

Approved 3/31/87  
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. on March 23, 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:

Representative Susan Roenbaugh  
A. J. Yarmat, Ph.D., Director, Center for Student Affairs and Educational  
Development, UMKC  
Tom C. Hitchcock, Executive Secretary, State Board of Pharmacy  
Ken Schafermeyer, Executive Director, Kansas Pharmacists Association  
Jerry Slaughter, Executive Director, Kansas Medical Association

Others attending: see attached list

Representative Susan Roenbaugh spoke in support of HB-2141. Representative Roenbaugh stated that due to the fact that doctors working in state institutions do not serve the general public but are included in the methodology when determining critically medically underserved and medically underserved areas, it appears these physicians should be excluded from the numbers serving such areas. This would enable Pawnee and Norton counties to be designated critically, medically underserved. (attachment 1)

A. J. Yarmat presented written testimony stating that it was very difficult to justify the inclusion of state hospital-based physicians in the determination of medically underserved areas. (attachment 2)

Senator Bond moved to pass out HB-2141 favorable. Senator Mulich seconded the motion. The motion carried.

Tom C. Hitchcock spoke in support of HB-2166. Mr. Hitchcock stated that a number of the changes in this bill were housekeeping in nature and other changes in the bill are bringing into the statutes what was previously in regulations that the administrative committee on rules and regulations felt had no statutory authority to promulgate such rules. (attachment 3) Considerable discussion concerning the ratio of supportive personnel followed the testimony of Mr. Hitchcock.

Ken Schafermeyer spoke in support of HB-2166, requesting that the committee pass HB-2166 intact and the association could then look at the supportive personnel ratio issue.

Jerry Slaughter presented an amendment by the Kansas Medical Society which defines "prescribe" and made changes to clarify the position of a physician's assistant in the area of transmitting a prescription order for drugs. (attachment 4)

Tom C. Hitchcock spoke in support of HB-2187. Mr. Hitchcock stated that this bill would exempt the drug dronabinol under Schedule I and place it under Schedule II. This drug has been under an emergency regulation permitting it's use by cancer patients. (attachment 5)

Ken Schafermeyer spoke in support of HB-2187 stating this bill is necessary as the present temporary law expires on May 1, 1987. Mr.

CONTINUATION SHEET

MINUTES OF THE SENATE COMMITTEE ON PUBLIC HEALTH AND WELFARE,  
room 526-S, Statehouse, at 10:00 a.m.~~xxx~~ on March 23, 1987.

Schafermeyer requested this bill be placed on the consent calendar due to the imminent expiration date.

The meeting adjourned at 10:55 a.m. and will meet March 24, 1987, at 10:00 a.m. in room 526-S.

SENATE  
PUBLIC HEALTH AND WELFARE COMMITTEE

DATE March 23, 1987

(PLEASE PRINT)  
NAME AND ADDRESS

ORGANIZATION

Bethanie Popejoy P.O. Box 466 Johnson, KS	Girl Scouts - Legislature Wider Opp.
Wendy Wiens 8005 Elth Newton, KS	Girl Scouts
Rose Stanley 233 W. Kansas Pittsburg, KS	Girl Scouts
Krista Linder 113 W. Park Pittsburg, KS 66262	Girl Scouts
Geanne Green 442 W. Broadway <sup>Sterling, KS</sup>	Girl Scouts
Martha Fee 607 Adair Cir. Hutchinson	Girl Scouts
John Peterson Topeka	Ks (Ps.) of Prof Psychologists
Tom Bell Topeka	Ks. Hosp. Assn
Marilyn Bradt, Lawrence	<sup>Nursing</sup> U.S. for Improvement of Homes
KEITH R LANDIS TOPEKA	CHRISTIAN SCIENCE COMMITTEE ON PUBLICATION FOR KANSAS
Tom Hitchcock Topeka	KS State Board of Pharmacy
Ken Schattemeyer Topeka	KS Pharmacists Association
Jerry Stultzen Topeka	KS Medical Society
Wm Stolo Topeka	KS Acad of Phys Ass'n

SENATE COMMITTEE ON PUBLIC HEALTH AND WELFARE

Senator Roy Ehrlich, Chairman

March 23, 1987

Presented by Representative Susan Roenbaugh

Thank you Mr. Chairman and Members of the Committee. I appreciate the opportunity to appear before you on HB 2141.

