

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. ~~xxx~~ on MARCH 6, 1987 in room 526-S of the Capitol.

All members were present except:

Committee staff present:

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

Conferees appearing before the committee:

Terri Rosselot, Executive Director, KSNA
Gerald Henderson, United School Administrators
Connie Hubbell, State Board of Education
Elizabeth Taylor, Kansas Association of Practical Nurses
J. Michael Hines, Kansas Respiratory Therapy Society
Rita Wolf, Kansas Department of Health and Environment

Others present: see attached list

Terri Rosselot spoke in support of SB-302 and presented the committee with an addendum (attachment 1) to the testimony presented to the committee March 5, 1987, attachment 11. Ms. Rosselot told the committee that with more handicapped children being mainstreamed into the schools it was necessary that some persons be able to help with certain health needs when the nurse could not be present.

Gerald Henderson spoke in support of SB-302. Written testimony was presented to the committee March 5, attachment 10. Mr. Henderson stated that these changes are needed to allow personnel in the school setting such as administrators, secretaries, etc. to be trained to help in these areas.

Connie Hubbell testified stating the State Board of Education endorsed SB-302 as it is written, stating it was needed in the schools. (attachment 2)

Elizabeth Taylor spoke concerning SB-302 and stated concern that when the rules and regulations are written possible nursing positions would be filled by other school personnel.

Senator Francisco moved that on page 2, (k) and (l) following "selected nursing procedures," "as specified by rules and regulations of the board" be inserted. Senator Anderson seconded the motion. The motion carried.

Senator Salisbury conceptually moved to remove the definition of auxillary patient care services, lines 0047 to 0050, and put it into the definition section of the statutes. Senator Kerr seconded the motion.

Senator Francisco made a substitute motion to strike all new language, lines 0047 to 0050. Senator Salisbury seconded the motion. The motion failed.

The motion by Senator Salisbury carried.

Senator Bond moved to add "and gifts" following "grants" (7) page 6. Senator Anderson seconded the motion. The motion carried.

Senator Salisbury moved to report SB-302 favorable as amended. Senator Anderson seconded the motion. The motion carried.

Senator Bond moved to pass out SB-301 favorable as drafted. Senator Mulich seconded the motion. The motion carried.

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.

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 6, 1987

Staff presented the needed amendment for SB-259.

Senator Bond moved to amend SB-259. Senator Mulich seconded the motion. The motion carried.

Senator Bond moved to pass SB-259 out favorable. Senator Mulich seconded the motion. The motion carried.

Senator Bond presented the subcommittee report on SB-35 in the form of a substitute bill. (attachment 3) Senator Bond stated that it was the feeling of the subcommittee that much of SB-35 should be sent along with SB-33 to the interium committee. Staff felt that some of SB-35 needed to be dealt with this year.

Staff took the committee through the changes in the substitute bill section by section.

Senator Bond moved favorable passage of substitute Senate Bill 35. Senator Francisco seconded the motion.

Written testimony was presented by J. Michael Hinds, RRT, Kansas Respiratory Therapy Society in support of SB-338. (attachment 4)

Written testimony was presented for the Kansas Department of Health and Environment on SB-339. (attachment 5)

The meeting adjourned at 11:03 a.m. and will meet Monday, March 9, 1987, at 10:00 a.m.

SENATE
PUBLIC HEALTH AND WELFARE COMMITTEE

DATE 3-6-87

(PLEASE PRINT)
NAME AND ADDRESS

Terri Rossalot

Michael Hinds

Sharon Frieden

Connie Russell

~~Jim 17. 15. 1 dr~~

KEITH R SANDIS

Gerald Meridson

Tom Bell

Beta & Wolf

Cathy Rooney

Clara Cumbri-Dialo

Elizabeth Taylor

Opie Young

Ann Allsburg

Valerie Smith

Charles V. Hamm

Paul M. Kelly

ORGANIZATION

Kansas State Nurses' Association

Ks. Respiratory Care Society

KSDE

St. Cl. Fed

Ch. 6. 19. 1 dr

CHRISTIAN SCIENCE COMMITTEE
ON PUBLICATION FOR KANSAS

USA

Ks. Hosp. Assn.

KDHE

KDHE

KDHE

KOYA, RFLCPN

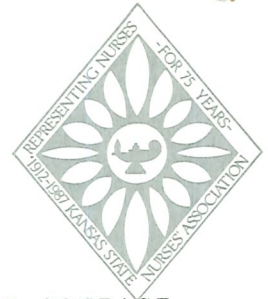
KDHE

KDHE

Ks OT Assoc.

