

Approved February 27, 1990
Date

MINUTES OF THE SENATE COMMITTEE ON LOCAL GOVERNMENT

The meeting was called to order by Sen. Don Montgomery at
Chairperson

9:00 a.m./~~p.m.~~ on February 26, 1990 in room 531-N of the Capitol.

All members were present except:

Senators Steineger and Langworthy - Excused

Committee staff present:

Mike Heim, Legislative Research
Theresa Kiernan, Revisor of Statutes
Shirley Higgins, Committee Secretary

Conferees appearing before the committee:

Bob McDanel, Administrator, Board of Emergency Services
Bob Orth, Chairman, Board of Emergency Services

The hearing began on SB 668 relating to the powers, duties and functions of the Emergency Medical Services Board. Bob McDanel, Administrator of the Emergency Medical Services Board, testified in support of the bill and explained the amendments offered in the balloon of the bill. (See Attachments I and II). Mr. McDanel noted that he is no longer requesting the amendment on page 4, line 2 deleting language.

Sen. Daniels began a discussion regarding the ambulance service in transferring a patient from hospital to hospital as to a difference of opinion if a physician should be in charge of determining what type of personnel should accompany the patient. Mr. McDanel said the deletion on page 4 of the bill gives the physician the prerogative to decide on the care of the patient during the transfer and the condition of the person who is being transferred.

Sen. Daniels then began a discussion regarding the time involved in issuing an attendant's certification. Mr. McDanel said it takes between three to five working days to issue the certificate. A longer period of time is involved from the point of the examination which involves five to fifteen days from the point of the examination and the application. Sen. Daniels determined that the whole process involves a total of around thirty days with time allowed for mail service.

A discussion of Section 3 began as to if the authority or flexibility of a physician should be legislated insofar as determining if a patient currently in the hospital is stable enough to be transferred. It was clarified that this decision involves hospital to hospital transfers and not in the field situations. Deleting the language as shown on page 4 of the bill allows the physician to determine who accompanies during the transport. It is up to the legislature to determine what discretion the physician has. Sen. Burke felt this is an area that needs to be looked into. He feels that the best decision is generally one made by the physician. Bob Orth, Chairman of the Board of the Emergency Medical Services, stood to inform the committee that he was the one who had requested the change, but after talking to other board members who were not in agreement with him, he decided to leave the language as is. He feels that the physician should have the authority to make the decision. This is especially true in small towns. Mr. Orth feels since he is capable of transporting persons out in the field, he also should be trusted to transfer persons from one hospital to another. Mr. McDanel added that deleting would not interfere with how the Board regulates.

Sen. Burke made a motion that the language on page 4, line 2 remain stricken to give broader authority to the attending physician, Sen. Allen seconded.

A discussion began regarding the effect of the motion. It was noted that

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 LOCAL GOVERNMENT,

room 531-N, Statehouse, at 9:00 a.m. ~~XXXX~~ on February 26, 1990.

this could be a critical decision and that the doctor could still authorize transport by EMT. On a call for a vote on Sen. Burke's motion, the motion carried.

Mr. Orth noted that the change made on page 7, line 7 should also be made on line 24 of the same page. Also, he had an additional amendment on page 3 between lines 42 and 43, "administer syrup of ipecac, activated charcoal and glucose", to offer. He feels this is needed for clarification because it is not presently in the statute and is not prohibited.

With regard to the Board's subpoena powers for the records of continuing education, Mr. Orth asked that it apply to attendants in addition to the present application to operators. Sen. Burke stated that subpoena powers can be abused. Mr. Orth said the EMS subpoena is under the supervision of the Attorney General's office. The Chairman asked that staff research this and that the Executive Director testify for the House committee when the bill is heard there.

Staff questioned the change from "the" to "each" on the last line of page 5. Mr. McDaneld said this was thought necessary to clarify that it applies to each time a vehicle is used in one day rather than a particular day used. The Chairman felt that "the" was appropriate. Mr. McDaneld said he had no problem with the current language.

Sen. Gaines made a motion to adopt the amendments to SB 668, Sen. Frahm seconded, and the motion carried.

Sen. Allen made a motion to report SB 668 favorable for passage as amended, Sen. Frahm seconded, and the motion carried.

The minutes of February 21 were approved.

The meeting was adjourned at 10:03 a.m.



