

Ks. Assn. of Prof. Psychologists

Lucille Paden

KSDE

Judy Miller

Interagency Coordinating Council

RAY PETTY

KACEH/DHR TOPEKA

Patricia Schloesser

Kans. Dept. Health & Environment

SENATE
PUBLIC HEALTH AND WELFARE COMMITTEE

DATE 3-9-87

(PLEASE PRINT)
NAME AND ADDRESS

ORGANIZATION

KATH R LANDIS	TOPEKA	CHRISTIAN SCIENCE COMMITTEE ON PUBLICATION FOR KANSAS
Michael L. O'Dell MD	Kansas City	Kansas Academy of Family Physicians
LINDA McGill	TOPEKA	KS ASSN. OF NURSE ANESTHETISTS
Kathy Johnson	Topoka	Parent
Lila Paslay	Topoka	Assn Retarded Citizens Ks.
Ann Allsbury	Topoka	KDHE
JERRY SWANSON	TOPEKA	KS KS MEDICAL SOCIETY
Gretchen Storey		Ks Div. of Budget
Andrea Letario		KS Hospital Assoc.
Rita Dell		City Board's Office
Mary Ann Gabel		BSRB
Clara J. Wolf		KDHE
Ozzie Young		KDHE
W. J. Lane		KU Clinical Psychologist
Gary Robbins		Ks Optometric Assn
Charlene Abbott		Ks. Board Healing Arts
John A. Myers		Ks. Association of Prof. Psychologists

SENATE
PUBLIC HEALTH AND WELFARE COMMITTEE

DATE 3-3-87

(PLEASE PRINT)
NAME AND ADDRESS

ORGANIZATION

Larry Banning - Topeka

Sch of Healing Arts



Association of Community

Mental Health Centers of Kansas

835 S.W. Topeka Ave., Suite B/Topeka, Kansas 66612/913 234-4773

Paul M. Klotz, Executive Director

Testimony Provided to Senate Public Health & Welfare Committee

March 3, 1987

Re: SB 288

Mr. Chairman and honorable members of the committee, I extend my sincere appreciation for this opportunity to testify before the committee on SB 288.

I am here representing the Association of Community Mental Health Centers of Kansas. The 31 licensed mental health centers serve all 105 counties in Kansas.

The Association requested SB 288 because we are the primary employers of masters level psychologists. The great majority of our psychologists are masters degree level clinicians. Although its not a very recent survey, the last one done indicated that 73% of the psychologists in community mental health centers and in 16 state institutions were masters level professionals.

I wish to call your attention to three particular factors. First, Masters Level Psychologists have gone through the health care credentialing process. Subsequently, the Technical Review Committee, the State Health Coordinating Council, and the Secretary of the Kansas Department of Health and Environment all have concluded that the public could best be served by registering masters level psychologists.

Secondly, I would note that SB 288 would only register masters level psychologists who are employed in community mental health centers, state institutions, other governmental entities and educational institutions. Thus, it does not add providers to the private practice sector.

Finally, I would ask that you support the bill as written. The community mental health centers feel it is extremely important that the title registered masters level psychologist be the designated title.

For decades, these providers have been known as masters level psychologists. That is typically the job title under which they are employed in community mental health centers and as Psychologist I in state institutions. It is the title by which they have become known statewide. The schools, courts, SRS agencies, etc., have historically known them as masters level psychologists. To title them as anything else or less than that results in

Dwight Young
President

Paul Thomas
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Steven J. Solomon
Secretary

John Randolph
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Gene Jacks
Bd. Memb. at Large

Larry W. Nikkel
Past President

SPK/W
3-3-87
attachment 1

their disenfranchisement from the profession of psychology and will surely create public confusion about who this very significant provider group is.

I again share my sense of appreciation for this opportunity to comment and hope you will support SB 288 as written.

A handwritten signature in black ink, appearing to read "E.W. Rakestraw", with a stylized flourish at the end.

E.W. (Dub) Rakestraw,
Legislative Chairperson
A.C.M.H.C.K.

EWR:vas

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT

TESTIMONY ON SENATE BILL #288

PRESENTED TO SENATE PUBLIC HEALTH AND WELFARE COMMITTEE, MARCH 3, 1987

This is the official position taken by the Kansas Department of Health and Environment on S.B. #288.

Background Information:

In 1983, the Kansas Department of Health and Environment (KDHE) received a credentialing application from the Kansas Organization of Professional Psychologists to be taken through the credentialing review process (K.S.A. 65-5001 et seq.). The credentialing application requests the state of Kansas to license the practice of master's degree level psychologists. The functions of the master's degree level psychologist include: psychotherapy; marriage counseling and family therapy; administration, interpretation and formal write-up of psychological evaluations; consultation; and education.

The application has been reviewed by a seven member technical committee, the Statewide Health Coordinating Council (SHCC) and former KDHE Secretary Barbara Sabol. The end product of the credentialing review program is a final report by the KDHE Secretary specifying facts and findings on whether the three statutory criteria are met, recommendations on whether a group should be credentialed and if so, what measures are appropriate to protect the public.

The final report specified that the technical committee, SHCC, and KDHE Secretary found that:

- The applicant has met statutory Criterion 1 of the need for credentialing by demonstrating "that the unregulated practice of psychologists at the master's degree level can harm or endanger the health, safety, or welfare of the public" and that "the potential for such harm is recognizable and not remote."
- The applicant has met statutory Criterion 2 of the need for credentialing by demonstrating that "psychologists at the master's degree level require specialized skills and training," and "they provide the public with the assurance of the initial and continuing ability necessary for the practice of the master's degree level psychologist."
- The applicant has met statutory Criterion 3 of the need for credentialing by demonstrating that "no other means other than credentialing exists to protect the public from harm by the practice of psychologists at the master's degree level."
- Because all three criteria for the need for credentialing have been met according to the statutes, it is concluded that the need for credentialing of psychologists at the master's degree level does exist in Kansas.