K. D. H. E.

Assoc. of CMHCs of Ks. -



FOR MORE INFORMATION CONTACT:

Terri Rosselot, J.D., R.N.
 Executive Director
 (913) 233-8638
 March 6, 1987

SB 302 Nurse Practice Act
ADDENDUM TO TESTIMONY

In addition to the changes proposed in the Nurse Practice Act regarding exceptions for delegation in the school setting that are addressed in S.B. 302, KSNA would like to recommend a change in the composition of the Kansas State Board of Nursing.

The changes requested are on line 0074 page 2, 0075 and the addition of language on page 4 line 0136. A Ballon has been provided for these changes.

The current composition of the KSBN Board is:

RN's	5	22,000 RN's licensees	=	4400 RN's per Board Member
LPN's	2	7,000 LPN's	=	3500 LPN's per Board Member
LMHT's	2	1,700 LMHT's	=	850 LMHT's per Board Member
Public	2			

TOTAL	11			

KSNA would like to propose that another Registered Nurse educator, one that educates nurses practicing in advanced practice (Nurse Anesthesia, Clinical Specialists, and Nurse Practitioners) be substituted for one of the LMHT's Board members. This would maintain the current total of 11 Board members and the Board composition would be more compatable with the current number of licensees in the respective areas of nursing in the state

Proposed KSBN Board Composition

RN's	6	22,000 RN's licensees	=	3666 RN's per Board Member
LPN's	2	7,000 LPN's	=	3500 LPN's per Board Member
LMHT's	1	1,700 LMHT's	=	1700 LMHT's per Board Member
Public	2			

TOTAL	11			

The LMHT's would retain their position of being the most well represented per licensee of all three groups of licensees.

S.P.H.W.
3-6-87
attachment 1

S.B. 302 Addendum
Testimony March 6, 1987

KSNA supports the change for the following reasons:

--More equitable representation on the Board in numbers of licensees.

The number of RN's licensed by the Board has increased over the last five years, the number of LMHT's has been decreasing.

Number of Licensees 1981-1986

	1981	1982	1983	1984	1985	1986	
RN's	20,454	21,617	21,362	21,653	22,107	22,501	10%↑
LMHT's	1,750	1,737	1,711	1,652	1,566	1,667	5%↓

--The Board of Nursing approves all educational programs preparing LMHT's, LPN's and RN's in the state of Kansas.

There are currently 54 programs preparing LPN's and RN's and 9 programs preparing LMHT's. Reviewing courses and curriculum for these programs that are taught by Registered Nurses' and coordinated by RN's requires a certain amount of educational expertise by the Board. Another educator would assist the Board in the review and recommendations to these programs. There has been some concern that credentialing advanced practioners would be greatly enhanced with an individual engaged in advanced practice, KSNA makes the recommendation for a educator engaged in advanced nursing practice education as a solution to these identified deficiencies.

Thank you for listening.

1-3

0046 while in the discharge of official duties;

0047 (h) auxiliary patient care services *consisting of techniques*

0048 *and procedures which do not require specialized knowledge and*

0049 *judgment derived from the biological, physical and behavioral*

0050 *sciences and which are performed in medical care facilities,*

0051 *adult care homes or elsewhere by persons under the direction of*

0052 *a person licensed to practice medicine and surgery or a person*

0053 *licensed to practice dentistry or the supervision of a registered*

0054 *professional nurse or a licensed practical nurse;*

0055 (i) the administration of medications to residents of adult care

0056 homes or to patients in hospital-based long-term care units by an

0057 unlicensed person who has been certified as having satisfactorily

0058 completed a training program in medication administration ap-

0059 proved by the secretary of health and environment and has

0060 completed the program on continuing education adopted by the

0061 secretary; or

0062 (j) the practice of mental health technology by licensed

0063 mental health technicians as authorized under the mental health

0064 technicians' licensure act;

0065 (k) *performance in the school setting of selected nursing*

0066 *procedures necessary for handicapped students; or*

0067 (l) *performance in the school setting of selected nursing*

0068 *procedures necessary to accomplish activities of daily living and*

0069 *which are routinely performed by the student or student's*

0070 *family in the home setting.*

0071 Sec. 2. K.S.A. 1986 Supp. 74-1106 is hereby amended to read

0072 as follows: 74-1106. (a) *Appointment, term of office.* (1) The

0073 governor shall appoint a board consisting of 11 members of

0074 which ~~five~~^{six} shall be registered professional nurses, two shall be

0075 licensed practical nurses, ~~two~~^{one} shall be licensed mental health

0076 technicians and two shall be members of the general public,

0077 which shall constitute a board of nursing, with the duties, power

0078 and authority set forth in this act. The members of the board of

0079 nursing holding office on the effective date of this amendment

0080 shall continue as members until the expiration of their respective

0081 terms.