State of Kansas

BOARD OF EMERGENCY MEDICAL SERVICES

109 S.W. 6TH STREET, TOPEKA, KS 66603-3805

(913) 296-7296 Administration

(913) 296-7403 Education & Training

(913) 296-7299 Examination & Certification

(913) 296-7408 Planning & Regulation

Bob McDanel
Administrator

Mike Hayden
Governor

DATE: February 26, 1990

TO: Senate Committee on Local Government

FROM: Bob McDanel, Administrator *BM*

SUBJECT: Written Testimony in Support of SB 668

Mr. Chairman and members of the committee:

I am Bob McDanel, the administrator of the Emergency Medical Services Board. I would like to thank the committee for introducing SB 668, which is the legislative package of the board. I am appearing this morning as a proponent of this bill.

When the Emergency Medical Services Board was created by the 1988 Legislature, a decision was made to consolidate existing emergency medical services statutes rather than draft new language. There appeared to be legislative consensus that the Emergency Medical Services Board could recommend changes if and when the board found it necessary. After almost two years of operation, the board is requesting SB 668 to correct some technical problems with the statutes and clarify the roles of the board.

Please note that board members were unable to review the actual bill prior to approving requested changes. Since the bill was drafted, a number of board members have called me requesting other changes be made. (These changes have been incorporated in the balloon copy which is attached to this testimony. Using the balloon copy, I will quickly summarize each change to the current statutes:

Page 1, line 25: Add first responders and instructor-coordinators. (This would ensure that the records and equipment of all entities regulated by the board are included.)

Page 1, line 28: Delete (b). (This section is no longer necessary. The board is able to waive vehicle requirements in those instances where the board believes it to be merited.)

Page 1, line 32: Add new (b) (This would clarify the board does not regulate rescue vehicles operated by fire departments.)

Page 1, line 40: (This would clarify the definition of ambulance to ensure that wheel chair vans and similar vehicles are not regulated by the board.)

(Continued on next page.)

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Attachment I*

Page 2, line 2: (This would clarify the definition of ambulance service to ensure the board will not regulate hospitals, nursing homes, and social service agencies which transport clients but do not provide medical treatment or emergency transportation.)

Page 2, line 16: (This would clarify the definition of "crash injury management technician.")

Page 2, line 29: (This would clarify the definition of "emergency medical technician.")

Page 2, line 34: (This would clarify the definition of "emergency medical technician-defibrillator.")

Page 2, line 41: (This would clarify the definition of "emergency medical technician-intermediate.")

Page 3, line 8: (This would clarify the definition of "instructor-coordinator.")

Page 3, line 15: (This would clarify the definition of "mobile intensive care technician.")

No change
Page 4, line 2: (Deletion of this language would provide a physician with more flexibility in determining patient care during inter-hospital transports. This would be particularly valuable in rural areas, where RN and MICT shortages may be critical.)

Page 4, line 7: (This would clarify the role of the EMT in monitoring intravenous fluids.)

Page 4, line 19: (This paragraph is unnecessary.)

Page 4, line 26: (This change would give the board more flexibility in taking regulatory action on service permits.)

Page 4, line 43: (This change is necessary to have statutory language conform to the change proposed above.)

Page 5, line 6: (This makes the language identical to other sections.)

Page 5, line 26: (This would give the board more flexibility in taking regulatory action against instructor-coordinators.)

Page 5, line 41: (This would provide the board greater control over use of unlicensed vehicles.)

Page 6, line 25: (This makes the language identical to other sections.)

(Continued on next page.)

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Page 6, line 43: (This makes the language identical to other sections.)

Page 7, line 7: (This would add three levels of attendants to those who could be certified to use automated defibrillators.)

Page 7, line 29: (This would change the period of automated defibrillator certification from one year from the date of course completion to a calendar year basis. This would simplify scheduling training for attendants and service operators, and record-keeping for the board, attendants and service operators.)

Page 8, line 14: (This would make it possible for fire districts to use first responders or other attendants to provide emergency medical services. This change was proposed by the fire chief of Soldier Township.)

In closing, the board believes SB 668 makes necessary corrections to existing emergency medical services statutes. The support of the Senate Committee on Local Government is requested. I would be happy to stand for any questions the committee may have.