SPH&W
3-3-87
attachment 2

Registration is recommended as the appropriate level of credentialing of psychologists at the master's degree level since the public can be protected by identifying practitioners who are under the supervision of a particular agency and who poses certain minimum educational/training skills.

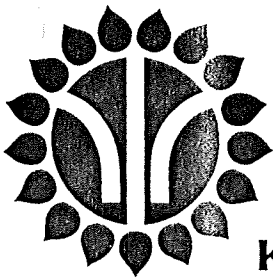
Former Secretary Barbara Sabol noted in the final report to the Legislature that "master's level psychologist" may not be the proper title for the profession due to the connotation of the word "master." Currently, most Ph.D. psychologists must be licensed by the State to practice.

Department's Position:

KDHE supports the provisions of Senate Bill #288 which provide for the registration of psychologists at the master's degree level by the State Behavioral Sciences Regulatory Board.

Presented for: Jack D. Walker, M.D., Secretary
Kansas Department of Health and Environment

HP/X13



KANSAS PSYCHOLOGICAL ASSOCIATION

1986-87 Board of Governors

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President
Manhattan, KS

March 3, 1987

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Terry J. Pfannenstiel, M.S.
Region VI Representative
Manhattan, KS

Dean H. Kerkman, Ph.D.
Executive Officer
Lawrence, KS

Thank you for the opportunity to give testimony on Senate Bill 288. I am Thomas R. Coleman, Ph.D. I am Director of the Mental health Section of Lafene Health Center at Kansas State University and I also maintain a private psychology practice in Manhattan. I am President of the Kansas Psychological Association and I am here to represent the views of that organization.

The Kansas Psychological Association strongly supports the idea of statutory regulation of professions to insure the protection of the public from unqualified or unethical providers. We are aware that this bill grows out of a need to provide regulation and standards for a group of providers of psychological services who work within various state and municipal agencies and who hold masters degrees in psychology. We are supportive of many of the major components of Senate Bill 288. However, we have strong objections to the use of the title Registered Masters Level Psychologist and feel that the use of this title is confusing, misleading and inappropriate and thus is a disservice to the public.

The title psychologist should be reserved for those who have the doctoral degree and state law recognizes this in the statute which licenses psychologists and defines the practice of psychology. It is recognized that in other fields there are professionals who do not receive the maximum training to allow full privilege to practice in their fields, yet they can provide services which are often provided by those who have those full privileges. These professionals are distinguished from their fully trained colleagues by their titles, and there is no room question. For example physicians assistants and nurse clinicians are clearly distinguished from physicians, and, in some states, paralegals are registered as such and the title is clearly distinguishable to the public as being different from that of attorney. To use the title of psychologist as outlined in the Bill fails to distinguish between those who are fully credentialed to practice independently as psychologists from those who are not, which certainly is misleading to the public.

March 3, 1987

There is another aspect in the use of the title, as specified in this Bill, which would certainly be confusing to the consumer. In many fields the term Master is used to distinguish those who have reached the highest level of training and expertise from those who have not. Those who are not familiar with academic degrees can very easily confuse the term Masters Level which denotes less than full training, with the common definition which denotes ability of the highest rank. The consumer, who already has a difficult time distinguishing between a psychologist and a psychiatrist, will be even more tested by trying to decide what difference exists between a Registered Masters Level Psychologist and a licensed psychologist.

The American Psychological Association, of which the Kansas Psychological Association is an affiliate, provides accreditation and standards of practice for psychology training programs across the country. The American Psychological Association requires that in order for a person to use the title psychologist he or she must have received a doctoral degree.

The State of Kansas has provided statutory regulation of psychologists and has indicated that the term psychologist be used by those who hold the doctors degree. To use the title Registered Masters Level Psychologist, confuses and misleads those who have the least information and the greatest need to know the credentials of the individual in whom they are intrusting their care. The provision of a title which more clearly represents the credentials and level of practice of this group of health care providers would certainly serve and protect the public, which is the intention of this Bill.

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BARBARA L. KOVAROVIC, J.D., *Chairperson*
MARY ANN GABEL, *Executive Secretary*



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BEHAVIORAL SCIENCES REGULATORY BOARD

TESTIMONY ON S.B. 288

BEFORE THE SENATE PUBLIC HEALTH AND WELFARE COMMITTEE

TUESDAY, MARCH 3, 1987

I am Mary Ann Gabel, Executive Secretary of the Behavioral Sciences Regulatory Board appearing before you today neither in support of nor in opposition to S.B. 288 as the board does not have a position. I do, however, wish to express concerns regarding this legislation.

These concerns are in the areas of minimal educational competency, exclusionary work settings, continuing education hours, application and renewal fees, renewal deadline, temporary permits, committee recommendations to the board, and the absence of enabling legislation for the promulgation of rules and regulations.

New Sec. 2, lines 0032-0037, does not contain any reference to "not for profit organization" as was previously contained in Sec. 10. K.S.A. 1986 Supp. 74-5344(c), lines 0235-0237. Is it the intent of the legislature to omit this reference? If so, does this now mean that any person working in these settings will no longer be able to do so unless they are a licensed psychologist since there is no provision for their registration as a RMLP?

New Sec. 3(b) establishes the educational requirements for registration of the masters level psychologist. The board's concern in this section is the same as its concern with professional counselors inasmuch as master level psychology programs are not nationally accredited. Master psychology programs in Kansas do not appear to be uniform in graduation requirements.

SPH/W
3-3-87
attachment 4

New Sec. 4, lines 0097-0099 establishes a 25 hour continuing education requirement. Social work licensees are currently required to complete 60 hours of continuing education over a two-year period while licensed psychologists are required to complete 100 hours. Is it the intent of the legislature to require only 25 hours of continuing education for each two-year renewal period for registered master level psychologists?

New Sec. 5, lines 0100-0102, establishes the application and renewal fee for registration not to exceed \$50. Social work licensees currently are required to pay \$70 for application and renewal fees while licensed psychologists are required to pay \$100. The social work fees were increased from \$50 to \$70 over the past three years due to the fact that \$50 did not provide sufficient revenue to support the licensure program.