Pawnee County has for years, been listed in all statistics as being "over served" by physicians due to the counting of physicians practicing at Larned State Hospital.

Fifteen years ago Pawnee County did have a maximum of 11 practicing physicians serving Pawnee County residents. However, their practicing physician numbers have gradually dwindled to 3 at the present time. One is (Dr. T. D. Ewing) over 65-years old, one is an Iranian (54-years, Dr. M. N. Shah) difficult to understand, and Dr. V. R. Cade is a 75-year old D.O. that does not use the hospital. So you see, two of the three could easily retire at any time. An approximately 22 physicians practice at L.S.H., but do not serve the general public of approximately 8,100 persons. So they have one physician for every 2,700 people.

Medical scholarship students must agree to enter a full-time practice in an underserved area for the number of years they obtained the scholarship in exchange for tuition and stipends. A number of students have been attracted to the Pawnee County area, but end up going somewhere else when they learn the area is not medically underserved. The proposed bill would have no fiscal consequences for the administration of the Kansas Medical Scholarship Program and, according to Dr. Yarmat, would not cause any problems for the preparation of the annual medically underserved areas report.

I have visited at length with the Lt. Governor, Dr. Jack Walker, who has enthusiastically endorsed the direction of HB 2141 as the logical thing to do.

Dr. A. J. Yarmat, Director of the Center for Student Affairs and Educational Development at K.U. Med Center, is aware of the situation and has been in contact with the Physician Recruitment Committee in Larned, St. Joseph Hospital in Larned, and myself. He feels that HB 2141 will give them the statutory mandate to do what they were

SP&W  
3-23-87  
Attachment 1

# The University of Kansas Medical Center

Center for Student Affairs  
and Educational Development

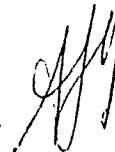
February 9, 1987

## MEMORANDUM

TO: Michael O'Keefe, Business Office

FROM: A. J. Yarmat, Ph.D., Director  
Center for Student Affairs and Educational Development

RE: House Bill 2141



The proposed amendment to K.S.A. 1986 Supp. 76-375 would have no fiscal consequences for the administration of the Kansas Medical Scholarship program. Neither would it pose problems for the preparation of the annual Medically Underserved Areas (MUA) Report, with the proviso that we receive from SRS updated rosters of physicians under their jurisdiction.

The proposed amendment coincides with an overall review of the methodology for determining medically underserved areas in Kansas that we have initiated at the KU Medical Center. The item addressed in the amendment is especially pertinent. We find it very difficult to justify the inclusion of state hospital-based physicians in the determination of medically underserved areas. Physicians at state hospitals are a special resource who provide minimal service outside of the hospital. Therefore we believe that it is inappropriate to include their service within the state hospital when assessing medical services that are available to the general public.

There seem to be instances in which state hospital-based physicians provide occasional services outside of the hospital. There also may be instances in which community-based physicians may be contracted to provide services at a state hospital. In either instance, whatever the specialty involved, we believe that only that percentage of time in service to the non-state hospital community should be included in the determination of physician supply.

By applying these considerations to medical manpower data for 1986, two counties would be shifted from a designation of adequately served to critically medically underserved in primary care, namely, Pawnee and Norton counties. The status of several secondary care areas in the specialty of psychiatry also would be changed to underserved. Those counties so affected would have a better opportunity to recruit physicians from the pool of KU graduates with commitments to practice in underserved areas of Kansas.