0082 (2) Upon the expiration of the term of any registered profes-

Current Board of Nursing

RN's	-	5
LPN's	-	2
LMHT's	-	2
Public Members	-	1
TOTAL	-	11

Proposed Board of Nursing Composition

RN's	-	6
LPN's	-	2
LMHT's	-	2
Public Members	-	2
TOTAL	-	11

change from five to six RN's on Board
change from two to one LMHT's on the Board

0120 of Kansas. Registered professional nurse members shall possess
 0121 a license to practice as a professional nurse in this state with at
 0122 least five years' experience in nursing as such and shall be
 0123 actively engaged in nursing at the time of appointment and
 0124 reappointment. The licensed practical nurse members shall be
 0125 graduated from an accredited practical nurse program, hold a
 0126 diploma from an accredited high school or have otherwise ob-
 0127 tained the equivalent of a high school education and be licensed
 0128 to practice practical nursing in the state with at least five years'
 0129 experience in practical nursing and shall be actively engaged in
 0130 practical nursing at the time of appointment. Upon the expiration

0131 of the terms of the registered professional nurse members hold-
 0132 ing office on the effective date of this act, the governor shall
 0133 appoint successors so that the registered professional nurse
 0134 membership of the board shall consist of three members who are
 0135 engaged in nursing service and ~~two~~^{three} members who are engaged
 0136 in nursing education. The registered professional nurse mem-
 0137 bers of the board holding office on the effective date of this act
 0138 shall continue as members until the expiration of their respective
 0139 terms. The licensed mental health technician members shall be
 0140 high school graduates or shall have obtained the equivalent of a
 0141 high school education and shall be licensed to practice as li-
 0142 censed mental health technicians in the state with at least five
 0143 years' experience at the time of appointment. The consumer
 0144 members shall represent the interests of the general public.

0145 Each member of the board shall take and subscribe the oath
 0146 prescribed by law for state officers, which oath shall be filed with
 0147 the secretary of state.

0148 (c) *Duties and powers.* (1) The board shall meet annually at
 0149 Topeka during the month of July and shall elect from its mem-
 0150 bers a president, vice-president and secretary, each of whom
 0151 shall hold their respective offices for one year, and also shall
 0152 employ, in the classified service of the Kansas civil service act,
 0153 an executive administrator, who shall be a registered profes-
 0154 sional nurse and who shall not be a member of the board, and
 0155 such other employees as necessary to carry on the work of the
 0156 board. As necessary, the board shall be represented by an attor-

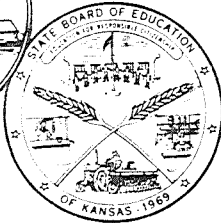
change from two to three members

ADD: one of whom is engaged in the education of advanced nursing practice.

Kansas State Board of Education

Kansas State Education Building

120 East 10th Street Topeka, Kansas 66612-1103



Mildred McMillon
District 1

Kathleen White
District 2

Paul D. Adams
District 3

Connie Hubbell
District 4

Sheila Frahm
District 5

March 3, 1987

Bill Musick
District 6

Richard M. Robl
District 7

Evelyn Whitcomb
District 8

Robert J. Clemons
District 9

Marion (Mick) Stevens
District 10

TO: Senate Committee on Public Health and Welfare
FROM: State Board of Education
SUBJECT: 1987 Senate Bill 302

My name is Connie Hubbell, Legislative Chairman of the State Board of Education. I appreciate the opportunity to appear before this Committee on behalf of the State Board.

Senate Bill 302 authorizes school employees to perform selected nursing procedures necessary for handicapped students and to accomplish activities of daily living which are routinely performed by the student or the student's family in the home setting.

Senate Bill 302 is a result of a task force recommendation from school and nursing officials.

In many school district, students under the direction of a physician, are required to take certain medication during the school day. This is particularly true for handicapped students. It is important that school officials be given authority to follow medical instructions and provide medication to the student.

If this bill is not approved, it would require a substantial increase in local school costs and result in the employment of additional personnel.

The State Board of Education recommends that you report Senate Bill 302 favorably for passage.