RM/st

SENATE BILL No. 668

By Committee on Local Government

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AN ACT concerning the emergency medical services board; relating to the powers, duties and functions thereof; amending K.S.A. 80-1557 and K.S.A. 1989 Supp. 65-6110, 65-6112, 65-6121, 65-6126, 65-6132, 65-6133, 65-6136, 65-6146 and 65-6149 and repealing the existing sections.

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

Section 1. K.S.A. 1989 Supp. 65-6110 is hereby amended to read as follows: 65-6110. (a) The board shall adopt any rules and regulations necessary for the regulation of ambulance services. Such rules and regulations shall include: (1) A classification of the different types of ambulance services; (2) requirements as to equipment necessary for ambulances and rescue vehicles; (3) qualifications and training of attendants, instructor-coordinators and first responders; (4) requirements for the licensure and renewal of licensure for ambulances and rescue vehicles; (5) records and equipment to be maintained by operators and attendants and (6) such other matters as the board deems necessary to implement and administer the provisions of this act.

~~(b) Vehicles in use as emergency ambulances on July 1, 1975, may continue to be used for this purpose as long as the owner or lessee of such vehicle as of July 1, 1977, continues to own or lease such vehicle.~~

~~(b) The provisions of this act shall not apply to rescue vehicles operated by a fire department.~~

Sec. 2. K.S.A. 1989 Supp. 65-6112 is hereby amended to read as follows: 65-6112. As used in this act: (a) "Administrator" means the administrator of the emergency medical services board.

(b) "Ambulance" means any privately or publicly owned motor vehicle, airplane or helicopter designed, constructed, prepared and equipped for use in transporting and providing emergency care for individuals who are ill, or injured or otherwise disabled, including specially constructed and equipped motor vehicle, airplane or helicopter which is capable of providing life support services for extended periods of time.

, instructor-coordinators, first responders

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Attachment III

(c) "Ambulance service" means any organization operated for the purpose of transporting sick, or injured, disabled or otherwise incapacitated persons to or from a place where medical care is furnished, whether or not such persons may be in need of emergency or medical care in transit.

(d) "Attendant" means a crash injury management technician, an emergency medical technician, an emergency medical technician-intermediate, an emergency medical technician-defibrillator or a mobile intensive care technician whose primary function is ministering to the needs of persons requiring emergency medical services.

(e) "Board" means the emergency medical services board established pursuant to K.S.A. 1988 1989 Supp. 65-6102, and amendments thereto.

(f) "Crash injury management technician" means any person who has successfully completed a course of training, approved by the board, in preliminary emergency medical care.

(g) "Emergency medical service" means a service which provides for the effective and coordinated delivery of such emergency care as may be required by an emergency, including services provided by first responders and transportation of individuals by ground or air ambulances and the performance of authorized emergency care by a person licensed to practice medicine and surgery, a licensed professional nurse, a registered physician's assistant, a crash injury management technician, an emergency medical technician, emergency medical technician-intermediate, emergency medical technician-defibrillator or a mobile intensive care technician.

(h) "Emergency medical technician" means any person who has successfully completed a course of training, approved by the board, in preliminary emergency medical care.

(i) "Emergency medical technician-defibrillator" means any person, currently certified as an emergency medical technician or emergency medical technician-intermediate, who has successfully completed a training program in cardiac defibrillation approved by the board.

(j) "Emergency medical technician-intermediate" means any person, currently certified as an emergency medical technician, who, after not less than one year's certification as an emergency medical technician, has successfully completed a course of training approved by the board which includes training in veni-puncture for blood sampling and administration of intravenous fluids and advanced patient assessment.

(k) "First responder" means a person who has successfully completed a course of training in preliminary emergency care, who holds

who holds a valid crash injury management technician certificate under this act.

who holds a valid emergency medical technician certificate under this act.

who holds a valid emergency medical technician-defibrillator certificate under this act.

or emergency medical technician-defibrillator

who holds a valid emergency medical technician-intermediate certificate under this act

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a valid first responder certificate under this act and who provides services to individuals in need of emergency medical care that assist in stabilization or improvement of such individual's condition until personnel with a higher level of training arrive at the scene and assume responsibility for the individual.

(l) "Instructor-coordinator" means any person who has successfully completed a course of training, approved by the board, to instruct attendants.

and first responders, who holds a valid instructor-coordinator certificate under this act.

