

MINUTES OF THE SENATE COMMITTEE ON WAYS AND MEANS.

The meeting was called to order by Senator August "Gus" Bogina, Chairperson, at 11:08 a.m. on April 30, 1992 in Room 123-S of the Capitol.

All members were present except:

Senator Parrish

Conferees appearing before the committee:

Susan Seltsam, Secretary, Department of Administration
Charles Dodson, Executive Director, Kansas Association of Public Employees
Nancy Echols, Division of Personnel
Patricia Hargrave, faculty member, University of Kansas Medical Center
Loretta Gaschler, Department of Health and Environment
Ray Hauke, Board of Regents
Carol Shearer, Kansas Society for Medical Technology

INTRODUCTION OF BILLS

It was moved by Senator Feleciano and seconded by Senator Moran that bill draft 1 RS 3093 be introduced. Senator Feleciano explained that the bill (authorizing boards of county commissioners to extend time for payment of property taxes and to waive interest and penalties for certain persons who performed desert shield or desert storm services) had been vetoed by the Governor because of an amendment. The motion carried.

Senator Kerr moved, Senator Harder seconded, that bill draft 1 RS 3089 be introduced as requested by Senator Thiessen. The motion carried.

SB 791 - Salaries and compensation increases for state officers and employees, appropriations for FY93.

Susan Seltsam, Secretary of Administration, appeared before the Committee urging support for SB 791. She stated that the bill contains approximately the same amount of money recommended by the Governor in the individual agency budgets for step movement, merit pool and longevity.

The Chairman indicated that he had discussed the issue of step movement with Nancy Echols, Division of Personnel, who indicated that irrespective of the passage of this bill, step movement and longevity in Kansas will be paid. Sec. Seltsam said that her understanding is that longevity is in statute and has to be paid unless administrative measures are taken. The Chairman stated that SB 791 only adds additional money to the salary and wages line items of the agency budgets equivalent to step movement and does not mandate that the agencies provide step movement. In answer to Senator Rock, the Chairman responded that personnel policy is to use increased shrinkage to pay salaries and wages which could be problematic for some small agencies.

Charles Dodson, Executive Director of Kansas Association of Public Employees, appeared before the Committee in support of SB 791 and stated that without the bill agencies would have difficulty making payroll without furloughs or layoffs.

The Chairman noted that the Kansas Association of Public Employees had sent letters to state employees stating that they would not receive step movement or longevity without the passage of SB 791. In response to the Chairman, Mr. Dodson concurred that step movement is at the discretion of the administration and longevity is statutory.

It was moved by Senator Brady and seconded by Senator Salisbury that the 2.5% salary increases for the Governor and other elected officials be deleted from SB 791. The motion failed on a show of hands with Senators Moran, Salisbury and Brady requesting that their "aye" votes be recorded.

Senator Don Montgomery appeared before the Committee and distributed Attachment 1, a proposed amendment to SB 791. Senator Rock moved, Senator Gaines seconded, that SB 791 be amended by balloon contained in Attachment

1. The motion carried on a voice vote.

It was moved by Senator Doyen and seconded by Senator Gaines that longevity be subject to appropriations. The motion failed on a voice vote.

Senator Gaines moved, Senator Kerr seconded, that SB 791 as amended be recommended favorable for passage. The motion carried.

HB 3196 - Sub. for H 3196 by Committee on Appropriations - Kansas civil service act, unclassified service, certain state employees of state institutions.

Nancy Echols, Division of Personnel, appeared before the Committee in support of HB 3196 and reviewed Attachment 2. She added that an amendment on HB 2708 places pharmacists at Larned State Hospital in the unclassified service, and that HB 3196 would provide more consistency in the classifications.

It was moved by Senator Rock and seconded by Senator Moran that HB 3196 be recommended favorable for passage. The motion carried.

SB 750 - Medical laboratory student scholarship programs.

Ray Hauke appeared on behalf of the Board of Regents and reviewed Attachment 3. In answer to Senator Kerr, Mr. Hauke stated that the degree of shortage is not known and, if one exists, a scholarship program has difficulty addressing it immediately.

