

MINUTES OF THE HOUSE COMMITTEE ON HEALTH AND HUMAN SERVICES.

The meeting was called to order by Chairperson Carlos Mayans at 1:30 p.m. on January 23, 1995 in Room 423-S of the State Capitol.

All members were present.

Committee staff present: Emalene Correll, Legislative Research Department
Bill Wolff, Legislative Research Department
Norman Furse, Revisor of Statutes
Lois Hedrick, Committee Secretary

Conferees appearing before the committee:

Tom Hitchcock, Executive Secretary/Director, Board of Pharmacy
Mack Smith, Executive Secretary, Board of Mortuary Arts
John Federico, of Pete McGill and Associates

Others attending: See Guest List, Attachment 1.

Chairperson Mayans opened the meeting by stating that the minutes for the meetings held on January 12 and 17, 1995, have been handed out for review. Also distributed were the Rules of the Committee (see Attachment 2) and a listing of healthcare acronyms (see Attachment 3) developed by the Research Department. He advised the members that today's meeting is to listen to testimony of those requesting introduction of legislation.

Tom Hitchcock, of the Board of Pharmacy, presented testimony for three amendments concerning the Board. The first, K.S.A. 65-1627, adds section (a)(14) to give the board authority to subject a licensee to submit to mental or physical examination or drug screening if the board so orders. The second amendment, 65-1627h, adds section (c) at the request of the agency's attorney. Currently it is believed that the board has no authority in the statutes to consider payment of costs in the reinstatement of a licensee. The third amendment, 75-1606, changes the annual board meeting to June (when it is actually held) and re-titles the executive secretary to executive director. (See Attachment 4.) Representative Mayans asked if the amendments were similar to the statutes of other like organizations. Mr. Hitchcock said the first one was. As to the other two, Mr. Hitchcock did not know. Representative O'Connor asked who pays the costs of additional examinations. Mr. Hitchcock said the licensee does but the cost assessment is not addressed in the statutes as far as he knows. Emalene Correll offered to research the other agencies statutes to determine if assessment is specified. After the discussion, on motion of Representative Freeborn, seconded by Representative Merritt, the committee approved the introduction of the amendments shown on Attachment 4.

Mack Smith, of the Board of Mortuary Arts, distributed the board's proposed changes (see Attachment 5). The amendments do not raise fees but do specify the authority for fees. Representative Geringer asked if the amendment concerning student embalmers infers they are not being supervised now. Mr. Smith answered they are supervised, but this change gives a better definition of what they can and cannot do, and specifies supervision until they graduate from school and pass the state's test. On motion of Representative Morrison, seconded by Representative Rutledge, the committee approved the introduction of the bill as shown on Attachment 5.

John Federico then offered a bill concerning office lease provisions for optometrists who lease space from a vendor (see Attachment 6). He presented this request on behalf of Cole Vision ("Sears Optical" and "Montgomery Ward Optical") and Lenscrafters Corporations, two clients of his firm. Mr. Federico said the bill would clarify that a lease agreement to allow an optometrist to maintain an office does not alter the independent contractor status of the optometrist. The amendment has been developed in view of the State Board of Optometry's inquiries into such arrangements. Representative Geringer asked if the terms of the agreement represented an "arms length" approach. Mr. Federico said he believed that was the case. Representative Landwehr asked what caused the amendments? Mr. Federico said the Board of Optometry is making inquiries into six optometrists in Kansas who currently lease from Lenscrafters. He was not certain

CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON HEALTH AND HUMAN SERVICES, Room 423-S State Capitol, at 1:30 p.m. on January 23, 1995

but what Walmart was also included. He said there is a risk that the board will pull their licenses. After discussion, on motion of Representative Merritt, seconded by Representative Rutledge, the committee approved the introduction of the bill as set out on Attachment 6.

The meeting was adjourned at 2:02 p.m.

The next meeting is scheduled for January 24, 1995.