New Sec. 6(b), lines 0106-0111, establishes the requirements for renewal of registration. I would request that this section be amended to include the requirement that the applicant provide evidence of employment as a registered master level psychologist.

I would further request that Sec. 6(c), lines 0112-0113, be amended to require the filing of the renewal fee and continuing education documents 30 days prior to the expiration of the registration. This amendment would assist in the administration of this program.

New Sec. 7(a), lines 0127-0139, establishes the issuance of temporary permits. If it is the intent of the legislature to provide a mechanism wherein persons in (a)(1), lines 0130-0134, can work toward fulfillment of the requirement for postdoctoral supervision I believe that mechanism exists under Sec. 10(e), lines 0260-0271. Therefore, (a)(1) can be deleted.

If it is the intent of the legislature to provide a mechanism wherein persons in (a)(3), lines 0137-0139, can work toward fulfillment of the requirement for postgraduate supervision I believe that mechanism exists under Sec. 10(e), lines 0260-0271, by amending this section to include persons not registered as master level psychologists. Line 0262 could be amended to read, "remuneration, of persons not licensed as psychologists or not registered as master level psychologists under the".

New Section 7(a)(2) is confusing inasmuch as it is the board that will make the determination as to whether or not the requirements for registration have been met. The absence of accredited educational programs prevent a procedural review and preliminary determination by staff. Therefore, at such time as the determination of eligibility is made by the board the registration will be granted; thus, eliminating the need for a temporary permit as both actions will occur simultaneously. New Sec. 7,(a)(2) can be deleted.

New Sec. 7(c) also sets the renewal fee as not exceeding \$50 which I have addressed earlier in New Sec. 5.

New Sec. 8(e), line 0193, states that the board "shall" accept and act on the committee's recommendations. It would appear that the board may not have the discretion to deny registration to an applicant while at the same time the board is held liable for the actions of the persons under its jurisdiction. Would it not be better to amend this section to read that the board shall "consider" the committee's recommendations?

The final concern is that of the absence of authority which would enable the board to adopt and enforce rules and regulations. K.S.A. 74-7507 should be amended so that the powers and duties of the board extend to this act concerning the regulation of master level psychologists.

Thank you for the opportunity to appear before you today. I will be happy to answer any questions you may have.

Kansas Association of Professional Psychologists

SENATE COMMITTEE ON PUBLIC HEALTH AND WELFARE
REMARKS ON SENATE BILL 288
PRESENTED ON MARCH 3, 1987
BY CLYDE L. ROUSEY, PH.D.

PRESIDENT - KANSAS ASSOCIATION OF PROFESSIONAL PSYCHOLOGISTS

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Mr. Chairman and Distinguished Senators of the Committee on Public Health and Welfare:

Thank you for the opportunity of providing you with additional information in your consideration of Senate Bill 288. My name is Dr. Clyde Rousey. I am a licensed clinical psychologist who is in private practice in Topeka and am the current President of the Kansas Association of Professional Psychologists. We have some concerns about the bill before you because, as now written, rather than protecting you and your fellow citizens this piece of legislation instead would 1) promote consumer confusion by the title requested, 2) it would further legitimize the high cost of mental health care administered by SRS and 3) be redundant legislation.

Words we use to describe ourselves and our lives are very interesting and powerful. While all of us consider ourselves to be informally knowledgeable about various health issues as attested to by our tendency to doctor ourselves until we hurt too much, none of us take it upon ourselves to represent or think of ourselves as physicians. Similarly, all of us probably feel we know how to treat our family members when they are misbehaving or feeling blue. Yet, we do not feel the need to have the Kansas legislature register us as "everyday psychologists".

The strong need to legitimize a person's work by a label is attested to by the various groups during your current session who have asked you to support their credentialing. Even among those who didn't appear before you, one finds examples of use of changing labels in order to describe themselves. For example, what used to be a janitor now is often a custodian and what used to be a garbage collector is, in some circles, a sanitary engineer.

Despite such behavior, by custom and practice, society is extremely careful about bestowing occupation titles. For example, someone who does legal work for an attorney (even though having had two years of training in law school) is not called a "master's level attorney". Rather, he may work for an attorney as a law clerk. Another group of persons with skills in the area of law are called paralegals - no matter how many years experience they have had or how much they can do for a client. A similar situation exists in the area of medicine where highly trained medical corpmen in the armed services who (upon return to civilian life) have, in some cases, been licensed to assist in the medical care of people.

S.P. Worrell
3-3-87
Attachment 5

Here, they are not called "assistant physicians" but, rather, "physician's assistants". Even medical students, after one or two years of training, are not legislatively dubbed "master's level" or two-year level physicians". Further, nurses with postgraduate training at the master's degree level do not use the noun "physician" to describe their practice - being called, instead, nurse practitioners. The present legislation seeks to bestow the title psychologist (already reserved by statute for persons who successfully completed the Ph.D. level of training plus other credential requirements) on persons with training at the master's degree level. Passage of Senate Bill 288 would, in effect, subtly amend the very statutes you have already passed which legally define who is a psychologist and the amount and kind of training needed. (cf. The Permanent Administrative Regulations on Certification of Psychologists - adopted May 1, 1985.)

To bestow the title of master's level psychologist as suggested in the proposed legislation invites inadvertent misunderstandings on the part of the general public as to the level of care which they are being provided in health centers or other places. So long as the final word is psychologist in any title, the general public is highly unlikely to discriminate if there is a difference between persons who are called "licensed psychologists" and persons who are called "registered master's level psychologists". Your constituents need for you to define caregivers or others who offer personal services. One way is to ensure they use an appropriate label which will adequately describe their training and level of expertise. The Secretary of Health and Environment report to the legislature on this credentialing application specifically noted that the title "master's level psychologist" would be inappropriate. Of the some seventeen states that credential or otherwise recognize persons with a master's degree in psychology, none use the title "master's level psychologist". The most commonly used title is "psychological associate", "psychological assistant" or "psychological examiner". It is for these reasons that we strongly endorse and suggest that, should you see fit to pass this legislation, you substitute the title "psychological associate" or "psychological assistant" wherever you find the term "master's level psychologist".

