

Approved: 3-16-93  
Date sh ✓

MINUTES OF THE HOUSE COMMITTEE ON PUBLIC HEALTH AND WELFARE.

The meeting was called to order by Chairperson Joann Flower at 1:30 p.m. on March 9, 1993 in Room 423-S of the Capitol.

All members were present except: Representative Bishop, excused

Committee staff present: Emalene Correll, Legislative Research Department  
Norman Furse, Revisor of Statutes  
Sue Hill, Committee Secretary

Conferees appearing before the committee:

Representative Helgerson  
Julia Francisco, Cancer Coordinator, Office of Chronic Disease and Health Promotion,  
Department of Health and Environment  
Tom Bell, Kansas Hospital Association  
Mary Ann Gabel, Executive Director, Kansas Behavioral Sciences Regulatory Board.

Others attending: See attached list

Chair called the meeting to order, then requested a staff briefing on SB 176.

Ms. Correll detailed SB 176. She indicated a new supplemental note had been prepared. See (Attachment No. 1). SB176 was amended by the Senate on final action to prohibit smoking in medical facilities except for designated areas and long-term-care facilities, and also amended during final action to add the provision that would prohibit prior to July 1, 1995, smoking in any places in the state Capitol except in offices of state officers and employees that have been designated as smoking areas in accordance with K.S.A. 21-4009 et.seq. It was noted the Senate amended the provisions of HB2136 into SB 176 on final action in the Senate.

CHAIR OPENED HEARINGS ON SB 176.

Rep. Helgerson, sponsor of SB176 offered hand out, (Attachment No. 2) He noted this same legislation was requested last year by several Wichita hospitals. This year, SB176 was introduced in the Senate upon the request of The Smoke Free Coalition. This legislation, if passed, would prohibit smoking in hospitals. He detailed the exceptions, i.e., long term-care units of a medical care facility may permit a smoking area. He noted the justification is that to allow smoking in a facility that is dedicated for health care services puts the health of the individuals working in the facility at risk. He drew attention to statistics and information related to a newly released EPA report in his hand out. He answered questions, i.e., the medical community is saying they can deal with the addictions to tobacco through current procedures in place in the hospitals, and not risk further health concerns for patients, or employees in their facilities. He responded to a question that he would be very reluctant to support SB176 with an amendment that would permit smoking with a doctor's prescription.

Ms. Correll gave background information on the discussion and action held in the Senate on SB 176.

Julia Francisco, Cancer Coordinator, Department of Health and Environment offered hand out, (Attachment No.3) She stated support for the intent of SB 176. The Department recommends that no smoking should be allowed in any patient care area of medical facilities or psychiatric hospitals. She drew attention to the statistical information in her hand out. The Joint Commission on Accreditation of Health Care Organizations (JCAHO) has acted to require total elimination of smoking in medical care facilities. She noted that medical facilities are the workplace for Kansas health care providers and employees. Workplace restrictions on tobacco use have shown to be beneficial to the health of employees, therefore SB 176 takes one more step toward reducing health risks by making Kansas regulations for acute care hospitals consistent with those of the JCAHO.

## CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON PUBLIC HEALTH AND WELFARE, Room 423-S  
Statehouse, at 1:30 p.m. on March 9, 1993.

Tom Bell, Kansas Hospital Association offered hand out (Attachment No. 4). He noted, to prohibit smoking in medical facilities would accomplish several goals, i.e., reduce the risk to patients associated with smoking, including possible adverse affects on the patient's treatment; reduction in the risk to other patients, employees and staff associated with passive smoke; reduce the risk of fire safety hazards. He noted there is an exception to the standards set out by JCAHO, which does allow a physician to prescribe. The Kansas Hospital Association does support SB 176.