HOUSE COMMITTEE ON
HEALTH AND HUMAN SERVICES GUEST LIST

DATE: JANUARY 23, 1995

NAME	REPRESENTING
Tom Hitchcock	Bd. of Pharmacy
Rich Guthrie	Health Midwest
Michelle Peterson	Ks. Gov. Consulting
Joe Turjanic	Ks. Chiropractic Assn
KEITH R. LANDIS	CHRISTIAN SCIENCE COMM ON PUBLICATION FOR KS
Bob Williams	Ks. Pharmacists Assoc
GARY Robbins	Ks. Optometric Assn
Chip Wheelen	Ks Medical Soc.
AROLD RIEHM	Ks. Assoc OF ED. MED.
Stacey Simpson	Hein, Ebert & Weir
Tom Bell	Ks. Hosp. Assn.
Tom Bruno	Allen & Assoc.
John Federico	Pete McGill + Assoc
Mack Smith	Ks. St. Bd. of Mortuary Arts
Sandy Strand	KINHT
Wes Kott	
Roger Johnson	KAFP-DR OF THE DAY

CARLOS MAYANS
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TOPEKA

HOUSE OF
REPRESENTATIVES

COMMITTEE ASSIGNMENTS
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MEMBER: SELECT COMMITTEE ON DEVELOPMENTAL
DISABILITIES
JOINT COMMITTEE ON HEALTH CARE
DECISIONS FOR THE 90'S

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1995 COMMITTEE RULES
HOUSE COMMITTEE ON HEALTH AND HUMAN SERVICES

1. A substitute motion is in order, but no additional substitute motion shall be in order until the prior substitute motion is disposed.
2. Amendments to motions are not in order.
3. A motion requires a second to be in order.
4. A motion to take from the table shall be in order only when such item is on the agenda or is taken up by the chair. The motion requires a simple majority and is non-debatable.
5. No conferee shall be interrupted during presentation of their testimony, except with the permission of the chair.
6. Questioning of a conferee shall be limited to the subject matter of the agenda for the day.
7. Granting excused absences is reserved to the chair.
8. A request from any member that their own vote be recorded shall be granted.
9. All conferees are requested to submit enough copies of written testimony for all committee members and staff.
10. Adjournment is reserved to the chair.
11. In any case where committee rules do not apply, House Rules shall govern. All powers, duties and responsibilities not addressed above are reserved to the chair.

The following terms and acronyms are those that may be used in the Committee on Public Health and Welfare by staff or conferees in discussion of health issues. The listing is not intended to be a complete one, and the Committee may wish to suggest terms to be added to the glossary. A separate listing of terms and acronyms used in reference to programs operated by the Department of Social and Rehabilitation Services has been prepared for the Committee.

FREQUENTLY USED ABBREVIATIONS AND ACRONYMS

ADAMHA	Alcohol, Drug Abuse and Mental Health Administration (federal)
ADAS	Alcohol and Drug Abuse within the Department of Social and Rehabilitation Services
AHA	American Hospital Association
AMA	American Medical Association
ANA	American Nurses Association
AOA	American Optometric Association or American Osteopathic Association
APA or KAPA	Kansas Administrative Procedures Act
APhA	American Pharmaceutical Association
APHA	American Public Health Association
ARNA	Advanced Registered Nurse Practitioner (Kansas)
BCA	Blue Cross Association (national association)
BC-BS	Blue Cross-Blue Shield of Kansas or Kansas City
CAT	Computerized Axial Tomography
CCU	Coronary Care Unit
CDC	Centers for Disease Control (federal)
CHC	Community Health Center
CMHC	Community Mental Health Center
CON	Certificate of Need
CPI	Consumer Price Index
CT	Computer Tomographic (scanner)
DD	Developmental Disability
DEA	Drug Enforcement Administration (federal)
DH&E or KDH&E	Department of Health and Environment (Kansas)
DO	Doctor of Osteopathic Medicine
DRG	Diagnosis Related Group
ECF	Extended Care Facility
EMS	Emergency Medical Services
EPSDT	Early and Periodic Screening, Diagnosis, and Treatment Program also called Kan-Be Healthy
ER	Emergency Room
ESRD	End Stage Renal Disease
FAH	Federation of American Hospitals
FDA	Food and Drug Administration (federal)
FFP	Federal Financial Participation
FMG	Foreign Medical Graduate
FPL	Federal Poverty Level
FTC	Federal Trade Commission