A second area of concern relates to the high cost of mental health care already administered by SRS and the potential for further supporting this practice by newly creating a credentialing of professional persons. I suppose one might reason that giving the title of psychologist to the proposed group of applicants would somehow or other allow them to offer services at a reduced fee to our fellow citizens from what other already licensed psychologists receive. If this were so, then what I am discussing would amount to only a turf battle issue and something not worthy of your time. As we will see, this is not the case. It will be recalled that mental health centers who employ persons with master's degrees in psychology have (as at least one of their primary missions) service to SRS clients and others formerly housed at state hospitals. Hopefully, one would expect from a budgetary standpoint that such services were obtained at the best possible price.

This hope is especially germane given the budget constraints you are working on during this session. In this context, it is (at the least) distressing that SRS paid in 1985 almost twice as much per hour for psychological care in mental health centers as they would have were the same patients sent to licensed psychologists who practice independently in Kansas. In gross figures, this means approximately 2.5 million dollars would have been saved if mental health center patients were referred to private practitioners in psychology or if SRS paid the same level of reimbursement for psychological care in mental health centers as they do to psychologists with a doctoral level of training who had to meet stringent licensing rules. Please consult the accompanying handout and specifically Charts 1 through 4 to see the exact figures. These figures were taken from SRS data for the fiscal year 1985. This data has been presented previously by Mr. John Peterson, our legislative counsel, to other legislative groups and I urge your consultation with him should there be questions. The point of this is that, even now, there are no economical benefits in providing mental health care by persons with a master's degree. Officially labeling them as psychologists would not be expected to change things. The economics of this are further compounded for the state and each community by the loss of tax money paid on earnings by private practitioners in business (licensed psychologists in private practice) as opposed to nonprofit community agencies paying no taxes and by the taxes imposed by local communities on their citizens to support treatment efforts of mental health centers. Very clearly, the case for monetary savings for psychological care provided by persons with a master's degree in psychology is not present irrespective of the name they are called.

A final area of concern is that this bill is, in effect, redundant legislation. Present administrative regulations by the Behavioral Science Regulatory Board (see Article 1, Section 102-1-11) clearly provide for the use of persons doing psychological work who are uncertified - i.e. the present applicant group. These regulations also clearly provide a way to maintain quality control and protection for the public. If community mental health centers feel the need for public regulation as defined by current state laws, they need only make sure they have a licensed psychologist who can supervise the uncertified person's work. At present, community mental health centers circumvent this simple way of regulating the work of persons providing psychological care by creation of their own credentialing standards. Ignoring an already enacted way of regulating practice is continued in the present bill as the applicants now want you to allow physicians to supervise testing and other functions unique to psychology. In the same way as we would not feel it appropriate to supervise prospective physicians or any other group for which we have no formal expertise, we request the same courtesy be extended licensed psychologists. The logic of having supervision provided by someone qualified in the area to be supervised seems, to us, elementary.

Following the rules already legislated does not seem unduly restrictive for any public organization purporting to give quality care. The Kansas Association of Professional Psychologists feels that citizens deserve the right to quality care which, while not necessarily at the Cadillac level provided by private hospitals such as the Menninger Foundation, must be of good enough quality to assure citizens that no abuse occurs in public facilities, community mental health centers or other places covered in this legislation by omission or indirectly in response to cost containment efforts. It is of further interest that no one has tried to deprive persons with master's degrees in psychology from employment by state facilities, universities or community mental health centers even though they do not meet the standards required for the private sector nor has anyone tried to dictate to such centers the quality of staff they choose to employ. That being said, the legitimate question is: Why establish new laws such as are presently proposed? The motivations of the applicant group for such legislation are, thus, not totally clear and I have no idea of other agendas they may have.

By this point in your legislative hearings, it must seem to you as if hardly any vocational group is satisfied with what people call them and what role they play. Such a conclusion is supported by published studies indicating that between 60 to 80% of the work force are dissatisfied with their jobs. Changing the title of the present group of applicants will not improve their level of training or the quality of service they offer. To do this, they must go back to school like any other person who aspires to merit a label which society deems descriptive of their profession.

Some of you may regard, in the big scheme of life, the proposed legislation as relatively insignificant compared to implementing the various constitutional amendments Kansans just approved, grappling with the death penalty issue or balancing the budget. However, in this instance, you have an opportunity to make a choice for clear labels of mental health providers in the area of psychology for consumers, yourself and your families. Such a choice could well affect the amount of money you appropriate for SRS and what insurance premiums you will be paying in the future for mental health care. Last, but not least, the response you make to Senate Bill 288 will allow you to express your feelings for either more or, hopefully, less government agencies and regulations.

Thank you very much.

