

Approved 2-18-91
Date 2-18-91

MINUTES OF THE HOUSE COMMITTEE ON PUBLIC HEALTH AND WELFARE

The meeting was called to order by Carol H. Sader at
Chairperson

1:30 a.m./p.m. on February 14, 1991 in room 423-S of the Capitol.

All members were present except:

Representative Theo Cribbs, excused

Committee staff present:

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

Conferees appearing before the committee:

Bob Wunsch, Legislative Liaison for Ks. Univ. Medical Center
Steve McDowell, Director Local/Rural Health Services, Department of
Health/Environment (appeared to answer questions).

Chairperson Sader called meeting to order. She gave background on HB 2016, noting there is a motion to amend the bill made by Rep. Neufeld and seconded by Rep. Love, carried over from meeting on February 7, 1991. Chair stated she had requested staff to invite a representative from the Ks. University Medical Center to react to this proposed amendment. She then invited Mr. Wunsch comment. Chair drew attention to (Attachment No. 1), a newly prepared balloon copy of proposed amendments, per request of Chair.

Mr. Bob Wunsch, Legislative Liaison from Ks. Univ. Medical Center, stated anything making health care better for the citizens of Kansas is supported by the Med Center. He stated support of HB 2016 in its original form. However, if a Commission is created in the proposed amendment, it will create a separate entity, an agency created much like the Medical Center. The position of KUMC is that one agency should not be housed within another agency. He noted concerns regarding this type of arrangement, such as: sharing space, sharing utilities, parking, police protection. He stated if such a Commission is to be appointed, the appointment should come from the Governor. Under these circumstances, KUMC does not favor the amendment proposed. He answered questions, i.e., if the bill did not contain the amendment proposed, they could support HB 2016; they would take operating expenses from the general fund; administration costs would come out of the appropriation. Discussion continued.

Chair thanked Mr. Wunsch for attending this date to convey position of KUMC.

After further discussion, Rep. Neufeld closed on his motion to amend HB 2016 as per balloon indicated this date in (Attachment No. 1), noting the initial intent of the bill is to deliver services to the people. He urged support for his amendment.

Chair then called for a vote on the motion. Vote taken, division requested 7 in favor, 10 against, motion failed.

HB 2016 as a whole.

Rep. Wiard moved to pass out HB 2016 favorably as amended, seconded by Rep. Praeger. Discussion ensued. Rep. Wiard, Rep. Praeger then both withdrew their motions.

CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON PUBLIC HEALTH AND WELFARE,
room 423-S, Statehouse, at 1:30 /a.m./p.m. on February 14, 1991

DISCUSSION CONTINUED ON HB 2016:--

Rep. Bishop moved to amend HB 2016 on page 4, line 7, as indicated in (Attachment No. 1). Motion seconded by Rep. Wiard. Discussion ensued. Vote taken, division requested, 7 in favor, 10 against, motion failed. (Attachment 2)

Mr. Furse recognized by the Chair noted the Committee might wish to offer a position on whether or not compensation would be given to the Commission members. It has not been stipulated one way or the other in the bill, as generally is done in statutes. Discussion ensued.

Rep. Amos moved to amend HB 2016 to add language stipulating compensation for Advisory Board members for meals, lodging, mileage, normal expenses incurred while attending Board meetings. Motion seconded by Rep. Scott. Discussion ensued. Vote taken, motion carried.

HB 2016 as a whole.

Rep. Wiard moved to pass out favorably HB 2016 as amended, seconded by Rep. Praeger, motion carried.

Chair then drew attention to HB 2019 and (Attachment No. 3), indicating language proposed by the Department of Health/Environment given to members today. A lengthy discussion began in regard to this suggested amendment, i.e., some Health Departments would be prohibited from giving some of the services indicated on primary care list by their governing boards; concerns regarding abortions or abortion counseling; federally funded Health Departments cannot provide services of abortion or give abortion counseling; three pilot projects being proposed would be state funded; concerns with language changes proposed in definition of "primary care".

At this time, staff members, and Mr. Steve McDowell of Department of Health/Environment offered information on Federal law.