Chairperson Flower opened hearing for questions from Committee members. Numerous questions were asked, i.e., most psychiatric hospitals have stated they would rather have a regulation that says no smoking, rather than allow it for some. It was noted the Department of Health and Environment and the Kansas Hospital Association both prefer SB 176 as it is presently written. There was discussion in regard to prohibiting other substances for patients who may be addicted to certain substances. It was noted the concern with tobacco smoke is that persons not using the product can still be harmed by the effects of the smoke. It was noted, current law already covers hospitals to allow or disallow smoking, but the language in SB 176 would mandate a smoking ban. It was noted the prescriptions to allow smoking in hospitals where smoking is banned are primarily for those patients who are terminally ill, patients who have perhaps smoked all their lives, and in the opinion of the physician no further harm might occur to that patient if allowed to smoke. Staff members answered technical questions regarding present law in respect to smoking in hospitals and JACHO standards.

CHAIR CLOSED HEARINGS ON SB 176.

Chair requested a staff briefing on SB 248.

Ms. Correll gave a comprehensive explanation of SB 248, drawing attention to fee increases proposed.

CHAIR OPENED HEARINGS ON SB 248.

Mary Ann Gabel, Executive Director, Kansas Behavioral Sciences Regulatory Board offered hand out, Attachment No. 5. She requested favorable support from Committee on SB 248. She detailed rationale for the request for this legislation, i.e., the Boards need for increases in the statutory limitation on fees for mandatory examinations for psychology and marriage and family therapy registration applicants. She drew attention to detailed information in her hand out regarding costs of the examinations, and noted the fees are established at a level to cover the purchase cost of the examination plus 20% that goes direct to the state general fund, plus a minimal fee for administrative costs that stays with the Board.

Ms. Gabel answered numerous questions, i.e., the cost of the examination is tied to the construction, development, and validation of the exams; the purchase price of the examinations is not within the control of the Board; fees charged for the examination are not inflated in order to support the program; renewal fees are basically the main support of the various programs regulated by the Board; there are six groups now being regulated by the Board. It was noted that in many Acts, the applicant is allowed to pay the fee direct to the examining agency or the Board may set the fee at the actual cost of the exam. Ms. Gabel stated, the Board had not considered following either of these options because they did not realize they had the option to do so. There was discussion in regard to the fee increases, percentages that go for administration, percentages going directly into the state general fund. There were questions regarding how much money annually would not be received for the state general fund, should this practice be followed, i.e., allowing the student to pay the exam agency directly.

CHAIR CONCLUDED HEARINGS ON SB 248.

Chair asked members if there were any objections to taking Committee action today on SB 248. There were none.

Rep. Bruns moved to favorably consider SB 248, seconded by Rep. Mayans.

At this point there was some confusion in regard to how the motion on the table was stated. Mr. Furse was asked to give a ruling and did so. The Chair then asked Rep. Bruns to re-state his motion. He did so, i.e., (he moved to consider SB 248 favorably, and the motion was seconded by Rep. Mayans.) Discussion began.

Rep. Freeborn made a substitute motion to amend SB 248, by adding language, "the Behavioral Sciences Board set the cost of the examination plus 20% being placed into the state general fund, plus \$10 for administrative costs for the Board. There was no second.

## CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON PUBLIC HEALTH AND WELFARE, Room 423-S  
Statehouse, at 1:30 p.m. on March 9, 1993.

Rep. Samuelson noted her approval of inserting language giving the Board the authority to allow the applicant to pay the examining agency directly. (A hand out was provided, see Attachment No. 6) Mr. Furse, when asked, indicated the language provided in the balloon in Attachment 6, reflects language the legislature has used in other statutes regarding this situation, i.e., Nurse Practices Act.

Rep. Samuelson made a substitute motion to amend SB 248 by inserting the language indicated in the balloon copy of SB 248 shown in Attachment No. 6. Motion seconded by Rep. Bishop.

Discussion began. It was the view of some, the legislature should periodically take a look at the increase in fees of the various State Boards, otherwise the only review would be by the rules and regulations. It was the view of some, that it is an unnecessary process to review the fees set out by the Board for the examination. The Board has been given authority to handle this situation and should not need the legislature to review the fees. It was determined there would be a slight decrease in the amount of funding received by the state general fund, should the fees be paid direct to the examining agency. It was noted the Board would still have the authority to set the fee amount to be paid, however the applicant could pay the exam agency direct. It was determined the Legislature will still have to re-examine the fee structure periodically.

At this time, Rep. Samuelson and Rep. Bishop withdrew their substitute motions.