AJY:mf

cc: Executive Vice Chancellor Clawson

# Kansas State Board of Pharmacy

LONDON STATE OFFICE BUILDING  
900 JACKSON AVENUE, ROOM 513  
TOPEKA, KANSAS 66612-1220  
PHONE (913) 296-4056

STATE OF KANSAS



MIKE HAYDEN  
GOVERNOR

HOUSE BILL 2166

Senate Public Health and Welfare Committee

Mr. Chairman, members of the Committee, my name is Tom Hitchcock, and I serve as the Executive Secretary of the Kansas State Board of Pharmacy. I appear before you today on behalf of the Board to speak in favor of the passage of House Bill 2166, as amended by the House Committee.

The Board would like to publicly commend and thank the Joint Committee on Administrative Rules and Regulations for their assistance and diligence in helping to clean up the Pharmacy Act and the Controlled Substances Act. This consideration and interest has been invaluable to the Board.

A number of additions and deletion in House Bill 2166 have to do with housekeeping language. The major changes are pharmacy rules and regulations moved to the statute, as the Board did not have the statutory authority to make such regulations.

Commencing on page 4, line 0127, additional descriptive definition of pharmacist-in-charge allows the Board to promulgate rules and regulations as to the duties of a pharmacist-in-charge of a pharmacy.

The definition of a preceptor on the same page, line 0153, also is extracted from current regulations. As pharmaceutical experience is one of the requirements for licensure, regulating who supervises such experience is necessary.

Other items were also moved from regulations to statute to allow the Board statutory authority to regulate and control. On page 6, line 0221, to require a standard of education necessary as a requirement for licensure. On page 7, line 0255, requirement for reciprocity shall not be greater than the state of original licensure or one year of practice as a pharmacist. On page 8, line 288, requiring adequate communicative ability in English to protect the public health and welfare through patient communication and counseling. Page 10, line 0375, allowing some standard testing to assure competency to reinstate a previously licensed pharmacist. One page 11, line 0392, the ratio of supportive personnel to pharmacist is specifically set to a limitation of one-to-one.

SPH/W  
3-20-87  
attachment 3

House Bill 2166

Page 2

One page 12, line 043<sup>2</sup>~~4~~, the limit of the pharmacist examination fee was increased to \$250. The national exam cost to the Board will be raised from \$75 to \$150. The attached explanation indicates the necessity of such a fee increase.

Again, House Bill 2166 is a good bill and will be an asset to the Board, the public health and welfare, and the pharmacy profession.

TCH:arb

Attachment

KANSAS STATE BOARD OF PHARMACY  
Justification for Examination Fee Increase

K.A.R. 68-11-1 presently sets the examination fee at \$175.00. House Bill 2166 allows for the exam fee to not exceed \$250.00.

Setting the exam fee, by regulation, at \$250, 20% (\$50) will go to the State General Fund, with 80% (\$200) to the Pharmacy Fee Fund.

The costs per applicant are as follows:

NABPLEX exam	\$150.00
Lab fee	15.00
Inspector monitoring time	10.00
Certificates, stationery, postage, etc.	6.00
Secretary preparation time	<u>7.44</u>
Total cost per applicant	\$188.44

Revenue	\$200.00
Expense	<u>188.44</u>
Difference	\$ 11.56

Inspector monitoring time is based on two days for three Inspectors at their present salary and an estimated 45 applicants per exam. The secretary's preparation time includes all correspondence, scheduling, verifying information, and issuing licenses.

The above calculations do not take into account any salary increases or fringe benefits for employees.

Given the statutory authority, the Board will promulgate a regulation to become effective May 1, 1988 to raise the examination fee for applicants to \$250.



0157 *licensure as a pharmacist.*

0158 ~~(u)~~ (v) "Prescription" means, according to the context, either  
0159 a prescription order or a prescription medication.

0160 ~~(w)~~ (w) "Prescription medication" means any drug, including  
0161 label and container according to context, which is dispensed  
0162 pursuant to a prescription order.

0163 ~~(x)~~ (x) "Prescription-only drug" means any drug required by  
0164 the federal or state food, drug and cosmetic act to bear on its label  
0165 the legend "Caution: Federal law prohibits dispensing without  
0166 prescription."