Substitute for SENATE BILL NO. 35

By Committee on Public Health and Welfare

AN ACT concerning the state board of healing arts; relating to special permits and licenses issued by the board; establishing certain fees; concerning physicians' assistants and their responsible physicians; amending K.S.A. 65-2004, 65-2811a, 65-2852, 65-2895, 65-2896a, 65-2896e and 65-2897a and K.S.A. 1986 Supp. 65-2836 and repealing the existing sections.

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

Section 1. K.S.A. 65-2004 is hereby amended to read as follows: 65-2004. (a) Except as provided in subsection (b) of K.S.A. 65-2003 and amendments thereto, each applicant for a license to practice podiatry shall be examined by the board of healing--arts in the following subjects: Anatomy, bacteriology, chemistry, dermatology, histology, pathology, physiology, pharmacology and medicine, diagnosis, therapeutics, and clinical podiatry and surgery, limited in their scope to the treatment of the human foot. If the applicant possesses the qualifications required by K.S.A. 65-2003 and amendments thereto, completes the examination prescribed with a general average of ~~seventy-five percent-(75%)~~ 75% in all subjects and not less than ~~sixty-percent~~ (60%) 60% in any one subject and pays to the secretary of the board the license fee established pursuant to K.S.A. 65-2012 and amendments thereto, such applicant shall be issued a license by the state board of healing arts to practice podiatry in this state.

(b) Each applicant before taking the examination shall pay to the secretary of the state board of--healing--arts the examination fee established pursuant to K.S.A. 65-2012 and amendments thereto. Any applicant failing the examination shall be entitled, at the expiration of six months from the time of

SPH/W
3-6-87
attachment 3

such failure, to a reexamination ~~without--the--payment-of-an additional-fee-for-such-examination.~~

Sec. 2. K.S.A. 65-2811a is hereby amended to read as follows: 65-2811a. (a) The secretary of the state board of healing arts may issue a special permit to practice the appropriate branch of the healing arts, under the supervision of a person licensed to practice such branch of the healing arts, to any person who has completed undergraduate training in a branch of the healing arts and who has not engaged in a full-time approved postgraduate training program.

(b) Such special permit shall be issued only to a person who: (1) ~~Who~~ Has made proper application for such special permit upon forms approved by the state board of healing arts;

(2) ~~who~~ meets all qualifications of licensure except examinations and postgraduate training, as required by the Kansas healing arts act;

(3) ~~who~~ is not yet but will be engaged in a full-time, approved postgraduate training program in Kansas;

(4) ~~who~~ has obtained the sponsorship of a person licensed to practice the branch of the healing arts in which the applicant is training, which sponsor practices in ~~a-community-designated-as a--rural-community-by-the-secretary-of-health-and-environment-for the-purposes-of-this-act~~ an area of Kansas which is determined under K.S.A. 76-375 and amendments thereto to be medically underserved or critically medically underserved; and

(5) ~~who~~ has paid the prescribed fees as established by the state board of healing arts for the application for and granting of such special permit.

(c) The special permit, when issued, shall authorize the person to whom the special permit is issued to practice the branch of the healing arts in which such person is training under the supervision of the person licensed to practice that branch of the healing arts who has agreed to sponsor such special permit holder. The special permit shall not authorize the person holding the special permit to engage in the private practice of the healing arts. The holder of a special permit under this section

shall not charge patients a fee for services rendered but may be compensated directly by the person under whose supervision and sponsorship the permit holder is practicing. The special permit shall expire on the day the person holding the special permit becomes engaged in a full-time, approved postgraduate training program or one year from its date of issuance, whichever occurs first.

(d) This section shall be part of and supplemental to the Kansas healing arts act.

Sec. 3. K.S.A. 1986 Supp. 65-2836 is hereby amended to read as follows: 65-2836. A licensee's license may be revoked, suspended or limited, or the licensee may be publicly or privately censured, upon a finding of the existence of any of the following grounds:

(a) The licensee has committed fraud or misrepresentation in applying for or securing an original or renewal license.

(b) The licensee has committed an act of unprofessional or dishonorable conduct or professional incompetency.

(c) The licensee has been convicted of a felony or class A misdemeanor, whether or not related to the practice of the healing arts.

(d) The licensee has used fraudulent or false advertisements.

(e) The licensee is addicted to or has distributed intoxicating liquors or drugs for any other than lawful purposes.

(f) The licensee has willfully or repeatedly violated this act, the pharmacy act of the state of Kansas or the uniform controlled substances act, or any rules and regulations adopted pursuant thereto, or any rules and regulations of the secretary of health and environment which are relevant to the practice of the healing arts.