PSYCHOLOGISTS AS S.R.S. PROVIDERS

An Overview

October 25, 1985

CHART 1

TOTAL PSYCHOLOGY EXPENDITURES, FY 1985
EXPENDITURES AND CLIENTS SERVED
PSYCHOLOGISTS AND CMHC

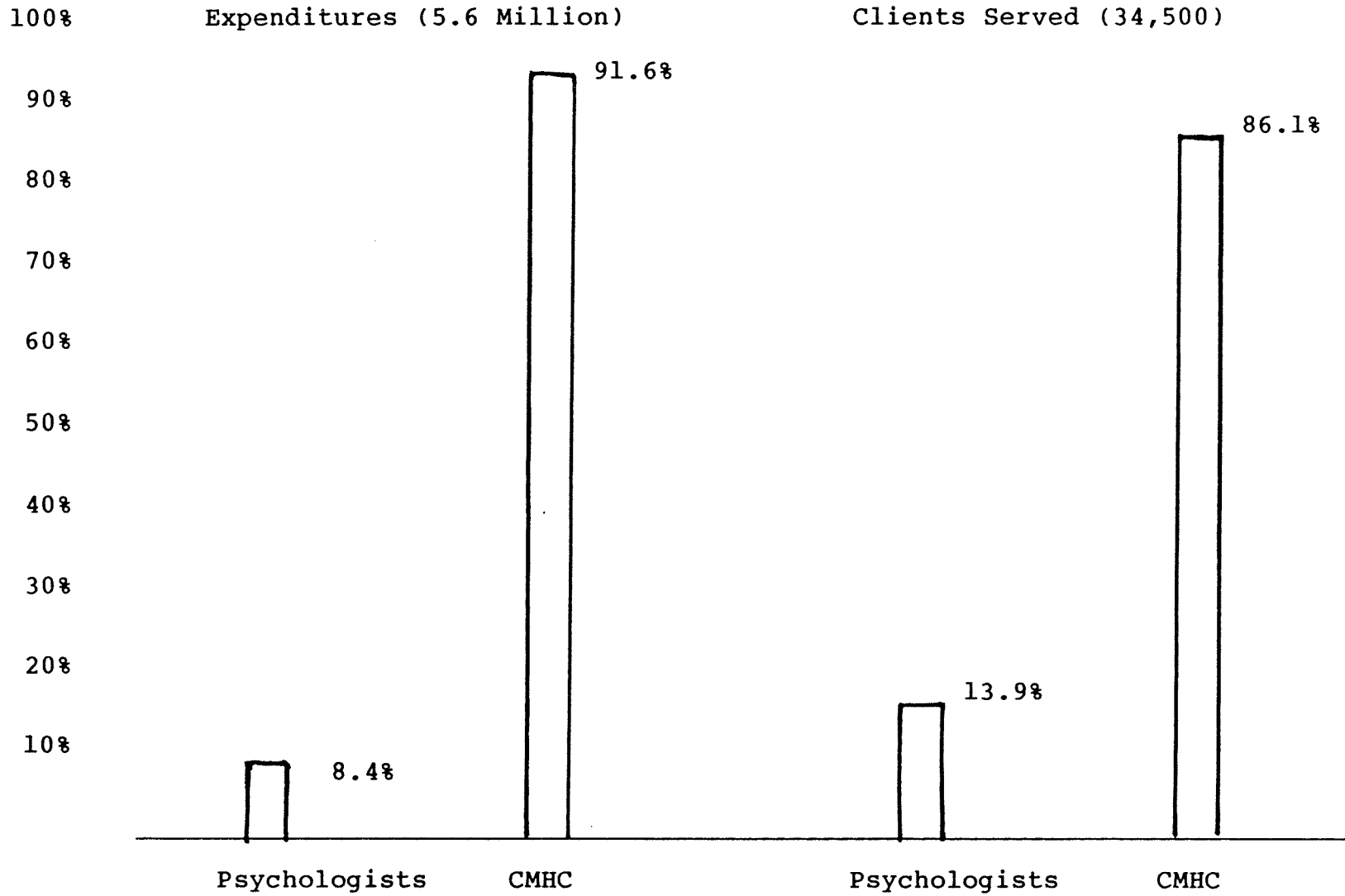


CHART 2

EXPENDITURES PER RECIPIENT
FY 1985

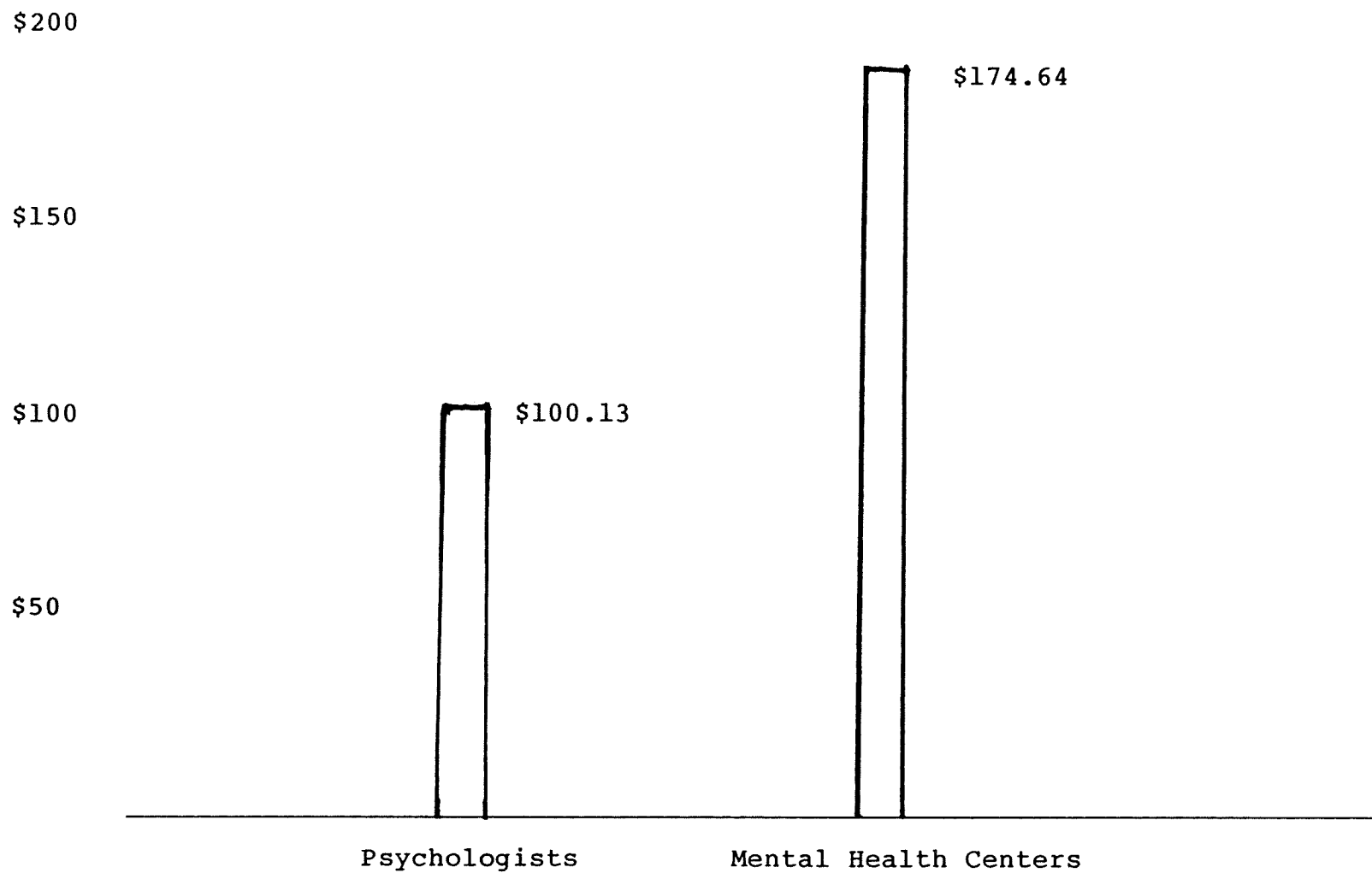


CHART 3

AVERAGE SERVICES PER RECIPIENT
FY 1985

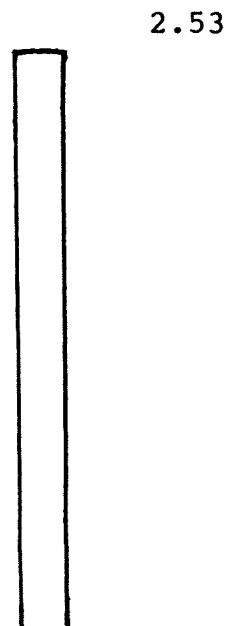
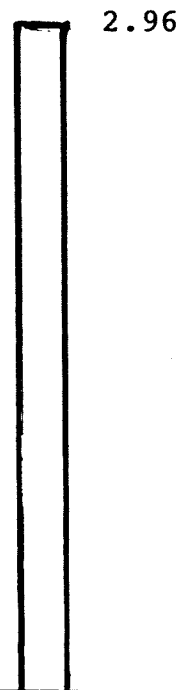
Hours

4

3

2

1



Psychologists

Mental Health Centers

CHART 4

AVERAGE RATES OF REIMBURSEMENT
FY 1985
PSYCHOLOGISTS AND CMHC