Rep. Freeborn made a substitute motion to amend SB 248 conceptually by adding language to set the cost of the fee for the National exam, plus 20% for the amount going to the state general fund, plus \$10. per, for Board administrative costs. Motion seconded by Rep. Bishop.

Discussion began, i.e., it was the view of some the Board might consider the effects of the process of examinations and fees would indicate, if in fact, the applicant were to pay the fee direct to the examining agency, and then offer the data available on this subject to the legislature when review of this situation arises again. It was the view of some, it would be best to expedite this proposal in SB 248 now, then ask the Board in the future, to evaluate the process of having the applicant pay the exam fee direct to the examining agency.

Note: For the record this date, Rep. Neufeld agrees with Rep. Swall on the terms to ask the Board to give this matter under discussion some consideration and present data to the legislature at the next review, and at this time vote against the substitute motion offered by Rep. Freeborn.

Vote taken. Motion failed.

Chair drew attention to the original motion made by Rep. Bruns and Rep. Mayans to pass SB 248 favorably out of Committee. Vote taken. Motion carried.

Chair adjourned the meeting at 2:59 p.m.

The next meeting is scheduled for March 10, 1993.



SESSION OF 1993

**SUPPLEMENTAL NOTE ON SENATE BILL NO. 176**

As Amended by Senate on Final Action

**Brief\***

S.B. 176, as amended by the Senate, creates two new statutes that concern smoking in medical care facilities, *i.e.*, a special or general hospital, ambulatory surgery center, or recuperation center, or a psychiatric hospital and in the State Capitol.

Pursuant to the provisions of Section 2 of the bill, smoking would be prohibited in any medical care facility on and after July 1, 1994, except that a smoking area could be established within a long-term care unit of a medical care facility. On and after July 1, 1994, the administrative officer of any medical care facility would be responsible for seeing that signs were posted stating that smoking is prohibited by state law. Smoking in a medical care facility would be punishable by a fine of not more than \$20 for each violation. Failure to post notices would be punishable by a fine of not more than \$50. In addition, the Department of Health and Environment or a local health department could seek an injunction to enjoin repeated violations of the act.

Section 3 of S.B. 176 would prohibit, prior to July 1, 1995, smoking in any places in the State Capitol except in offices of state officers and employees that have been designated as smoking areas in accordance with K.S.A. 21-4009 *et seq.* Subsequent to July 1, 1995, smoking would be prohibited in any place in the State Capitol, and no area in the Capitol could be designated as a smoking area pursuant to the provisions of K.S.A. 21-4010.

**Background**

The provisions of S.B. 176, as introduced, have been sought by several Wichita hospitals that are reluctant to prohibit smoking unilaterally even though

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\* Supplemental Notes are prepared by the Legislative Research Department and do not express legislative intent.

PNW 5315/ec  
3-9-93  
attn #1.

HENRY M. HELGERSON, JR.  
REPRESENTATIVE, EIGHTY-SIXTH DISTRICT  
4009 HAMMOND DRIVE  
WICHITA, KANSAS 67218-1221

ROOM 281-W  
CAPITOL  
TOPEKA, KANSAS 66612



TOPEKA

HOUSE OF  
REPRESENTATIVES

COMMITTEE ASSIGNMENTS  
CHAIRMAN: SUBCOMMITTEE FOR HUMAN  
SERVICES  
MEMBER: APPROPRIATIONS  
INSURANCE  
LEGISLATIVE POST AUDIT  
JOINT COMMITTEE ON  
HEALTH CARE  
LEGISLATIVE BUDGET  
COMMITTEE

SB 176

March 9, 1993

Testimony Before the  
House Public Health and Welfare Committee

by

Representative Henry M. Helgerson, Jr.

Madam Chairman and members of the Committee:

Thank you for the opportunity to appear before you today on Senate Bill 176. The original draft of this bill would prohibit smoking in medical care facilities, i.e., a special or general hospital, ambulatory surgery center or recuperation center, and a psychiatric hospital. However, an amendment was added in the Senate to prohibit smoking in the state capitol.