(g) The licensee has unlawfully invaded the field of practice of any branch of the healing arts in which the licensee is not licensed to practice.

(h) The licensee has failed to pay annual renewal fees specified in this act.

(i) The licensee has failed to take some form of postgraduate work each year or as required by the board.

(j) The licensee has engaged in the practice of the healing arts under a false or assumed name, or the impersonation of another practitioner. The provisions of this subsection relating to an assumed name shall not apply to licensees practicing under a professional corporation or other legal entity duly authorized to provide such professional services in the state of Kansas.

(k) The licensee has the inability to practice the branch of the healing arts for which the licensee is licensed with reasonable skill and safety to patients by reason of illness, alcoholism, excessive use of drugs, controlled substances, chemical or any other type of material or as a result of any mental or physical condition. In determining whether or not such inability exists, the board, upon probable cause, shall have authority to compel a licensee to submit to mental or physical examination by such persons as the board may designate. The licensee shall submit to the board a release of information authorizing the board to obtain a report of such examination. ~~Failure of any licensee to submit to such examination when directed shall constitute an admission of the allegations against the licensee, unless the failure was due to circumstances beyond the control of the licensee, and the board may enter a default and final order in any case of default without just cause being shown to the board without the taking of testimony or presentation of evidence.~~ A person affected by this subsection shall be offered, at reasonable intervals, an opportunity to demonstrate that such person can resume the competent practice of the healing arts with reasonable skill and safety to patients. For the purpose of this subsection, every person licensed to practice the healing arts and who shall accept the privilege to practice the healing arts in this state by so practicing or by the making and filing of an annual renewal to practice the healing arts in this state shall be deemed to have consented to submit to a mental or physical examination when directed in writing by the board and further to have waived all objections to

the admissibility of the testimony or examination report of the person conducting such examination at any proceeding or hearing before the board on the ground that such testimony or examination report constitutes a privileged communication. In any proceeding by the board pursuant to the provisions of this subsection, the record of such board proceedings involving the mental and physical examination shall not be used in any other administrative or judicial proceeding.

(l) The licensee has had a license to practice the healing arts revoked, suspended or limited, has been censured or has had other disciplinary action taken, or an application for a license denied, by the proper licensing authority of another state, territory, District of Columbia, or other country, a certified copy of the record of the action of the other jurisdiction being conclusive evidence thereof.

(m) The licensee has violated any lawful rule and regulation promulgated by the board or violated any lawful order or directive of the board previously entered by the board.

(n) The licensee has failed to report or reveal the knowledge required to be reported or revealed under K.S.A. 65-28,122 and amendments thereto.

(o) The licensee, if licensed to practice medicine and surgery, has failed to inform a patient suffering from any form of abnormality of the breast tissue for which surgery is a recommended form of treatment, of alternative methods of treatment specified in the standardized summary supplied by the board. The standardized summary shall be given to each patient specified herein as soon as practicable and medically indicated following diagnosis, and this shall constitute compliance with the requirements of this subsection. The board shall develop and distribute to persons licensed to practice medicine and surgery a standardized summary of the alternative methods of treatment known to the board at the time of distribution of the standardized summary, including surgical, radiological or chemotherapeutic treatments or combinations of treatments and the risks associated with each of these methods. Nothing in this

subsection shall be construed or operate to empower or authorize the board to restrict in any manner the right of a person licensed to practice medicine and surgery to recommend a method of treatment or to restrict in any manner a patient's right to select a method of treatment. The standardized summary shall not be construed as a recommendation by the board of any method of treatment. The preceding sentence or words having the same meaning shall be printed as a part of the standardized summary. The provisions of this subsection shall not be effective until the standardized written summary provided for in this subsection is developed and printed and made available by the board to persons licensed by the board to practice medicine and surgery.

(p) The licensee has cheated on or attempted to subvert the validity of the examination for a license.

(q) The licensee has been found to be mentally ill, disabled, not guilty by reason of insanity or incompetent to stand trial by a court of competent jurisdiction.

(r) The licensee has prescribed, sold, administered, distributed or given a controlled substance: (1) For other than medically accepted therapeutic purposes; (2) to the licensee's self; (3) to a member of the licensee's family; or (4) except as permitted by law, to a habitual user or addict.

(s) The licensee has violated a federal law or regulation relating to controlled substances.

(t) The licensee has failed to furnish the board, or its investigators or representatives, any information legally requested by the board.

(u) Sanctions or disciplinary actions have been taken against the licensee by a peer review committee, health care facility or a professional association or society for acts or conduct similar to acts or conduct which would constitute grounds for disciplinary action under this section.