Ms. Correll noted members might wish to consider some of the smaller agencies who might contract or otherwise provide all of the services listed. In fact, if the Legislature decides to determine what is set up in these demonstration projects, as opposed to what the needs of the communities are, that is possible. It was suggested the word "minimum" be stricken. Also if it were to read, "primary care may include" more latitude would be allowed.

Mr. McDowell, when asked if family planning services include abortion services, replied, "by statute-Federal Law-, the family planning program/family planning services, preclude abortion.

Ms. Correll then stated, in response to this, only if these programs are Federally funded. Mr. McDowell said, "Right".

It was noted, at this point, that the pilot projects being discussed are state-funded.

Rep. Neufeld moved to amend HB 2019 sub (h), page 2, as used in this section, primary care shall be those services as defined by the Department of Health/Environment, except for family planning services, motion seconded by Rep. Love. Lengthy discussion ensued. Vote taken, motion failed, division called for, show of hands indicated 4 in favor, 13 against, motion failed.

Recorded as "YES" votes on Neufeld amendment to HB 2019 are Rep. Neufeld, Rep. Love, Rep. Wagle.

CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON PUBLIC HEALTH AND WELFARE,
room 423-S Statehouse, at 1:30 /a.m./p.m. on February 14, 1991

DISCUSSION CONTINUED ON HB 2019:--

Rep. Amos noted Department of Health/Environment had recommended the date to report findings might need to be changed. Rep. Amos moved to amend HB 2019 in line 38, to strike "September", and insert "October". Motion seconded by Rep. Bishop, motion carried.

Discussion regarding definition of "primary care" ensued.

Rep. Praeger moved to amend HB 2019 on page 2, following line 38, new section (h) add language "Primary care means to provide for the majority of the medical needs of the individual exclusive of hospitalization and nursing home placement for the purposes of this act, primary care may include but shall be limited to", and the list of services indicated in (Attachment No. 3). Motion seconded by Rep. Weiland. Discussion ensued, i.e., pilot project is for purposes of providing medical services to the medically indigent; rural communities needs will vary in this respect; if too restrictive in definition, services will be limited; need to coordinate language throughout the bill. Vote taken, motion carried. Rep. Love recorded as "NO" vote.

Rep. Carmody moved to amend HB 2019 on page 2, beginning on line 22, strike "the" and insert "a", delete "s" on reports and strike "completed by the local health departments:." In line 25, strike "s" on reports. Motion seconded by Rep. Wiard, motion carried.

Rep. Praeger moved to amend HB 2019 botton of page 1, line 43, starike "Each pilot", page 2, strike all of line 1, and in line 2, strike "services". Motion seconded by Rep. Neufeld, motion carried.

Discussion continued.

Rep. Scott moved to amend HB 2019 on page 2, line 21 to change date of final report by striking "1993" and inserting "1994". Motion seconded by Rep. Hackler. Discussion continued. At this point, Rep. Scott and Rep. Hackler both withdrew their motions.

Rep. Carmody moved to amend HB 2019 on page 2, line 21 to change date of report due by changing to June 30, 1994, and in lines 29, and 30 on page 2, change the date to July 1, 1995. No further discussion, vote taken, motion carried.

Rep. Flottman moved to amend HB 2019 on page 1, line 31, changing population figure by striking "0" to 50,000", and inserting in lieu therof "25,000 to 50,000". Motion seconded by Rep. Neufeld, no further discussion, vote taken, motion carried.

Rep. Wagle moved to amend HB 2019 on page 2, new sec. (h) following line 38, under planning services, to insert language, "excluding abortion or abortion counseling", seconded by Rep. Neufeld. Discussion ensued. Vote taken, division requested, show of hands indicated 7 in favor, 10 against, motion failed.

Recorded as voting in FAVOR: Rep. Neufeld, Rep. Wagle, Rep. Love, Rep. Carmody, Rep. Amos.

HB 2019 as a whole:

Rep. Praeger moved to pass out favorably as amended, seconded by Rep. Flower. No discussion. Vote taken, motion carried.

Chair adjourned meeting at 3:03 p.m.

Next meeting will be held Monday, February 18, 1991.