\$ per hour

80

70

60

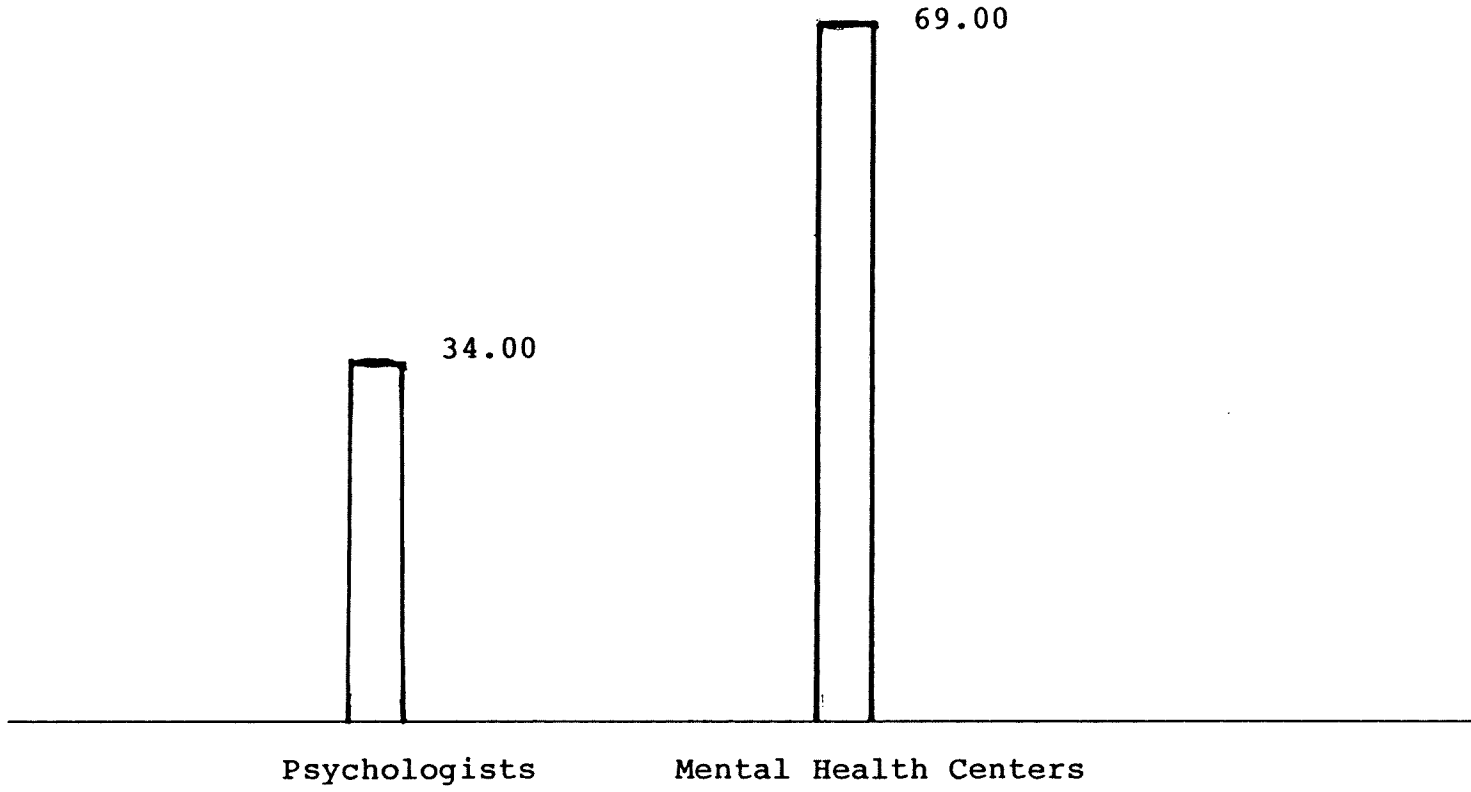
50

40

30

20

10



KANSAS ORGANIZATION OF PROFESSIONAL PSYCHOLOGIST
5815 Broadway, Great Bend, Kansas 67530
(316) 792-2544

Presentation to the Senate Public Health and Welfare
Committee Regarding SB 288

Registered Masters Level Psychologist

by
Dwight L. Young, M.S.
President

March 3, 1987

SB 288 follows the final findings and recommendations of the technical committee for review of the application of credentialing by the Kansas Organization of Professional Psychologist.