0167 ~~(y)~~ (y) "Prescription order" means: (1) An order to be filled  
0168 by a pharmacist for prescription medication issued and signed by  
0169 a practitioner in the authorized course of professional practice, or  
0170 (2) an order transmitted to a pharmacist through word of mouth,  
0171 note, telephone or other means of communication directed by  
0172 such practitioner.

0173 ~~(z)~~ (z) "Probation" means the practice or operation under a  
0174 temporary license, registration or permit or a conditional license,  
0175 registration or permit of a business or profession for which a  
0176 license, registration or permit is granted by the board under the  
0177 provisions of the pharmacy act of the state of Kansas requiring  
0178 certain actions to be accomplished or certain actions not to occur  
0179 before a regular license, registration or permit is issued.

0180 ~~(aa)~~ (aa) "Retail dealer" means a person selling at retail non-  
0181 prescription drugs which are prepackaged, fully prepared by the  
0182 manufacturer or distributor for use by the consumer and labeled  
0183 in accordance with the requirements of the state and federal  
0184 food, drug and cosmetic acts. Such nonprescription drugs shall  
0185 not include: (1) A controlled substance; (2) a drug the label of  
0186 which is required to bear substantially the statement "Caution:  
0187 Federal law prohibits dispensing without prescription"; or (3) a  
0188 drug intended for human use by hypodermic injection.

0189 ~~(bb)~~ (bb) "Secretary" means the executive secretary of the  
0190 board.

0191 ~~(cc)~~ (cc) "Unprofessional conduct" means:

- 0192 (1) Fraud in securing a registration or permit;  
0193 (2) intentional adulteration or mislabeling of any drug, med-

(v) "Prescribe" means an independent order by a practitioner authorizing the use, administration or dispensing of a prescription-only drug, but does not include the act of transmitting a prescription order pursuant to the direction or order of a practitioner.

SP/VAW  
3-23-87  
Attachment 4

0380 rules and regulations shall establish the requirements for such  
0381 program of continuing education as soon as possible after the  
0382 effective date of this act. In establishing such requirements the  
0383 state board of healing arts shall consider any existing programs of  
0384 continuing education currently being offered to physicians' as-  
0385 sistants.

0386 (d) A person whose name has been entered on the register of  
0387 physicians' assistants prior to the effective date of this act shall  
0388 not be subject to the provisions of subsection (a) of this section,  
0389 unless such person's name has been removed from the register of  
0390 physicians' assistants pursuant to the provisions of K.S.A. 65-  
0391 2896b and amendments thereto.

0392 Sec. 7. K.S.A. 65-2896e is hereby amended to read as fol-  
0393 lows: 65-2896e. (a) A person whose name has been entered on  
0394 the register of physicians' assistants may perform, only under the  
0395 direction and supervision of a physician, acts which constitute  
0396 the practice of medicine and surgery to the extent and in the  
0397 manner authorized by the physician responsible for the physi-  
0398 cian's assistant and only to the extent such acts are consistent  
0399 with rules and regulations adopted by the board which relate to  
0400 acts performed by a physician's assistant under the responsible  
0401 physician's direction and supervision. Before a physician's as-  
0402 sistant shall perform under the direction and supervision of a  
0403 physician, such physician's assistant shall be identified to the  
0404 patient and others involved in providing the patient services as a  
0405 physician's assistant to the responsible physician. A physician's  
0406 assistant may not perform any act or procedure performed in the  
0407 practice of optometry except as provided in K.S.A. 65-1508 and  
0408 65-2887 and amendments thereto.

0409 (b) The board shall adopt rules and regulations governing  
0410 the ~~prescribing of drugs~~ by physicians' assistants and the re-  
0411 sponsibilities of the responsible physician with respect thereto.  
0412 Such rules and regulations shall establish such conditions and  
0413 limitations ~~on such prescribing of drugs~~ as the board determines  
0414 to be necessary to protect the public health and safety. In  
0415 developing rules and regulations relating to ~~the prescribing of~~  
0416 ~~drugs~~ by physicians' assistants, the board shall take into con-

A physician's assistant may not prescribe drugs,  
as defined in K.S.A. 65-1626 and amendments thereto,  
but may transmit a prescription order for drugs  
as authorized by the responsible physician.