Today it is widely accepted in the medical community and by the general public that smoking is hazardous to a person's health. It contributes to the development of cancer, heart disease, peptic ulcer disease and acute and chronic lung problems. More than one of every six

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deaths and illnesses resulted in \$69 billion in health care costs and lost productivity in the United States. Of these deaths, an estimated 3,888 Kansans died due to smoking related illnesses. In addition, smoking prolongs the recovery period from both smoking related illnesses as well as unrelated health problems. Of the State employee population, smokers had 33% more hospital admissions and averaged 41% more hospital days than non-smokers. In 1991, smoking illness attributable to smoking cost Kansans \$594 million.

With the newly released EPA report classifying secondhand smoke as a Class A carcinogen similar to asbestos and radon, there is additional justification to further discourage tobacco usage.

SB 176 would ban all smoking in a medical care facility (or hospitals). Presently, many hospitals have restrictions on smoking but still allow smoking with a doctor's permission. How ironic it is to go to a hospital for treatment of an illness and be placed in an environment such as a semi-private room and have to endanger your health with exposure to a Class A carcinogen.

Last year, this bill was introduced in the House at the request of several hospitals that felt a total ban was more equitable and appropriate. Future federal regulations are expected to prohibit smoking for some

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hospitals. This bill would move that implementation forward to July 1, 1994 and include all hospitals.

One change from last year's bill is in Section 2. Under this provision, a smoking area may be permitted in a licensed long-term care unit of a medical care facility. This allows nursing homes connected to hospitals to permit smoking in a restricted form.

Madam Chair, I would be happy to answer any questions.

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pg 393





Department of Health and Environment

Robert C. Harder, Secretary Reply to:

Testimony Presented to the  
House Public Health and Welfare Committee

by

The Kansas Department of Health and Environment

Senate Bill 176

The Kansas Department of Health and Environment supports the intent of Senate Bill 176. This bill seeks to prohibit smoking in any medical facility or psychiatric hospital, except that smoking areas may be established within a licensed long-term care unit of a medical care facility if it is well-ventilated. The Department strongly recommends that no smoking should be allowed in any patient care area of such facilities.

Exposure to Environmental Tobacco Smoke (ETS) now has been linked to heart disease in non-smokers. A report in the January, 1992 issue of Circulation, a journal of the American Heart Association concludes that passive smoking causes about 10 times as many deaths from heart disease as it does from cancer. These deaths contribute greatly to the estimated 53,000 annual deaths caused by passive smoking which ranks as the third leading preventable cause of death in the U.S. today, following active smoking and alcohol.

Annually smoking causes 434,000 deaths nationwide. In Kansas alone, nearly 4,000 deaths in 1991 were attributed to smoking-related illnesses and contributed significantly to our health care costs. In 1991, \$186 million was spent for direct cost of smoking-related illnesses. Smoking attributable indirect mortality cost for Kansans aged 35-85 was estimated at \$347 million. By combining the smoking-attributable direct costs and the indirect costs, we can estimate the total smoking-attributable cost to our Kansas economy was \$594 million for 1991.

The Joint Commission on Accreditation of Health Care Organizations (JCAHO) has acted to require total elimination of smoking in medical care facilities. As of January 1, 1992, Hospitals accredited by the Joint Commission on Accreditation of Health Care Organizations are required to enforce hospital-wide no-smoking policies. Sixty-six of 149 hospitals licensed in Kansas are JCAHO accredited.

Medical facilities are workplaces for Kansas health care providers and employees. Workplace restrictions on tobacco use have been shown to be beneficial to the health of employees. The 1992 research supplement of Tobacco Control Journal reports that smokers smoke fewer cigarettes at work and over a 24 hour period when employed in a workplace where smoking is banned. Implementing a smoking ban in conjunction with employer supported assistance for tobacco cessation results in a significant increase in the number of smokers who attempt to stop. Likewise, policies enacted to reduce exposure to secondhand smoke may encourage smokers to quit, thus increasing their overall well-being and decreasing their likelihood of cancer and other smoking related diseases.

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The Kansas Department of Health and Environment strongly supports Senate Bill 176, which takes one more step toward reducing the public's health risk from ETS by making the Kansas regulations for acute care hospitals consistent with those of the JCAHO.