Patricia Hargrave, faculty member at the University of Kansas Medical Center appeared before the Committee in support of SB 750 and reviewed Attachment 4. In answer to a question, Dr. Hargrave stated that the regents institutions train the baccalaureate practitioners who enter the field as a generalist. Only two institutions, WSU & KUMC offer the final specialist year of training. Senator Rock stated that he favored these types of arrangements because of the drastic need in rural areas, but viewed the repayment requirements as problematic.

Carol Shearer, President-Elect of the Kansas Society for Medical Technology, appeared before the Committee to testify in support of SB 750. She distributed and reviewed Attachment 5.

Loretta Gaschler, supervisor of the Clinical Lab Certification Program for Kansas, distributed Attachment 6 and stated that the bill provides for a five year grace period from Sept. 1, 1992 for persons to obtain their degrees. Senator Brady expressed concern that the Governor has vetoed bills that executive agencies have endorsed.

Written testimony from Ruby Brower (Attachment 7), John P. Smith (Attachment 8), and Leonard Bunselmeyer (Attachment 9) were submitted for the Committee's information.

The Chairman announced that the bill would be held in Committee and adjourned the meeting at noon.

SWAM
April 30, 1992
Attachment 1

1 federal law and regulations to employees of the executive branch of
2 the federal government for per diem expenses, while away from
3 home but serving in the United States, are amounts which total
4 greater than \$65 \$73, then each member of the legislature shall
5 receive such greater total amount per calendar day for subsistence
6 allowance for any regular or special session of the legislature.

7 (c) an allowance of \$600 per calendar month, except for the
8 months of January, February and March to defray expenses incurred
9 between sessions of the legislature for postage, telephone, office and
10 other incidental expenses;

11 (d) an allowance for mileage in an amount equal to the rate per
12 mile prescribed under the provisions of K.S.A. 75-3203a and amend-
13 ments thereto multiplied by the number of miles traveled by the
14 usual route in going to and returning from the member's place of
15 residence for any regular or special session of the legislature. Such
16 mileage shall be paid for not to exceed the equivalent of one trip

17 for each full week occurring between convening and adjournment
18 sine die in any regular or special session. The mileage allowance
19 provided under the provisions of this subsection shall not be subject
20 to the restrictions relating to the use of vehicles prescribed by K.S.A.
21 75-3203 and 75-3203a and amendments thereto but shall only be
22 allowed for trips actually made. Compensation and subsistence al-
23 lowance shall not be allowed under the provisions of subsections (a),
24 and (b) and (f) of this section during any period in which the
25 legislature is adjourned for more than two days, Sundays excepted;
26 and

27 (e) whenever the rates of compensation of the pay plan for per-
28 sons in the classified service under the Kansas civil service act are
29 increased, the rate of compensation per calendar day for members
30 of the legislature for service at any regular or special session of the
31 legislature shall be increased on the first day of the first payroll
32 period immediately following the effective date of any such pay plan
33 increase by an amount, adjusted to the nearest dollar, computed by
34 multiplying the average of the percentage increases in all monthly
35 steps of such pay plan by the rate of compensation per calendar day
36 which is authorized by this section for service at any regular or
37 special session of the legislature for the day upon which such increase
38 is computed, except that for purposes of computing an increase
39 in the rate of compensation per calendar day based upon an
40 increase in such pay plan which takes effect subsequent to the
41 effective date of this act but prior to July 1, 1987, the rate of
42 compensation per calendar day for the day upon which such
43 increase is computed shall be the amount specified under sub-

. The provisions of this subsection shall not apply to members
of the legislature residing within 30 miles of the state capitol
and no such member shall be authorized to receive a subsistence
allowance under this subsection

, in accordance with and subject to the following: (1) If the
member of the legislature resides 30 miles or more from the state
capitol,

allowances

(2) if the member of the legislature resides within 30 miles of
the state capitol and outside of the city limits of Topeka,
Kansas, such mileage allowance shall be paid for each trip,
without limitation on the number of trips, and (3) if the member
of the legislature resides within the city limits of Topeka,
Kansas, no such member shall be authorized to receive an
allowance for mileage under this subsection

STATE OF KANSAS



DEPARTMENT OF ADMINISTRATION
Division of Personnel Services

JOAN FINNEY,
Governor

NANCY M. ECHOLS,
Director of Personnel Services

Room 951-South
Landon State Office Building
900 S.W. Jackson Street
Topeka, Kansas 66612-1251
913-296-4278
FAX 913-296-6793

April 10, 1992

The Honorable August Bogina, Chairperson
Senate Ways and Means Committee
Kansas Senate
Room 120 South, Capitol Building
Topeka, Kansas 66612

Dear Senator Bogina:

Substitute House Bill 3196 is before the Senate Ways and Means Committee for review. I am writing to you to express my support of that substitute bill.