HOUSE BILL No. 2016

By Special Committee on Public Health and Welfare

Re Proposal No. 29

12-28

PH & W
2-14-91
Attn #1.

10 AN ACT establishing an ~~advisory commission on end stage renal~~
11 ~~disease and a~~ program for the care and treatment of persons
12 suffering from end stage renal disease.

[end stage renal disease commission to administer a

13
14 *Be it enacted by the Legislature of the State of Kansas:*

15 Section 1. Subject to the provisions of appropriation acts, an end
16 stage renal disease program shall be established ~~under the auspices~~
17 ~~of the university of Kansas medical center. This program will be~~
18 ~~staffed with an executive director, who shall be an employee of the~~
19 ~~university of Kansas medical center, and such support staff as deemed~~
20 ~~necessary for the efficient performance of the duties prescribed by~~
21 ~~this act.~~

[as a separate entity

[The commission shall employ an executive director who is
responsible for hiring necessary staff to implement policies
established by the commission and prescribed by this act.

22 Sec. 2. (a) ~~The university of Kansas medical center shall establish~~
23 ~~an advisory commission on end stage renal disease.~~ The commission
24 shall consist of 11 members: (1) Nine members appointed by the
25 chancellor of the university of Kansas as follows:

26 (A) One member who is knowledgeable in renal medicine and
27 the treatment of end stage renal disease shall be a physician licensed
to practice medicine and surgery in Kansas and actively engaged in
the private practice of medicine in the state;

30 (B) one member who is knowledgeable in renal medicine and
31 the treatment of end stage renal disease shall be a physician licensed
32 to practice medicine and surgery in Kansas and who is engaged
33 primarily in institutional practice of medicine;

34 (C) one member who is a transplant surgeon licensed to practice
35 medicine and surgery in Kansas and actively engaged in the private
36 practice of medicine in the state;

37 (D) one member shall be a person engaged in hospital admin-
38 istrative activities;

[in a renal facility

39 (E) one member shall be a consumer or family member of a
40 consumer, who has a demonstrated interest in the treatment and
41 cure of end stage renal disease;

42 (F) one member shall be a licensed social worker who works with
end stage renal disease patients;

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1 (C) one member shall be a licensed professional nurse who works
2 with end stage renal disease patients;

3 (H) two members shall be other professionals who work with end
4 stage renal disease patients; and

5 (2) two members appointed as follows:

6 (A) One member from the senate public health and welfare com-
7 mittee of the Kansas legislature appointed by the president of the
8 senate; and

9 (B) one member from the house public health and welfare com-
10 mittee of the Kansas legislature appointed by the speaker of the
11 house of representatives.

12 (b) Members appointed from subparagraphs (a)(2)(A) and (a)(2)(B)
13 shall not be from the same political party.

14 (c) (1) In making the initial appointments to the advisory com-
15 mission, the terms shall be designated as follows:

16 (A) To expire on January 1, 1992, the members representing
17 subparagraphs (a)(1)(A), (a)(1)(D), (a)(1)(E), (a)(1)(F) and (a)(1)(G);

18 (B) to expire on January 1, 1993, the members representing sub-
19 paragraphs (a)(1)(B), (a)(1)(C), (a)(1)(H), (a)(2)(A) and (a)(2)(B).

20 (2) Successors shall be appointed for four-year terms to expire
21 on January 1 of the member's fourth year of the appointive term.

22 (3) Members of the commission shall serve until their successors
23 are appointed and qualified. In the event a vacancy occurs on the
24 commission, such vacancy shall be filled by an appointment of a
25 person eligible for the initial appointment for the remainder of the
26 unexpired term of such member.

27 Sec. 3. The advisory commission on end stage renal disease shall
28 annually elect one of its members as chairperson. The commission
29 shall meet as designated by the commission's chairperson.

30 Sec. 4. The executive director shall have the following functions,
31 duties and powers:

32 (a) To establish a program to assist persons suffering from end
33 stage renal disease in obtaining care and treatment. Subject to the
34 provisions of appropriation acts, such program shall provide financial
35 assistance for persons suffering from end stage renal disease and shall
36 help to obtain for such persons medical, nursing, pharmaceutical,
37 transportation and technical services.