The Technical Committee established under the Kansas Credentialing Act, the Statewide Health Coordinating Council (SHCC), and the Secretary of the Kansas Department of Health and Environment found that all three criteria set out by K.S.A. 65-5006 regarding credentialing have been met. Their recommendation was for Registration under the Board of Behavioral Sciences.

SB 288 legally recognizes the current practice in mental health centers and the state institutions.

Since the legal recognition of Certified (Now Licensed) Psychologist around twenty years ago, Masters Level Psychologist have practiced through what was referred to as the "exclusion clause" of the original certification bill which permitted the use of the title Masters Level Psychologist in governmental and not-for-profit settings. These employees of Kansas agencies and institutions are now seeking legal recognition as Registered Masters Level Psychologist in order to continue to provide services to the citizens of Kansas within the framework of a legally regulated profession.

Legal recognition provides a recourse for consumers who have a grievance regarding the services of the Registered Masters Level Psychologist.

Currently, the only option that a consumer has is to report complaints to the agency involved. The registration process would offer the alternative of a state board as a review board, in this case the Board of Behavioral Sciences.

SPH/W
3-3-87
attachment 6

SB 288 does not increase the number of providers covered by Kansas third party payers.

All Masters Level Psychologist are currently reimbursed for services rendered to clients due to the fact that they are employed by agencies covered by Kansas health insurance. SB 288 will not increase the cost to the insurance industry.

Registration of Masters Level Psychologist will result in the regulation of the only major provider group in the mental health centers which are not regulated.

Psychiatrists, Ph.D. Psychologists, Masters Social Workers and Psychiatric Nurses are all regulated by the state. Masters Level Psychologists are defined only by the Association of Community Mental Health Centers of Kansas in cooperation with Medical Services of SRS. The standards developed through the years for this voluntary recognition have been incorporated into this bill.



STATE OF KANSAS

Mike Hayden, Governor

STATE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

MENTAL HEALTH AND
RETARDATION SERVICES

ROBERT C. HARDER, SECRETARY

STATE OFFICE BUILDING
TOPEKA, KANSAS 66612-1570
(913) 296-3774
KANS-A-N 561-3774

March 2, 1987

Dwight Young, President
Association of Community Mental
Health Centers of Kansas
The Center for Counseling
and Consultation
5815 Broadway
Great Bend, Kansas 67530

Dear Mr. Young:

We have reviewed Senate Bill No. 288 in consultation with the SRS Director of Personnel. As you know, SRS is an employer for a large number of masters level psychologists and, as a result, we are following this bill with interest. We are in support of the registration of masters level psychologists. We are however concerned about the consideration of a title change for masters level psychologist.

We would recommend that individuals working as psychologists should be titled as such in order to be recognized by the current civil service system. The current civil service system organizes masters and Ph.D. level psychologists on one continuum in which there is an overlap, i.e., minimum level of qualification for a Psychologist II position is a Ph.D. or a masters degree with three years of experience in lieu of a Ph.D. A title other than psychologist would require a change in the classification system including establishment of a new class, new minimum level of qualifications, etc. To accommodate a new title, needless complexity will be added to the entire system.

Please keep us posted as to the progress of this proposed legislation.

Sincerely,

A handwritten signature in cursive script, appearing to read "Gerald T. Hannah".

Gerald T. Hannah, Ph.D.
Commissioner

GTH:RLC:b

SPH/aw
3-3-87

attachment 7

STATE OF KANSAS

ROY M. EHRlich
SENATOR, THIRTY-FIFTH DISTRICT
RICE, BARTON, RUSSELL COUNTIES
ROUTE 1 BOX 92
HOISINGTON, KANSAS 67544-9747



TOPEKA

SENATE CHAMBER
February 26, 1987

COMMITTEE ASSIGNMENTS
CHAIRMAN PUBLIC HEALTH AND WELFARE
MEMBER FEDERAL AND STATE AFFAIRS
LABOR, INDUSTRY, AND SMALL BUSINESS
LOCAL GOVERNMENT
ADVISORY COMMITTEE OF STATE
DEPARTMENT ON AGING
NATIONAL CONFERENCE OF STATE
LEGISLATURES SPECIAL SELECTED
COMMITTEE—HEALTH CARE
NATIONAL SPECIAL SELECT STANDING
COMMITTEE OF THE MENTAL HEALTH
ASSOCIATION
COUNCIL OF STATE GOVERNMENTS—
ENERGY COMMITTEE

The Honorable Robert Talkington
Chairman
Coordinating Council
Statehouse
Topeka, KS 66612

Dear Senator Talkington:

The Senate Public Health and Welfare Committee has requested a letter be written to the Coordinating Council asking for an interim study on Senate Bill 33 which relates to the composition of the state board of healing arts.

Enclosed is a copy of the subcommittee report which contains a number of recommendations pertaining to this bill.

Sincerely,

Roy M. Ehrlich, Chairman
Senate Public Health & Welfare Committee

RME:cw

Enclosure

FOR YOUR INFORMATION
SENT BY
ROY M. EHRlich
STATE SENATE

SPH:cw
3-3-87
attachment 8



KANSAS STATE BOARD OF NURSING

BOX 1098, 900 SW Jackson, Room 551-S...
TOPEKA, KANSAS 66601

Telephone 913/296-4929

TO: The Honorable Roy M. Ehrlich, Chairman and
Members of the Senate Public Health and Welfare Committee

FROM: Dr. Lois Rich Scibetta
Executive Administrator

DATE: March 3, 1987

RE: Senate Bill 300

Thank you Mr. Chairman for this opportunity to comment on Senate Bill 300. The Board of Nursing is grateful to this Committee for the introduction of the Bill.