House Substitute 3196 would amend K.S.A. 1990 Supp. 75-2935 which establishes and defines the state classified and unclassified service. In an effort to address health care classifications consistently throughout state service, the bill places pharmacist and medical technologist positions in the unclassified service and physician and dentist positions in the unclassified service in the few agencies where they are still classified.

Currently, classified physicians and dentists are employed at the Department of Corrections institutions, Kansas School for the Deaf, Kansas School for the Visually Handicapped, and Kansas Commission on Veterans' Affairs. Classified pharmacists and medical technologists are employed at the SRS institutions, Kansas State University, Emporia State University, and the University of Kansas. Attached is a table which shows the number of remaining classified positions in these classifications for each agency.

Historically, these agencies have had difficulty in recruiting and retaining highly-skilled employees in these medical positions. Above step A authority to recruit and appoint in these classifications has been granted by the Director of Personnel Services on a fiscal year basis for the Department of Social and Rehabilitation Services and the other agencies as needed. Authority to hire at a higher salary is the only means for attracting potential employees. SRS has undertaken elaborate and costly recruitment efforts to attract qualified candidates. All agencies that use these classifications were contacted and reported that candidates are unwilling to accept employment at the beginning salary and often require appointment at the top of the pay range.

SWAM
April 30, 1992
Attachment 2

Senator August Bogina
April 10, 1992
Page two

This leads to retention problems because candidates appointed at the top of the range for these positions are then unable to receive step increases in the future.

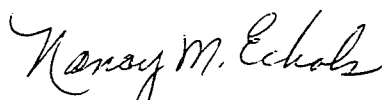
The pharmacist and medical technologist positions were studied in December 1988, as part of Phase IV of the Comprehensive Classification and Job Rate Study. Some classes, but not all classes, studied during this phase have been implemented. Each year since 1988, the Division of Personnel Services conducts salary surveys to provide recommendations for implementation of the other professional and technical medical positions studied during Phase IV, which includes the remaining classified physician and dentist positions.

Salary surveys of these classifications were recently completed by the Division of Personnel Services. The data indicate that the salaries currently being paid to employees in these classifications are drastically below the relevant job market rate. The State's market rate which has been identified as step E of the classified pay plan, is 30-50 percent below the rate being paid by our competitors (i.e., dentist - 35%; medical technologist - 40%; pharmacist - 30%; and physician - 50%). An adjustment is needed to be competitive in the employment of such highly-skilled employees.

It is critical for all agencies to have flexibility in the employment of qualified and experienced employees in these professional classes to provide quality services; however, it is particularly critical to SRS in order to meet state and federal accreditation and certification requirements. Currently, physicians and dentists at the SRS institutions and physicians at the Department of Corrections institutions are unclassified. The University of Kansas Medical Center placed all medical technologist and several other professional and technical medical positions in the unclassified service in 1989 in response to employee turnover and recruitment difficulties. And recently, the passage of House Bill 2626 transferred more health care positions at KUMC to the unclassified service and gave the university the authority to add other health care employees as needed.

I appreciate your favorable consideration of Substitute House Bill 3196. Please feel free to contact me at 296-4278, should you have any questions.

Sincerely,


Nancy M. Echols

Attachments

cc: Susan Seltsam
Gary Reser
Art Griggs

NUMBER OF REMAINING CLASSIFIED MEDICAL POSITIONS BY AGENCY

AGENCY	CLASS	NO. OF FILLED POSITIONS	NO. OF VACANT POSITIONS	TOTAL
Dept. of SRS	pharmacists	13	2	15
	medical technologists	3	6	9
Regents Institutions (Kansas State Univ.) (Emporia State Univ.) (Kansas University)	pharmacists	4	1	5
	medical technologists	4	2	6
Dept. of Corrections	dentists	2	0	2
KS School for the Deaf	dentists	1	0	1
	physicians	2	0	2
KS School for the Visually Handicapped	physicians	2	0	2
KS Commission on Veterans Affairs	physicians	1	0	1
	TOTAL	32	11	43