(m) "Local component medical society" means a county medical society or a multicounty medical society.

(n) "Medical adviser" means a person licensed to practice medicine and surgery.

(o) "Mobile intensive care technician" means any person who has successfully completed a course of training, approved by the board, in emergency ~~cardiac and noncardiac care in a training program.~~

medical care, who holds a valid mobile intensive care technician certificate under this act.

(p) "Municipality" means any city, county, township, fire district or ambulance service district.

(q) "Operator" means a person or municipality who has a permit to operate an ambulance service in the state of Kansas.

(r) "Person" means an individual, a partnership, an association, a joint-stock company or a corporation.

Sec. 3. K.S.A. 1989 Supp. 65-6121 is hereby amended to read as follows: 65-6121. Notwithstanding any other provision of law to the contrary, an emergency medical technician may perform any of the following:

- (a) Patient assessment and vital signs;
- (b) airway maintenance to include use of:
 - (1) Oropharyngeal and nasopharyngeal airways;
 - (2) esophageal obturator airways with or without gastric suction device; and
 - (3) oxygen demand valves.
- (c) Oxygen therapy;
- (d) oropharyngeal suctioning;
- (e) cardiopulmonary resuscitation procedures;
- (f) control accessible bleeding;
- (g) application of pneumatic anti-shock garment;
- (h) management of outpatient medical emergencies;
- (i) extrication of patients and lifting and moving techniques;
- (j) management of musculoskeletal and soft tissue injuries to include dressing and bandaging wounds or the splinting of fractures, locations, sprains or strains;
- (k) use of backboards to immobilize the spine; or
- (l) monitor peripheral intravenous line delivering intravenous

fluids during interfacility transport with the following restrictions:

(1) ~~The patient is noncritical and deemed stable by the transferring physician and the physician approves the transfer by an emergency medical technician;~~

(2) no medications or nutrients have been added to the intravenous fluids;

(3) the emergency medical technician may monitor and, maintain and shut off the flow of intravenous fluid and shut off the flow except that by voice contact with a person licensed to practice medicine and surgery or a registered professional nurse when authorized by a person licensed to practice medicine and surgery the intravenous line may be discontinued.

Sec. 4. K.S.A. 1989 Supp. 65-6126 is hereby amended to read as follows: 65-6126. (a) ~~Except as provided in subsection (b),~~ Each emergency medical service shall have a medical adviser appointed by the operator of the service to review, approve and monitor the activities of the attendants. The board may approve an alternative procedure for medical oversight if no medical adviser is available.

(b) ~~Each emergency medical service which employs an emergency medical technician-defibrillator shall have a medical adviser appointed by the operator of the service to review, approve and monitor the activities of the emergency medical technician-defibrillator.~~

Sec. 5. K.S.A. 1989 Supp. 65-6132 is hereby amended to read as follows: 65-6132. (a) An operator's permit may be denied, revoked, limited, modified or suspended by the board upon proof that such operator or any agent or employee thereof:

(1) Has been guilty of misrepresentation in obtaining the permit or in the operation of the ambulance service;

(2) has engaged or attempted to engage in, or represented themselves as entitled to perform, any ambulance service not authorized in the permit;

(3) has demonstrated incompetence as defined by rules and regulations adopted by the board or has shown themselves otherwise unable to provide adequate ambulance service;

(4) has failed to keep and maintain the records required by the provisions of this act, or the rules and regulations promulgated thereunder, or has failed to make reports when and as required;

(5) has knowingly operated faulty or unsafe equipment; or

(6) has violated or aided and abetted in the violation of any provision of this act or the rules and regulations promulgated thereunder.

(b) The board shall not *limit, modify, revoke* or suspend any

← Delete this language.

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operator's permit pursuant to this section without first conducting a hearing in accordance with the provisions of the administrative procedure act.