Presented by: Julia Francisco, Cancer Coordinator  
Office of Chronic Disease and Health Promotion  
March 9, 1993

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Attn #3  
pg 2 of 2*



## Memorandum

**Donald A. Wilson**  
President

March 8, 1993

**TO:** House Public Health & Welfare Committee  
**FROM:** Kansas Hospital Association  
**RE:** *Senate Bill 176*

The Kansas Hospital Association appreciates the opportunity to comment regarding the provisions of Senate Bill 176. Senate Bill 176 would prohibit smoking in medical care facilities. We support this proposal.

By prohibiting smoking in medical facilities, Senate Bill 176 would help accomplish the following goals:

- 1) a reduction in the risk to the patient associated with smoking, including its possible adverse effects on the patient's treatment;
- 2) a reduction in the risk to other patients and staff associated with passive smoking; and
- 3) a reduction in the risk of a fire safety hazard.

Thank you for your consideration of our comments.

/jfw

*P. Wilson*  
*3-9-93*  
*Attn #14*

Mr. MARY ANN GABEL, MPA, Executive Director

BOARD MEMBERS:

Public Members

JOHN S. HOMLISH, Ph.D.

RONALD D. REINERT

JOSEPH N. ROBB, Chairman

Psychology Rep.

DONALD J. FORT, Ph.D., Vice-Chairman

GERALD K. GENTRY, Ph.D.

Social Work Rep.

(Vacant)

THELMA JOHNSON SIMMONS, MSW

STATE OF KANSAS



LICENSED PROFESSIONALS:

Psychologists  
Social Workers

REGISTERED PROFESSIONALS:

Masters Level Psychologists  
Professional Counselors  
Marriage and  
Family Therapists  
Alcohol and Other  
Drug Abuse  
Counselors

**BEHAVIORAL SCIENCES REGULATORY BOARD**

Landon State Office Bldg—900 SW Jackson, Rm 651-S  
Topeka, KS 66612-1263—913/296-3240 FAX 913/296-6729

**TESTIMONY BEFORE THE HOUSE PUBLIC HEALTH AND WELFARE COMMITTEE**

**SB 248**

**TUESDAY, MARCH 9, 1993**

**CHAIRPERSON REP. FLOWER, VICE-CHAIRPERSON REP. WAGLE AND  
COMMITTEE MEMBERS:**

I am Mary Ann Gabel, Executive Director of the Behavioral Sciences Regulatory Board. Thank you for providing me an opportunity to appear before you today on behalf of the board to request the committee's endorsement of and support for SB 248. This bill addresses the board's need for increases in the statutory limitation on fees for mandatory examinations for psychology and marriage and family therapy registration applicants.

During the first part of FY'94, the board will experience increases in the cost to purchase national examinations for licensure in psychology and registration in marriage and family therapy.

PSYCHOLOGY LICENSURE EXAMINATION

K.S.A. 74-5310(a) sets out an examination requirement of all applicants for psychology licensure in the State of Kansas. The examination that is used in Kansas, as well as in each of the states, is owned by the Association of State and Provincial Psychology Boards and is administered through Professional Examination Service (PES) twice a year in April and October. The current cost to the board to purchase the examination is \$135. Licensees are assessed \$175, 20% of which, or \$35, is deposited directly in the state general fund. The remaining \$5 is used by the board to cover administrative costs.

Effective with the October 1993 psychology examination, the board's cost to purchase the examination will be increased to \$250. The current statutory limitation of \$250 will not allow the board to collect from its psychology licensure applicants the mandatory 20% deposit to the state general fund or permit reimbursement of the board's administrative costs. The current limitation, in fact, will require the board fee fund to subsidize psychology applicants, which does not appear to the board to be appropriate in light of the fact that the fee fund balance is derived from fees assessed to each of the

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board's credentialed professional groups. This legislation increases the statutory fee limitation to \$350 for the psychology examination, which will enable the board to amend its rule and regulation on psychology fees to reflect the cost increase.