SALARIES OF REMAINING CLASSIFIED MEDICAL POSITIONS

Class	Current Salary Range	% Below Market Rate	Proposed Salary Range
Dentist	31 (41,280)	35%	38 (58,080)
Medical Technologist I	19 (22,980)	40%	27 (33,984)
Medical Technologist II	21 (25,344)	40%	29 (37,440)
Pharmacist I	24 (29,328)	35%	31 (41,280)
Pharmacist II	27 (33,948)	30%	33 (45,516)
Physician	33 (45,516)	50%	43 (74,000)

TESTIMONY OF KANSAS BOARD OF REGENTS STAFF

Regarding Senate Bill No. 750
Medical Laboratory Student Scholarship Program

April 29, 1992

The Kansas Board of Regents is not taking a position on Senate Bill 750. We would offer the following observations concerning the overall subject.

1. No specific Legislative or Gubernatorial study has occurred related to the supply or demand of medical technologists. This differs from other health related scholarship programs, which have been implemented only after substantial documentation of shortages.
 - a. Little investigation has occurred concerning program capacity, utilization of existing medical technology programs, and the impact a scholarship program would have upon those programs.
2. The record of scholarship programs at addressing specific shortages is questionable. Among those disciplines experiencing shortages, scholarship programs typically have significant default rates. Therefore, establishing another categorical program may be of limited short term benefit at addressing a shortage, if one exists.
3. A scholarship program containing repayment provisions and sponsorship provisions has a considerable administrative cost. The Nursing Scholarship program contains both features and it is clearly the most costly program administered by the Kansas Board of Regents from the perspective of staff time requirements.
 - a. Accordingly, we have submitted an administrative fiscal note of \$30,000, of which \$25,300 would be ongoing expenditure for a clerical position.
4. An additional categorical scholarship may be premature, given the Legislature's concern that tuition prices may be an impediment to access for all students.
 - a. Senate Ways and Means Subcommittee recommendation that the Board of Regents explore a variety of avenues for financial aid and present several options to the 1993 Legislative session.
 - b. Request being made that Legislative Educational Planning Committee study financial aid during the upcoming interim.

SWAM
April 30, 1992
Attachment 3

The University of Kansas Medical Center

School of Allied Health
Department of Medical Technology

April 28, 1992

John C. Peterson
1206 W. 10th
Topeka, Ks.

Dear Mr. Peterson:

We are writing in support of Senate Bill # 750 and to present the information that we might have presented in testimony had the Bill been brought up for action in this legislative session.

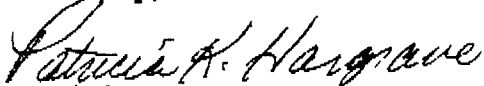
As professionals and educators in the field of medical technology, we have been very aware of a growing national shortage of medical technologists (MT). We have also become increasingly aware that such shortages of baccalaureate level practitioners is more acute in rural laboratory settings. In response, the Department of Medical Technology Education at the University of Kansas Medical Center has submitted a grant proposal to the Department of Health and Human Services (HHS) of the federal government. This grant, if funded, would aid in establishing a rural delivery system for professional curriculum in medical technology. The following information was gathered as a part of the process involved in submission of the grant proposal.

The 1990 Wage and Vacancy Survey conducted by the American Society of Clinical Pathologists (ASCP) documented an average national vacancy rate of 11.6% for staff medical technologists positions currently. Additionally, a study by Castleberry and Kurby, on the staff at ASCP Board of Registry, projected a national vacancy rate as high as 19% by the year 2000. With regard to Kansas specifically, the 1991 Kansas Hospital Personnel Survey conducted by the Kansas Hospital Association revealed an interesting pattern. In Kansas, the state-wide vacancy rate in MT positions is less than 5%. However, the vacancy rate for MT positions in rural areas of the state (outside the two Standard Metropolitan Statistical Areas) increases to 10%. These rural areas contain 46.6% of the state's citizens. These areas are definitely underserved. Additionally, a preliminary survey of rural hospital and clinic laboratories within the state supported the hypothesis that the more rural the location of the laboratory, the higher the vacancy rate with regard to MT positions. A number of factors contribute to this problem of rural vacancies, one of which is the need for financial support for students entering this profession. A second is a need to provide incentives for entering rural practice. The same survey of rural laboratories, indicated that 45% of the 74 respondent rural Kansas laboratories would be willing to provide some form of financial support to students agreeing to work at that institution for a prescribed time period. Other respondents indicated they might consider doing so in the future. Details had not been worked out as yet. Ten of these respondents were so acutely effected by the rural shortage that they wrote letters to be included in the grant proposal itself.