Sec. 6. K.S.A. 1989 Supp. 65-6133 is hereby amended to read as follows: 65-6133. (a) An attendant's or instructor-coordinator's certificate may be denied, revoked, ~~modified~~ or suspended by the board upon proof that such attendant:

limited,

(1) Has been guilty of misrepresentation in obtaining the certificate;

(2) has engaged or attempted to engage in, or represented themselves as entitled to perform, any service not authorized in the certificate;

(3) has demonstrated incompetence as defined by rules and regulations adopted by the board or has shown themselves otherwise unable to provide adequate service;

(4) has violated or aided and abetted in the violation of any provision of this act or the rules and regulations promulgated thereunder;

(5) has been convicted of a felony and, after investigation by the board, it is determined that such person has not been sufficiently rehabilitated to warrant the public trust;

(6) has demonstrated habitual intemperance or is addicted to the use of habit-forming drugs; or

(7) has engaged in unprofessional conduct, as defined by rules and regulations adopted under this act.

(b) The board shall not *limit, modify*, revoke or suspend any attendant's or instructor-coordinator's certificate pursuant to this section without first conducting a hearing in accordance with the provisions of the Kansas administrative procedure act.

Sec. 7. K.S.A. 1989 Supp. 65-6136 is hereby amended to read as follows: 65-6136. (a) Nothing in this act shall be construed:

(1) To prevent the operation of a police emergency vehicle;

(2) to affect any statute or regulatory authority vested in the department of transportation concerning automotive equipment and safety requirements;

(3) to prohibit any privately owned vehicles and aircraft not ordinarily used in the ambulance service business from transporting persons who are sick, injured, wounded or otherwise incapacitated or helpless;

(4) to prevent any vehicle from being pressed into service as an ambulance *when the operator determines an emergency exists and provides written notification to the board within 72 hours after the use of such vehicle;* or

each

1 (5) to prohibit any ambulance lawfully operating under the laws
2 of a state adjoining Kansas from providing emergency transportation
3 of a patient from a municipality not otherwise served by an am-
4 bulance service located in Kansas to a location within or outside the
5 state of Kansas when the governing body of such municipality de-
6 clares a hardship. The governing body or board shall notify the board
7 30 days prior to the initiation of such out-of-state service.

8 (b) Ambulances owned and operated by an agency of the United
9 States government shall be exempt from the provisions of this act.

10 (c) Any ambulance based outside of this state receiving a patient
11 within the state for transportation to a location within this state or
12 receiving a patient within this state for emergency transportation to
13 a location outside this state shall comply with the provisions of this
14 act except when such ambulance is rendering service in the case of
15 a major catastrophe, such ambulance is making a prearranged hos-
16 pital-to-hospital transfer or except as otherwise provided by rules
17 and regulations adopted by the board.

18 New Sec. 8. (a) It shall be unlawful for any individual to rep-
19 resent oneself as an attendant or instructor-coordinator unless such
20 individual holds a valid certificate as such under this act.

21 (b) Any violation of subsection (a) shall constitute a class B
22 misdemeanor.

23 Sec. 9. K.S.A. 1989 Supp. 65-6146 is hereby amended to read
24 as follows: 65-6146. (a) A first responder's certificate may be denied,
25 revoked, limited, *modified* or suspended by the board upon proof
26 that such first responder:

27 (1) Has been guilty of misrepresentation in obtaining the
28 certificate;

29 (2) has engaged or attempted to engage in, or represented oneself
30 as entitled to perform, any service not authorized in the certificate;

31 (3) has demonstrated incompetence as defined by rules and reg-
32 ulations adopted by the board or has shown oneself otherwise unable
33 to provide adequate service;

34 (4) has violated or aided and abetted in the violation of any
35 provision of this act or the rules and regulations promulgated
36 thereunder;

37 (5) has been convicted of a felony and, after investigation by the
38 board, it is determined that such person has not been sufficiently
39 rehabilitated to warrant the public trust;

40 (6) has demonstrated habitual intemperance or is addicted to the
41 use of habit-forming drugs; or

42 (7) has engaged in unprofessional conduct.

43 (b) The board shall not revoke, limit, *modify* or suspend any first

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1 responder's certificate pursuant to this section without first con-
2 ducting a hearing in accordance with the provisions of the Kansas
3 administrative procedure act. Proceedings under this section may be
4 initiated by the board or by any person filing written charges with
5 the board.