(v) The licensee has failed to report to the board any adverse action taken against the licensee by another state or licensing jurisdiction, a peer review body, a health care facility, a professional association or society, a governmental

agency, by a law enforcement agency or a court for acts or conduct similar to acts or conduct which would constitute grounds for disciplinary action under this section.

(w) The licensee has surrendered a license or authorization to practice the healing arts in another state or jurisdiction or has surrendered the licensee's membership on any professional staff or in any professional association or society while under investigation for acts or conduct similar to acts or conduct which would constitute grounds for disciplinary action under this section.

(x) The licensee has failed to report to the board surrender of the licensee's license or authorization to practice the healing arts in another state or jurisdiction or surrender of the licensee's membership on any professional staff or in any professional association or society while under investigation for acts or conduct similar to acts or conduct which would constitute grounds for disciplinary action under this section.

(y) The licensee has an adverse judgment, award or settlement against the licensee resulting from a medical liability claim related to acts or conduct similar to acts or conduct which would constitute grounds for disciplinary action under this section.

(z) The licensee has failed to report to the board any adverse judgment, settlement or award against the licensee resulting from a medical malpractice liability claim related to acts or conduct similar to acts or conduct which would constitute grounds for disciplinary action under this section.

(aa) The licensee has failed to maintain a policy of professional liability insurance as required by K.S.A. 40-3403a or by K.S.A. 40-3402 and amendments thereto.

(bb) The licensee has failed to pay the annual premium surcharge as required by K.S.A. 40-3404 and amendments thereto.

(cc) The licensee has knowingly submitted any misleading, deceptive, untrue or fraudulent representation on a claim form, bill or statement.

(dd) The licensee as the responsible physician for a

physician's assistant has failed to adequately direct and supervise the physician's assistant in accordance with K.S.A. 65-2896 to 65-2897a, inclusive, and amendments thereto, or rules and regulations adopted under such statutes.

Sec. 4. K.S.A. 65-2852 is hereby amended to read as follows: 65-2852. (a) The following fees shall be established and collected by the board:

(1) For a license, issued upon the basis of an examination given by the board, in a sum of not more than \$150;

(2) for a license, issued without examination and by endorsement, in a sum of not more than \$150;

(3) for a license, issued upon a certificate from the national boards, in a sum of not more than \$150;

(4) for the annual renewal of a license, the sum of not more than ~~\$100~~ \$150;

(5) for a temporary permit, in a sum of not more than \$30;

(6) for an institutional license, in a sum of not more than \$150;

(7) for a visiting professor temporary license, in a sum of not more than \$25;

(8) for a certified statement from the board that a licensee is licensed in this state, the sum of not more than \$15;

(9) for any copy of any license issued by the board, the sum of not more than \$15;

(10) for any examination given by the board, a sum in an amount equal to the cost to the board of the examination; and

(11) for application for and issuance of a special permit under K.S.A. 65-2811a and amendments thereto.

(b) On or before May 15 of each year, the state board of healing arts shall determine the amount of funds that will be required during the next ensuing license year beginning July 1, to properly administer the law which the board is directed to administer under K.S.A. 65-2801 et seq., and amendments thereto, and shall fix the fees annually for the succeeding year in such reasonable sums as may be necessary within the limitations prescribed.

Sec. 5. K.S.A. 65-2895 is hereby amended to read as follows: 65-2895. (a) There is hereby created a designation of institutional license which may be issued by the secretary to a person who is a graduate of an accredited school of the healing arts or a school which has been in operation for not less than 15 years and the graduates of which have been licensed in another state or states which have standards similar to Kansas and who is employed by the department of social and rehabilitation services or employed by any institution within the department of corrections. If the applicant is a foreign medical graduate, the applicant shall pass an examination given by the educational commission for foreign medical graduates. ~~After July 17, 1986,~~ An applicant for an institutional license shall pass an examination in the basic and clinical sciences approved by the board. The institutional license shall confer upon the holder the right and privilege to practice that branch of the healing arts in which the holder of the institutional license is proficient and shall obligate the holder to comply with all requirements of such license. The practice privileges of institutional license holders are restricted as follows: The institutional license shall be valid only during the period in which the holder is employed by the department of social and rehabilitation services or employed by any institution within the department of corrections, and only within the institution to which the holder is assigned.