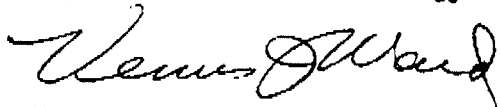
Senate Bill 750 offers one method of attacking the shortage of medical technologists in rural Kansas. While it may not solve all aspects of the problem, it is a good beginning. It would appear, from our preliminary surveys, that the program would be supported and utilized by rural clinical laboratories across the state.

If a list of respondents willing to provide some form of financial support to students and/or those who previously wrote in support of the grant proposal would be helpful, we could provide such a list of names and institutional addresses. If we can be of any further assistance, please feel free to contact us.

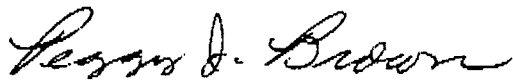
Sincerely,



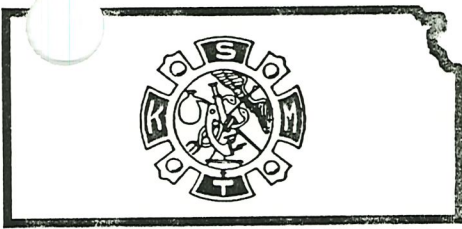
Patricia K. Hargrave, Ph.D., MT(ASCP), CLS(NCA)
Project Director, Medical Technology Rural Education for Kansas
Dept. of Medical Technology KUMC



Venus Ward, M.S., MT(ASCP)
Acting Chair, Dept. of Medical Technology KUMC



Peggy J. Brown, Ph.D., MT(ASCP)SBB
Faculty, Dept. of Medical Technology KUMC
President, Kansas Society for Medical Technology



Kansas Society for Medical Technology

TESTIMONY FOR SENATE BILL 750

presented by

Carol L. Shearer

April 30, 1992

Senate Bill #750 which would establish a medical laboratory student scholarship program for the State of Kansas is considered by this organization to be vital to the profession of medical laboratory technology. Members of our profession are responsible for the analysis of patient tissues and fluids providing critical data to the doctors to help diagnose and monitor patient treatment.

At the present time a shortage of qualified medical laboratory personnel exists in our state, most particularly in the rural areas. One of the problems in trying to solve this shortage is that this profession is invisible to the public. Contrast this with a nursing shortage which is noticed right away because it results in a loss of available hospital beds. Therefore, it is easier to generate broad-based efforts by administrators, government, and others to solve the problem. A number of circumstances are responsible for the rapidly growing shortages of medical laboratory personnel. The 18-20 year old population is smaller today than in the "baby boom" years, so there are fewer students entering the health care field. This field is also in competition with hundreds of other industries for a smaller entry-level workforce.

The implementation of the Clinical Laboratory Improvement Amendments of 1988 will bring the entire regulatory issue out into the open by requiring that testing personnel employed in highly complex laboratory settings have a minimum of an associate degree by 1997. The seriousness of this shortage has been noted by Congress with the re-authorization of the Health Profession Education Act, Title VII Funding. This bill significantly increases funding for allied health professions such as medical laboratory technology that have a demonstrated personnel shortages.

Passage of Senate Bill 750 would provide a mechanism to encourage the education of medical laboratory technology students in the State of Kansas. This program could be implemented in cooperation with the federal programs and provide welcome relief for the rural hospitals who so desperately need qualified laboratory personnel.

SWAM
April 30, 1992
Attachment 5



Department of Health and Environment

Azzie Young, Ph.D., Secretary
Kansas Health and Environmental Laboratory

Testimony presented to

Reply to: (913) 296-1620



Senate Committee on Ways and Means

by

The Kansas Department of Health and Environment

Senate Bill 750

The Kansas Department of Health and Environment has responsibility to administer several state and federal programs which regulate clinical laboratories and address clinical laboratory testing in Kansas.

Effective September 1, 1992, federal CLIA '88 regulations will require that individuals who perform certain test procedures obtain at least an associate degree in medical laboratory science or medical laboratory technology within five years. This bill establishes a medical laboratory student scholarship plan which will help to minimize the impact of these federal personnel standards on hospitals and physician's office laboratories.