6 Sec. 10. K.S.A. 1989 Supp. 65-6149 is hereby amended to read
7 as follows: 65-6149. (a) Any certified first responder, ~~emergency med-~~
8 ~~ical technician or emergency medical technician intermediate~~ in this
9 state may be certified in the use of automated defibrillators for cardiac
10 defibrillation in accordance with the provisions of this act. The board
11 shall adopt rules and regulations establishing minimum, basic stand-
12 ards governing training in the use of automated defibrillators in
13 accordance with this act. This training shall be conducted by in-
14 structors who are qualified to conduct such training in accordance
15 with the rules and regulations adopted by the board. The minimum
16 course of training shall be not less than four clock hours in length
17 and the maximum course of training shall be not more than six clock
18 hours in length.

← or attendant

19 (b) Each local service provider shall develop medical protocols
20 consistent with the criteria established by the board and approved
21 by the local component medical society if available.

22 (c) Upon the satisfactory completion of training in the use of
23 automated defibrillators for cardiac defibrillation as authorized under
24 this section, the certified first responder, emergency medical tech-
25 nician or emergency medical technician-intermediate who has sat-
26 isfactorily completed such training shall be issued a certificate
27 indicating that such person has satisfactorily completed such training.
28 The certificate shall be issued in a form prescribed by the board by
29 rules and regulations. The certificate shall be valid ~~for one through~~
30 ~~December 31 of the year following the date of initial~~ issuance and
31 may be renewed ~~upon the expiration thereof at the end of such~~
32 ~~one-year period thereafter for a period of one year~~ by retaking
33 and satisfactorily completing the training in the use of automated
34 defibrillators for cardiac defibrillation authorized under this section.
35 An individual who holds a valid certificate under this subsection (c)
36 may perform cardiac defibrillation with an automated defibrillator on
37 a pulseless, nonbreathing patient.

38 (d) No individual who holds a valid certificate under subsection
39 (c) for the satisfactory completion of training in the use of automated
40 defibrillators for cardiac defibrillation shall be liable for civil damages
41 as a result of the use by such individual of an automated defibrillator
42 to provide cardiac defibrillation during an emergency, except such
43 damages which may result from gross negligence or by willful or

anton acts or omissions on the part of such individual.

Sec. 11. K.S.A. 80-1557 is hereby amended to read as follows:
80-1557. (a) As used in this section:

(1) "Rescue service" means a service which provides emergency care by qualified personnel through a township or fire district fire department.

(2) "Emergency care" means the services provided after the onset of a medical condition manifesting itself by acute symptoms of sufficient severity such that the absence of immediate medical attention could reasonably be expected to: (A) Place the patient's health in serious jeopardy; (B) seriously impair bodily functions; or (C) result in serious dysfunction of any bodily organ or part.

(3) "Qualified personnel" means any individual who holds a certificate as a ~~crash injury management technician, an emergency medical technician, an emergency medical technician intermediate or a mobile intensive care technician~~ *an attendant or first responder*, as these terms are defined in K.S.A. ~~65-4301~~ 65-6112, and amendments thereto.

(4) "Township" means any township which has established a fire department pursuant to K.S.A. 80-1901 *et seq.*, and amendments thereto.

(5) "Fire district" means any fire district which has established a fire department pursuant to K.S.A. 80-1540 *et seq.*, and amendments thereto.

(b) The township board or governing body of the fire district may authorize the township or fire district fire department to provide rescue service as a township or fire district function, within or without the township or fire district, or may contract with any person or governmental entity for the furnishing of rescue service and upon such terms and conditions, and for such compensation as may be agreed upon which shall be payable from the township general fund or the fire fund or the fire district fund.

(c) The township board or governing body of the fire district may establish charges to persons receiving rescue service inside or outside of such township or fire district. The charges so made and received shall be deposited in the general funds of the township or fire district, and the same may be used in addition to funds received under the tax levies authorized by K.S.A. 80-1546 and 80-1903, and amendments thereto and ~~K.S.A. 80-1546 and amendments thereto.~~

(d) Qualified personnel providing rescue service shall be compensated in the same manner as other fire department employees and volunteers as provided by K.S.A. 80-1544 and 80-1904, and amendments thereto and ~~by K.S.A. 80-1544 and amendments~~

thereto.

Sec. 12. K.S.A. 80-1557 and K.S.A. 1989 Supp. 65-6110, 65-6112, 65-6121, 65-6126, 65-6132, 65-6133, 65-6136, 65-6146 and 65-6149 are hereby repealed.

Sec. 13. This act shall take effect and be in force from and after its publication in the statute book.