Senate Bill 300 relates to the Mental Health Technicians and it gives the Board the authority to adopt rules and regulations in order to administer the Licensed Mental Health Technicians Act. (New Section (2)(C) lines 0044-0046.)

In addition, the Bill will permit the Board to define unprofessional conduct by rule and regulation. (New Section (5), lines 0060-0061.)

These changes are essential and will allow the Board of Nursing to carry out the intent of the Act.

The Board of Nursing recommends that SB 300 be reported out favorably for passage.

Thank you for your consideration. I will be happy to respond to questions.

LRS:vmd

SPH/W
3-3-87
attachment 9



Kansas Association of Human Services Technologies
211 East Pine Street
Hesston, Kansas 67062

Mister Chairman, Members of the committee, Ladies and gentlemen:

My name is Ray Morrison. I am President of the Kansas Association of Human Services Technologies which is the professional organization for the Licensed Mental Health Technicians in Kansas. I am appearing here today to urge this committee to recommend passage of Senate Bill 300.

The Kansas State Board of Nursing has done a commendable job of regulating LMHTs since licensure was enacted in 1975. The powers of the Board of Nursing have, all these years, been severely limited. Senate Bill 300 will enable the Board of Nursing to set and enforce meaningful standards of practice for LMHTs. This will help to insure that those citizens of Kansas who need the services of LMHTs will receive professional services. It will allow the Board of Nursing to "weed out" those licensed persons who do not act in a professional manner.

Standards of practice for LMHTs are currently non-existent. We urge that the Board of Nursing be empowered to set and enforce meaningful standards. Passage of Senate Bill 300 will allow this to happen.

I thank the committee for allowing me to address you on this matter.

Raymond W. Morrison

Raymond W. Morrison, L.M.H.T.

President - K.A.H.S.T.

SP4/W
3-3-87
attachment 10

THE ASSOCIATION FOR
RETARDED CITIZENS OF KANSAS, INC.



1111 W. 59th TERRACE
SHAWNEE, KANSAS 66203 • (913) 268-8200

Hope through understanding

March 3, 1987

BRENT GLAZIER
Executive Director

CAROL A. DUCKWORTH
*President
Lawrence*

ROBERT ATKISSON
*Vice President
Stockton*

MARIE LEACH
*Secretary
Wichita*

VIRGINIA LOCKHART
*Treasurer
Topeka*

GINGER CLUBINE
*Past President
Wichita*

TO: Sen. Roy Ehrlich, Chairman
Members of the Public Health and Welfare
Committee

FROM: Lila Paslay, Chairperson
Legislative Affairs

RE: SB 301

The Association for Retarded Citizens of Kansas is in support of SB 301.

We are especially pleased to note that it contains the provision which allows physicians to report the diagnosis of children with handicaps to the Secretary of Health and Environment with the approval of the parents or guardian. We believe this will provide protection of the rights of the family.

We do know that such a data collection system can be of assistance in the planning for programs for preschool children with handicaps. At a time when it is imperative that every dollar be used wisely, this information will be of value.

We urge you to vote this bill favorably out of committee.

*SPH(W)
3-3-87
attachment 11*

TO: Committee on Public Health and Welfare

FROM: Kathy Johnson, Parent, and Resource Coordinator
for Families Together, Inc.

RE: Senate Bill No. 301

Mr. Chairman and Members of the Senate Committee on Public Health and Welfare:

I am the parent of a five year old daughter with Cerebral Palsy. We have been very fortunate to have recieved services throughout her initial three month hospitalization at K. U. Medical Center, and then in an Early Infant Stimulation Program at the Capper Foundation. She is presently in a kindergarten class at the Capper Foundation and recieves Physical Therapy, Occupational Therapy, Speech, and Recreational Therapy. I strongly believe that without these services she would not have made the progress that she has made today.

My goal as a parent has always been to ensure proper health and stimulation for my daughter. I feel Senate Bill 301 will provide the necessary information so that all children born with a disability can recieve these absolutely vital services when they are most needed. I feel that adequate safeguards to confidentiality for the child and family have been included in this bill and I would urge you to support this bill.

SPH&W
3-3-87
attachment 12

TO: Senate Public Health and Welfare Committee

FROM: Marla Mack
Parent and Chairperson for Coordinating
Council on Early Childhood Developmental Services

RE: SB 301

Chairperson and Members of the Senate House Public Health and Welfare Committee:

As a part of the original Governor's Task Force and now as the Chair of the Coordinating Council on Early Childhood Developmental Services, I can state with confidence that the earlier developmental services for handicapped children can be initiated, the more successful the outcome from those services from a fiscal and human standpoint. Research and my own experiences support this conclusion.

As a parent of a child who received early intervention services, I know first hand the difference it can make. I have an 11 year old son with Downs Syndrome. I attribute the advanced level of his skills, especially in the language and pre-vocational areas, to the early home based intervention program we were able to secure for him.

Unfortunately, one of the findings of the Task Force indicated that early identification of handicaps in Kansas is inadequate. These inadequacies are the cause for too many children experiencing needless delays in services and treatment and far too much anguish for their families.

With the passage of SB 301, physicians (with parental consent) will be required to report children with handicaps which will allow for adequate services and planning for our children. I want to emphasize that parental rights are an extremely important consideration for me. I believe this bill provides adequate protection for those parents who choose not to provide this information to the State and also provides protection for parent confidentiality.

As Chair of the Interagency Coordinating Council on Early Childhood Developmental Services and as a parent who has seen the positive effects of early identification and intervention I urge your support of SB 301.

SPH/ML
3-3-87
attachment B