MARRIAGE AND FAMILY THERAPISTS' REGISTRATION EXAMINATION

K.S.A. 65-6404(a)(4) sets out an examination requirement of all applicants, other than grandfathering applicants, for marriage and family therapy registration in the State of Kansas. The examination that will be used in Kansas, as well as in those states that credential marriage and family therapists, is owned by the American Association for Marriage and Family Therapy and is also administered through PES. The cost to the board to purchase the examination, effective July 1, 1993, will be increased from \$155 to \$195. The current statutory limitation of \$150 does not cover the existing examination cost plus any administrative costs and the mandatory 20% direct deposit to the state general fund, let alone the impending increase. The current limitation will also require the board fee fund to subsidize marriage and family therapy registration applicants. This legislation increases the statutory fee limitation to \$275, which will enable the board to amend its rule and regulation on marriage and family therapy fees to reflect the cost increase.

Thank you for your time and consideration. I will be happy to answer any questions you may have.

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*pg 2 of 5*

MARY ANN GABEL, MPA, Executive Director

STATE OF KANSAS

LICENSED PROFESSIONALS:  
Psychologists  
Social Workers

BOARD MEMBERS:

Public Members

JOHN S. HOMLISH, Ph.D.

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JOSEPH N. ROBB, Chairman

Psychology Rep.

DONALD J. FORT, Ph.D., Vice-Chairman

GERALD K. GENTRY, Ph.D.

Social Work Rep.

(Vacant)

THELMA JOHNSON SIMMONS, MSW



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Masters Level Psychologists

Professional Counselors

Marriage and

Family Therapists

Alcohol and Other

Drug Abuse

Counselors

**BEHAVIORAL SCIENCES REGULATORY BOARD**

Landon State Office Bldg—900 SW Jackson, Rm 651-S

Topeka, KS 66612-1263—913/296-3240 FAX 913/296-6729

M E M O R A N D U M

TO: Marty Kennedy, Budget Analyst  
Division of the Budget  
State Capitol, Room 152-E  
Topeka, KS 66612-1578

FROM: Mary Ann Gabel, Executive Director *MS*

DATE: February 16, 1993

RE: SB 248 - An Act Concerning Fees Prescribed by the Board  
for Psychology Licensure and Marriage and Family  
Therapy Registration

I am responding to the request from Gloria Timmer to submit information on the fiscal impact to this agency should SB 248 be enacted.

ANALYSIS

This bill was introduced at the board's request and addresses the board's need for increases in the statutory limitation on fees for mandatory examinations for psychology licensure and marriage and family therapy registration applicants.

During the first part of FY'94, the board will experience increases in the cost to purchase national examinations for licensure in psychology and registration in marriage and family therapy.

AFFECT ON AGENCY OPERATION OR AREA OF RESPONSIBILITY

The bill, in its current form, will have a positive effect on the agency. The psychology licensure and marriage and family therapy registration acts set out examination requirements of all applicants and establish fee limitations of \$250 and \$150 respectively.

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FEES SET AT CURRENT  
STATUTORY LIMITATION

Psychology Exams:

30 @ \$250 \$7,500  
 Less 20%  
 St. Gen. Fund ( 1,500)  
 \$6,000

Less purchase  
 30 @ \$250 ( 7,500)

Gross decrease  
 fee fund ( 1,500)

Less administra-  
 tive exp. 30 @ \$5 ( 150)

Net decrease fee  
 fund (\$2,000)

RMFT Exams:

10 @ \$150 \$1,500  
 Less 20%  
 St. Gen. Fund ( 300)  
 \$1,200

Less purchase  
 10 @ \$195 ( 1,950)

Gross decrease  
 fee fund ( 750)

Less administra-  
 tive exp. 10 @ \$5 ( 50)

Net decrease  
 fee fund (\$ 800)

TOTAL DECREASE  
 FEE FUND (\$2,800)

FEES SET AT SB 248  
PROPOSED STATUTORY  
LIMITATION

Psychology Exams:

30 @ \$325 \$9,750  
 Less 20%  
 St. Gen. Fund ( 1,950)  
 \$7,800

Less purchase  
 30 @ \$250 ( 7,500)

Gross increase  
 fee fund 300

Less administra-  
 tive exp. 30 @ \$5 ( 150)

Net increase fee  
 fund \$ 150

Net increase state  
 general fund \$ 450

RMFT Exams:

10 @ \$260 \$2,600  
 Less 20%  
 St. Gen. Fund ( 520)  
 \$2,080

Less purchase  
 10 @ \$195 ( 1,950)

Gross increase  
 fee fund 130

Less administra-  
 tive exp. 10 @ \$5 ( 50)

Net increase  
 fee fund \$ 80

Net increase state  
 general fund \$ 220

TOTAL INCREASE  
 FEE FUND \$ 230

TOTAL INCREASE STATE  
 GENERAL FUND

\$ 670  
 attn #5  
 3-9-3  
 pg 4 of 5  
 P#W

STATE OF KANSAS



DIVISION OF THE BUDGET

Room 152-E

State Capitol Building

Topeka, Kansas 66612-1504

(913) 296-2436

FAX (913) 296-0231

Joan Finney  
Governor

Gloria M. Timmer  
Director

February 24, 1993

**RECEIVED**  
FEB 26 1993  
BEHAVIORAL SCIENCE  
REGULATORY BOARD

The Honorable Sandy Praeger, Chairperson  
Committee on Public Health and Welfare  
Statehouse, Room 128-S  
Topeka, Kansas 66612

Dear Senator Praeger:

SUBJECT: Fiscal Note for SB 248 by Senate Committee on  
Public Health and Welfare

In accordance with KSA 75-3715a, the following fiscal note  
concerning SB 248 is respectfully submitted to your committee.

This bill increases the maximum examination fee for marriage  
and family therapists from \$150 to \$275, and for psychologists from  
\$250 to \$350. The bill would make changes to the maximum allowed  
charge for each examination. The actual amount for each  
examination is set by administrative rule and regulation.

The bill's passage would have no impact on expenditures and  
revenues contained in the *FY 1994 Governor's Budget Report*.

Sincerely,

*Gloria M. Timmer*  
Gloria M. Timmer  
Director of the Budget

cc: Mary Ann Gabel, Behavioral Sciences

248.fn

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pg 5 of 5*



# SENATE BILL No. 248

By Committee on Public Health and Welfare

2-9

8 AN ACT concerning fees prescribed by the behavioral sciences reg-  
9 ulatory board for certain examinations; amending K.S.A. 65-6411  
10 and 74-5311 and repealing the existing sections.  
11

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

13 Section 1. K.S.A. 65-6411 is hereby amended to read as follows:  
14 65-6411. (a) The board shall fix by rules and regulations and shall  
15 collect the following fees:

- 16 (1) For application for registration, not to exceed \$150;
- 17 (2) for examination, not to exceed \$150 \$275;
- 18 (3) for renewal of a registration, not to exceed \$150;
- 19 (4) for reinstatement of a registration, not to exceed \$150;
- 20 (5) for replacement of a registration, not to exceed \$20; and
- 21 (6) for late charges, not to exceed \$5 for each 30 days of delay

22 beyond the date the renewal application was to be made.  
23 (b) Fees paid to the board are not refundable.

24 Sec. 2. K.S.A. 74-5311 is hereby amended to read as follows:  
25 74-5311. Examinations for applicants under this act shall be held by  
26 the board from time to time but not less than once each year. The  
27 board shall adopt rules and regulations governing the subject, scope,  
28 and form of the examinations or shall contract with a national testing  
29 service to provide an examination approved by the board. The board  
30 shall prescribe an initial examination fee not to exceed \$250 \$350.  
31 If an applicant fails the first examination, such applicant may be  
32 admitted to any subsequent examination upon payment of an addi-  
33 tional fee prescribed by the board not to exceed \$250 \$350. The  
34 examination fees prescribed by the board under this section shall  
35 be fixed by rules and regulations of the board.

36 Sec. 3. K.S.A. 65-6411 and 74-5311 are hereby repealed.

37 Sec. 4. This act shall take effect and be in force from and after  
38 its publication in the Kansas register.

If the board has contracted with a national testing service to provide an examination approved by the board, the board may require that fees paid for the examination be paid directly to the national testing service by the person taking the examination.

If the board has contracted with a national testing service to provide an examination approved by the board, the board may require that fees paid for the examination be paid directly to the national testing service by the person taking the examination.

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