transmitting of prescription orders for drugs

transmitting of prescription orders for drugs

0417 sideration the amount of training and capabilities of physicians'  
 0418 assistants, the different practice settings in which physicians'  
 0419 assistants and responsible physicians practice, the degree of  
 0420 direction and supervision to be provided by a responsible phy-  
 0421 sician and the needs of the geographic area of the state in which  
 0422 the physician's assistant and the responsible physician practice.  
 0423 In all cases in which a physician's assistant is authorized to  
 0424 ~~prescribe drugs~~ by a responsible physician, a written protocol  
 0425 between the responsible physician and the physician's assistant  
 0426 containing the essential terms of such authorization shall be in  
 0427 effect. In no case shall the scope of the authority of the physi-  
 0428 cian's assistant to ~~prescribe drugs~~ exceed the normal and cus-  
 0429 tomary practice of the responsible physician in the prescribing  
 0430 of drugs.

| transmit prescription orders for drugs

| transmit prescription orders for drugs

0431 Sec. 8. K.S.A. 65-2897a is hereby amended to read as fol-  
 0432 lows: 65-2897a. The following words and phrases when used in  
 0433 this act shall for the purpose of this act have the meanings  
 0434 respectively ascribed to them in this section:

0435 (a) "Direction and supervision" means the guidance, direc-  
 0436 tion and coordination of activities of a physician's assistant by his  
 0437 or her such person's responsible physician, whether written or  
 0438 verbal, whether immediate or by prior arrangement, and in  
 0439 accordance with standards established by the board by rules  
 0440 and regulations, which standards shall be designed to ensure  
 0441 adequate direction and supervision by the responsible physician  
 0442 of the physician's assistant. The term "direction and supervi-  
 0443 sion" shall not be construed to mean that the immediate or  
 0444 physical presence of the responsible physician is required dur-  
 0445 ing the performance of the physician's assistant.

0446 (b) "Physician" means any person licensed by the state board  
 0447 of healing arts to practice medicine and surgery.

0448 (c) "Physician's assistant" means a skilled person who is  
 0449 registered in accordance with the provisions of K.S.A. 65-2896a  
 0450 and amendments thereto and who is qualified by academic  
 0451 training to provide patient services under the direction and  
 0452 supervision of a physician who is responsible for the perform-  
 0453 ance of that assistant.

# Kansas State Board of Pharmacy

LONDON STATE OFFICE BUILDING  
900 JACKSON AVENUE, ROOM 513  
TOPEKA, KANSAS 66612-1220  
PHONE (913) 296-4056

STATE OF KANSAS



MIKE HAYDEN  
GOVERNOR

HOUSE BILL 2187

Senate Public Health and Welfare Committee

Mr. Chairman, members of the Committee, my name is Tom Hitchcock, and I serve as the Executive Secretary of the Kansas State Board of Pharmacy. I appear before you today on behalf of the Board to speak in favor of the passage of House Bill 2187.

The Board would like to publicly commend and thank the Joint Committee on Administrative Rules and Regulations for their assistance and diligence in helping to clean up the Pharmacy Act and the Controlled Substances Act. This consideration and interest has been invaluable to the Board.

The first change in the bill is exempting the drug dronabinol under Schedule I. Dronabinol is then placed under Schedule II, which allows this drug to be prescribed and dispensed under certain restrictions. Dronabinol has been federally rescheduled into Schedule II.

On page 7, line 0697, allows the Board to charge reregistration fees. This was previously done pursuant to regulation. This would now give the Board statutory authority to charge such a fee.

On page 10, lines 0787 through 0814, allows the Board the statutory authority to modify a registration and charge a certain fee. This also indicates when a registration terminates and allows registrants to change their name by filing notification of such change with the Board. This also prohibits the transfer of registrations. All of these provisions were previously written under regulations.

House Bill 2187 is a good bill and will be an asset to the Board and public health and welfare.

TCH:arb

*S. P. H. W.*  
*3-23-87*  
*Attachment 5*