Clinical laboratory tests which require formally educated analysts include: crossmatching of blood for transfusions, tests to measure oxygen, sodium, potassium, and HDL cholesterol concentrations in the blood, tests to classify various types of blood cells, pap smears, and tests for HIV. Some of these test procedures are performed in each acute care hospital in our state. Many of these tests are also performed in physician's office laboratories, statewide. Without the ability to provide these laboratory tests, adjustments in patient care practices would have to be made. Specimens for measurement of oxygen content in the blood, for example, must be tested within 30 minutes of the time they are collected.

Due to the complex nature of these test procedures and the resulting patient treatments, it is appropriate to limit the performance of these tests to individuals with appropriate education and training in order to ensure the quality of the test result. Studies have shown that test results from laboratories which meet the impending personnel requirements are more reliable. However, the implementation of these academic requirements will require some time to complete, especially for currently employed individuals who will pursue an educational program on a part-time basis. In a 1990 KDHE study of 85 non-accredited hospitals, it was found that 50 hospitals (59%) employed 70 non-degreed individuals to perform laboratory testing. A proposed scholarship program for medical laboratory professionals provides a timely solution to a problem which will impact upon health care facilities, individuals employed in clinical laboratories, and members of the public seeking medical care.

Similarly, the examination of slide preparations for tests such as the Pap smear will require a trained cytotechnologist. Federal CLIA '88 regulations will impose maximum workload limits on individuals who screen cytology slides, including pap smears. This has given rise to many concerns about the shortage of cytotechnologists in our state. Due to previous regulatory differences, independent laboratories have been required to employ only trained cytotechnologists while hospitals have not been subject to this requirement. However, under the uniform requirements of CLIA '88, additional cytotechnologists will be needed to avoid

Testimony for Senate Bill 750
page 2

increased time needed to obtain test results. For this reason, we would recommend adding cytotechnologists to this scholarship bill.

In summary, KDHE strongly supports this legislation which would establish a medical laboratory scholarship program for medical technologists, medical technicians, and cytotechnologists.

Testimony presented by: Loretta Gaschler, MA MT(ASCP)
 Clinical Laboratory Certification Supervisor
 Kansas Health and Environmental Laboratory
 April 30, 1992



PETERSON

clinical LABORATORY, PA

P.O. Box 128 1133 College Ave. Manhattan, Kansas 66502
Bus: (913) 539-5363 FAX: (913) 539-8435 (800) 876-5522

TESTIMONY FOR SENATE BILL 750

presented by

Ruby K. Brower

April 30, 1992

Senate Bill # 750 would establish a medical laboratory student scholarship program for the State of Kansas. In this program, scholarships would be awarded to students majoring in medical laboratory technology based upon financial need, and funded 50% by the State and 50% by a sponsoring organization. Last year the United States Congress re-authorized the Health Professions Education Act, Title VII funding, which significantly increased funding for allied health professions that have demonstrated a shortage of personnel. Medical laboratory technologists and technicians are included in this program, and Kansas should collaborate with the federal government in acquiring these funds to assist potential laboratorians in their educational quest. Senate Bill 750 would provide an opportunity to do this.

The implementation of the Clinical Laboratory Improvement Amendments in September 1992, will regulate all medical laboratories. Testing personnel in hospitals and independent laboratories performing highly complex testing will be required to possess a bachelors or associate degree. This increased need for trained medical laboratory technologists and technicians comes during an existing personnel shortage. At the present time, we are aware of openings for six medical technologists in six rural hospitals in our area.

With the extension of personnel regulations to all laboratories in the country, this shortage will be exacerbated. Those personnel currently employed in laboratories and lacking the appropriate degree will have until 1997 to achieve these educational requirements. With the economy in such sad shape, few currently employed individuals will financially be able to afford to quit their job to pursue their educational goals without financial assistance. This bill would provide for that financial support when the student has a sponsor to provide monetary support for their educational endeavors.

Rural hospitals are currently experiencing a shortage of medical laboratory personnel. Senate Bill 750 would provide them with the opportunity to sponsor a potential laboratory technologist/technician, and provide financial support to the student with a commitment for their employment. The program would be beneficial to all parties, help alleviate the personnel shortage in our State and require only a minimal financial expenditure.