(b) An institutional license shall be valid for a period of two years after the date of issuance and may be renewed if the applicant for renewal is eligible to obtain an institutional license under this section, ~~and-if-the-applicant-for-renewal~~ has successfully completed the examination required under paragraph (3) of subsection (a) of K.S.A. 65-2873 and amendments thereto and has submitted evidence of satisfactory completion of a program of continuing education required by the board. The board shall require each applicant for renewal of an institutional license under this section to submit evidence of satisfactory completion of a program of continuing education required by the

board of licensees of the branch of the healing arts in which the applicant is proficient.

~~(c) Any person who holds a valid fellowship license under this section on the day immediately preceding the effective date of this act shall be considered for the purposes of this section to hold an institutional license, which institutional license shall continue to be effective until the date when the fellowship license was to expire and shall expire on that date.~~

(d) This section shall be a part of and supplemental to the Kansas healing arts act.

Sec. 6. K.S.A. 65-2896a is hereby amended to read as follows: 65-2896a. (a) No person's name shall be entered on the register of physicians' assistants by the state board of healing arts unless such person shall have has:

(1) Presented to the state board of healing arts proof of graduation from an accredited high school or the equivalent thereof; and

(2) presented to the state board of healing arts proof that the applicant has successfully completed a course of education and training approved by the state board of healing arts for the education and training of physicians' assistants, which course of education and training shall be substantially in conformity with educational and training programs for physicians' assistants approved by the state board of regents, or presented to the state board of healing arts proof that the applicant has acquired experience while serving in the armed forces of the United States which experience meets minimum requirements established by the state board of healing arts; and

(3) passed an examination approved by the state board of healing arts covering subjects incident to the education and training of physicians' assistants; and

(4) presented to the state board of healing arts the name and address of the applicant's responsible physician.

(b) A physician's assistant shall at the time of initial registration and any renewal thereof present to the state board of healing arts the name and address of his-or-her such person's

responsible physician. Whenever a physician's assistant shall cease to be employed by his-or-her the responsible physician, such responsible physician shall notify the state board of healing arts of such termination. Whenever a physician's assistant shall be employed by a responsible physician prior to the renewal of the physician's assistant's annual registration, such responsible physician shall notify the state board of healing arts of such employment. All such notifications shall be given to the state board of healing arts as soon as practicable but not to exceed a period of ~~ten-(±0)~~ 10 days after employment or termination.

(c) ~~On-and-after-July-17-1979,~~ The state board of healing arts shall require every physician's assistant to submit with the renewal application evidence of satisfactory completion of a program of continuing education required by the state board of healing arts. The state board of healing arts by duly adopted rules and regulations shall establish the requirements for such program of continuing education as soon as possible after the effective date of this act. In establishing such requirements the state board of healing arts shall consider any existing programs of continuing education currently being offered to physicians' assistants.

(d) A person whose name has been entered on the register of physicians' assistants prior to the effective date of this act shall not be subject to the provisions of subsection (a) ~~of this section,~~ unless such person's name has been removed from the register of physicians' assistants pursuant to the provisions of K.S.A. 65-2896b and amendments thereto.

Sec. 7. K.S.A. 65-2896e is hereby amended to read as follows: 65-2896e. (a) A person whose name has been entered on the register of physicians' assistants may perform, only under the direction and supervision of a physician, acts which constitute the practice of medicine and surgery to the extent and in the manner authorized by the physician responsible for the physician's assistant and only to the extent such acts are consistent with rules and regulations adopted by the board which

relate to acts performed by a physician's assistant under the responsible physician's direction and supervision. Before a physician's assistant shall perform under the direction and supervision of a physician, such physician's assistant shall be identified to the patient and others involved in providing the patient services as a physician's assistant to the responsible physician. A physician's assistant may not perform any act or procedure performed in the practice of optometry except as provided in K.S.A. 65-1508 and 65-2887 and amendments thereto.

(b) The board shall adopt rules and regulations governing the prescribing of drugs by physicians' assistants and the responsibilities of the responsible physician with respect thereto. Such rules and regulations shall establish such conditions and limitations on such prescribing of drugs as the board determines to be necessary to protect the public health and safety. In developing rules and regulations relating to the prescribing of drugs by physicians' assistants, the board shall take into consideration the amount of training and capabilities of physicians' assistants, the different practice settings in which physicians' assistants and responsible physicians practice, the degree of direction and supervision to be provided by a responsible physician and the needs of the geographic area of the state in which the physician's assistant and the responsible physician practice. In all cases in which a physician's assistant is authorized to prescribe drugs by a responsible physician, a written protocol between the responsible physician and the physician's assistant containing the essential terms of such authorization shall be in effect. In no case shall the scope of the authority of the physician's assistant to prescribe drugs exceed the normal and customary practice of the responsible physician in the prescribing of drugs.