38 (b) To institute and carry on educational programs among phy-
39 sicians, hospitals, renal professionals, patients and family members,
40 and the public concerning end stage renal disease, including the
41 dissemination of information and the conducting of educational pro-
42 grams concerning the prevention of end stage renal disease and the
43 methods for the care and treatment of persons suffering from this

commission

Within the limits of appropriations therefor, to

and policies

financially eligible

Within the limits of appropriations therefor, to

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disease.

(c) To cooperate with hospitals, private groups, and organizations and public agencies in the development of positive programs to bring about financial assistance and support of evaluation and treatment of patients suffering from end stage renal disease.

(d) To cooperate with the national and state kidney foundations and with medical programs of the state and federal government for the purpose of obtaining the maximum amount of federal and private assistance possible in support of an end stage renal disease treatment program.

(e) To adopt rules and regulations to establish criteria and standards for evaluating the financial ability of persons suffering from end stage renal disease to pay for their own care. ~~The executive director shall look at the availability of third-party insurance and any governmental coverage~~ as well as the income and assets of such persons for the purpose of establishing standards for eligibility for financial assistance in defraying the cost of such care and treatment from funds appropriated to the university of Kansas medical center for end stage renal disease treatment purposes.

[commission shall utilize all available public and private sources of coverage

(f) To accept gifts, grants and donations from private sources, from municipal and county governments, and from the federal government to be used for the purposes of this act in defraying costs incurred by persons suffering from end stage renal disease. Such moneys shall be placed in the state end stage renal disease fund established in section 7.

[the Kansas kidney program, without preference to any facility

(g) To assist in the development of programs which focus on the prevention of end stage renal disease.

(h) To adopt rules and regulations as are necessary to carry out this act.

Sec. 5. In developing rules and regulations to determine standards for eligibility for financial assistance to persons suffering from end stage renal disease and in carrying out the duties and functions, ~~the executive director shall consult with the advisory commission on end stage renal disease and the national kidney foundation of Kansas,~~ a nonprofit corporation organized under the laws of this state.

[commission
university of Kansas medical center, the
and the national kidney foundation

Sec. 6. ~~The executive director~~ may enter into contracts and agreements with persons, colleges, universities, associations, corporations, municipalities, and other units of government as necessary to carry out the end stage renal disease program.

[commission

Sec. 7. There is hereby established in the state treasury the state end stage renal disease fund. ~~The executive director shall remit all~~ moneys received by or for the fund at least monthly to the state treasurer, who shall deposit such moneys in the state treasury and

[commission

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1 credit such moneys to the state end stage renal disease fund. All
 2 expenditures from such fund shall be made in accordance with ap-
 3 propriation acts upon warrants of the director of accounts and reports
 4 issued pursuant to vouchers approved by the executive director of
 5 the end stage renal disease program, or by a person or persons
 6 designated by the executive director.
 7 Sec. 8. This act shall take effect and be in force from and after
 8 its publication in the statute book.

Commission

Commission

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Proposed Amendment to House Bill No. 2016

On page 4, preceding line 7, by inserting the following:

"Sec. 8. Sections 1 to 7, inclusive, and amendments thereto shall expire on July 1, 1995."

PAW
2-14-91
Attn # 2

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT
DIVISION OF HEALTH
OFFICE OF RURAL HEALTH

MEMORANDUM

TO: Rep. Carol Sader *cf*
FROM: Charles Konigsberg, MD, MPH
DATE: Feb. 14, 1991
SUBJECT: Definition of primary care

Primary care means to provide for the majority of the medical needs of the individual exclusive of hospitalization and nursing home placement. At a minimum primary care includes

- * Health promotion and disease prevention services
- * Diagnosis and treatment of acute problems and minor emergencies
- * Family planning services
- * Basic laboratory services
- * Pharmacy services
- * Diagnosis and treatment of chronic problems
- * Dental services
- * Prenatal and postnatal care
- * Referral to appropriate mental health and related services

cc. Norm Furse ✓
Steve McDowell

PHW
2-14-91
Attm # 3