SWAM
April 30, 1992
Attachment 7

Richard H. Kaldor, M.D.

Daniel E. Hancock, M.D.

John F. Bambara, M.D.

Peggy S. Peterson, D.O.

Pathologist

Pathologist

Pathologist

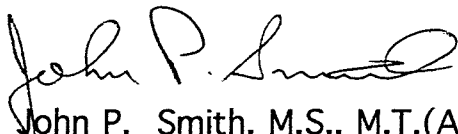
Pathologist

STATEMENT IN SUPPORT OF SENATE BILL 750

I strongly support enactment of SB 750 for several reasons.

1. There exists a shortage of medical technologists and medical laboratory technicians in Kansas and throughout the United States. The shortage in the rural areas of Kansas is greater than anywhere throughout the United States.
2. Enactment of SB 750 would encourage graduates of laboratory educational programs to return to the rural areas to practice. With the exception of the newly formed Hays Pathology Laboratory Medical Technology Program, and the Seward and Barton County Medical Laboratory Technician Programs, the Medical Technology Programs are located in Wichita, Topeka and Kansas City. After students have completed college course work and the practical experience provided in major hospitals, there is little incentive to return to rural areas. The matching scholarship program would provide such an incentive. This has already been demonstrated through the nursing scholarship program.
3. Enrollment has not reached the full capacity of the laboratory educational programs. To operate at less than full capacity is inefficient and does not utilize the scarce financial and personnel resources of our colleges and affiliated clinical facilities. Enactment of SB 750 would increase enrollment as demonstrated by the increase in enrollment in the nursing programs following enactment of the nursing scholarship bill.

As a medical technologist with thirty years experience in the laboratory field in Kansas, I can personally state that the shortage of laboratory personnel has never been as great as it is today! Positions are going unfilled in both the urban and rural areas of our state. I encourage the enactment of SB 750 this year to provide a solution for this important health care need.



John P. Smith, M.S., M.T.(ASCP)SM
Microbiology Supervisor
HCA Wesley Medical Center
Wichita, Kansas 67214
316 688 2894

SWAM
April 30, 1992
Attachment 8

To: The Kansas Legislature
From: Leonard Bunselmeyer
Date: April 27, 1992
Subject: Testimony in Support of Senate Bill No. 750

I urge you to support Senate Bill No. 750, the "Medical Laboratory Scholarship Program Bill." If enacted this Bill would be an investment in Kansas...it would help alleviate the acute shortage of medical laboratory personnel, support Kansas health care providers, and help maintain access to care for Kansas citizens.

The shortage of medical laboratory personnel is less recognized by the general public than the shortage of nurses, but it is critical to health care, particularly in the rural areas. I am aware of the severity of the medical laboratory personnel shortage through frequent contact with hospital administrators and laboratory supervisors from rural communities. This contact comes through my job as the Director of the Medical Laboratory Technician (MLT) Program at Barton County Community College in Great Bend. Enactment of this Bill would be newsworthy, and improve the public awareness of the medical laboratory as a career choice.

Because I recruit and am an academic advisor for BCCC's MLT students, I'm also aware of the financial concerns of the students. The student's commitment to medical laboratory training is costly. In Kansas, medical laboratory training is available only in Great Bend, Hays, Kansas City, Liberal, Topeka and Wichita. This may require extensive commuting or relocation for the student. The training is very technical, requiring expensive yet necessary textbooks. Through enactment of this Bill the State of Kansas can extend a helping hand to students who desire this training.

Without laboratory personnel, hospitals and other health care providers cannot provide essential services. Laboratory tests play a vital role in detection and treatment of disease, and maintenance of health. Our rural health care providers are facing serious challenges, and through enactment of this Bill the State of Kansas can extend assistance to those providers, and help maintain access to care for Kansas citizens.

Also, this Bill contains a provision that is very important for its success...in addition to individual sponsors, it would allow "any consortium or association of health care providers" to sponsor a student. The need for a new laboratory person in a given institution is often sudden and unexpected. This provision allows a necessary flexibility.

In summary, I urge you to support the enactment of Senate Bill No. 750. It is important for the State of Kansas and for the citizens of Kansas. Thank you.

Leonard Bunselmeyer

SWAM
April 30, 1992
Attachment 9