Sec. 8. K.S.A. 65-2897a is hereby amended to read as follows: 65-2897a. The following words and phrases when used in this act shall ~~for--the--purpose--of--this--act~~ have the meanings respectively ascribed to them in this section:

(a) "Direction and supervision" means the guidance,

direction and coordination of activities of a physician's assistant by ~~his-or--her~~ such person's responsible physician, whether written or verbal, whether immediate or by prior arrangement, and in accordance with standards established by the board by rules and regulations, which standards shall be designed to ensure adequate direction and supervision by the responsible physician of the physician's assistant. The term "direction and supervision" shall not be construed to mean that the immediate or physical presence of the responsible physician is required during the performance of the physician's assistant.

(b) "Physician" means any person licensed by the state board of healing arts to practice medicine and surgery.

(c) "Physician's assistant" means a skilled person who is registered in accordance with the provisions of K.S.A. 65-2896a and amendments thereto and who is qualified by academic training to provide patient services under the direction and supervision of a physician who is responsible for the performance of that assistant.

(d) "Responsible physician" means a physician who has accepted continuous and ultimate responsibility for the actions of the physician's assistant while performing under the direction and supervision of the responsible physician.

Sec. 9. K.S.A. 65-2004, 65-2811a, 65-2852, 65-2895, 65-2896a, 65-2896e and 65-2897a and K.S.A. 1986 Supp. 65-2836 are hereby repealed.

Sec. 10. This act shall take effect and be in force from and after its publication in the statute book.



**Kansas
Respiratory
Therapy
Society**

15th and State / Emporia, Kansas 66801

Testimony to the Senate Public Health and Welfare
Committee

RE: SB 338

The Kansas Respiratory Care Society supports Senate
Bill 338 in it's entirety.
Thank you for your support.

Respectfully,

J. Michael Hinds, RRT
Lobbyist
KRCS

JMH:ptc

*S. P. H. W.
3-6-87
attachment 4*

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT

TESTIMONY ON SENATE BILL #339

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

This is the official position taken by the Kansas Department of Health and Environment on S.B. 339.

BACKGROUND INFORMATION:

S.B. 339 addresses the following four issues: the Kansas Health Planning Program, information disclosure statutes, the Kansas Credentialing Review Program, and the Medical Scholarship Program. I will briefly address each of these areas.

The Kansas Health Planning and Development Act was implemented in order to fulfill the provisions of the National Health Planning and Development Act of 1976. The Kansas Health Planning and Development Act created the Kansas Statewide Health Coordinating Council (SHCC), which is required to fulfill certain health planning functions, including the development of a state health plan and a medical facilities plan. On September 30, 1986 the National Health Planning and Development Act was repealed, relieving states of all federal health planning mandates. Repeal of the Kansas Health Planning and Development Act (K.S.A. 65-4701 et. seq.) is therefore consistent with federal trends.

The Kansas Medical Facilities Survey and Construction Act (K.S.A. 65-410 et. seq.) was also implemented to carry out federal mandates of the health planning program. Since the repeal of the federal health planning act, as discussed above, there is no longer a reason for statutorily mandating the development of a Kansas medical facilities plan.

Regarding the information disclosure provisions addressed in this bill (K.S.A. 65-436), we are concerned about the degree to which it restricts the public's access to individual hospital data. The statute now is more restrictive than it has been in the past; data from the annual hospital licensure survey, which was previously available through the health systems agencies (HSA's), is no longer accessible with the elimination of the HSA's. Other information collected for purposes of licensure has in the past and continues to be inaccessible to the public under this statute. In comparison, the statute regarding adult care home information disclosure (K.S.A. 39-934) allows for public disclosure of all information collected by KDHE regarding adult care homes, except for the names of individuals.

With respect to the Credentialing Program a small 8 to 10 member advisory body is needed to bring to the process the expertise and knowledge of individuals in the health care industry. This advisory body would be active in recruiting technical committee nominees, reviewing the work of the technical committee, and revising the Program as needed.

*S.P.H.W.
3-6-87
Attachment 5*

DEPARTMENT'S POSITION:

The Department makes the following recommendations on S.B. 339:

- Delete Section 1 of S.B. 339, which mandates the development of a Kansas medical facilities plan.
- Amend Section 2 of S.B. 339 to allow for full public disclosure of individual hospital data collected by KDHE, except where the name of an individual would be disclosed.

The Department supports the deletion of SHCC's role in the Medical Scholarship program.

HP/X13