FY	Fiscal Year
FFY	Federal Fiscal Year
GHAA	Group Health Association of America
HCFA	Health Care Financing Administration
HHS	Department of Health and Human Services (federal)
HIAA	Health Insurance Association of America
HMO	Health Maintenance Organization
ICDA	International Classification of Diseases, Adapted
ICF	Intermediate Care Facility
ICF/MR	Intermediate Care Facility for the Mentally Retarded
ICU	Intensive Care Unit
IOM	Institute of Medicine of the National Academy of Sciences IPA Independent Practice Association
JCAHCF	Joint Commission on the Accreditation of Health Care Facilities (formerly Joint Commission on the Accreditation of Hospitals)
KAHA	Kansas Association of Homes for the Aging
KHCA	Kansas Health Care Association
KHA	Kansas Hospital Association
KMS	Kansas Medical Society
KPA	Kansas Pharmacists Association
KSNA	Kansas State Nurses Association
MCAT	Medical College Admission Test
MCH	Maternal and Child Health Program
MHMRS	Mental Health and Retardation Services within the Department of Social and Rehabilitation Services
MMIS	Medicaid Management Information System
MR	Mentally Retarded
NCHS	National Center for Health Statistics
NCHSR/HCTA	National Center for Health Services Research/Health Care Technology Assessment
NCSL	National Conference of State Legislatures
NGA	National Governor's Association
NHSC	National Health Services Corps
NIH	National Institute of Health
NIMH	National Institute of Mental Health
NIOSH	National Institute of Occupational Safety and Health
NP	Nurse Practitioner (ARNP in Kansas)
OAA	Old Age Assistance (now covered under SSI)
OASDHI	Old Age Survivors, Disability, and Health Insurance Program OMB Office of Management and Budget (federal)
OPD	Outpatient Department
OR	Operating Room
OSHA	Occupational Safety and Health Administration (federal) OT Occupational Therapy
OTA	Office of Technology Assessment (federal)
P.L.	Public Law (federal law)
PA	Physician Assistant
PHS	U.S. Public Health Service

PMA	Pharmaceutical Manufacturers Association
PPO	Preferred Provider Organization
PPS	Prospective Payment System
PSRO	Professional Standards Review Organization
PT	Physical Therapy
RFP	Request for Proposal
RN	Licensed Registered Professional Nurse
RVS	Relative Value Scale (applied to professional fees or reimbursement)
RHC	Rural Health Clinic (federally certified)
SMSA	Standard Metropolitan Statistical Area
SNF	Skilled Nursing Facility
SSA	Social Security Administration
SSI	Supplemental Security Income
UR	Utilization Review
VA	Veterans Administration
VNA	Visiting Nurses Association
VR	Vocational Rehabilitation within the Department of Social and Rehabilitation Services
WBGH	Washington Business Group on Health
WHO	World Health Organization
WIC	Women, Infants, and Children's Program

GLOSSARY OF HEALTH CARE TERMS

Accessibility:	Ability to obtain appropriate health care services. Accessibility may be affected by economic, organizational, location, or geographic factors.
Accreditation:	Recognition by an external body (not a governmental entity) that an individual or an institution has met certain predetermined standards. When the reference is to an individual the assessment is often called certification.
Acute Care:	Medical treatment rendered to an individual whose illness or health problem are of a short-term or episodic nature. Acute care hospitals are those that primarily serve persons requiring short-term care.
Acute Disease:	A disease characterized by a single episode of a relatively short duration from which the patient returns to his normal or previous state of health. There is no standard definition that distinguishes acute disease from chronic disease and there are acute episodes of a chronic disease.
Adult Care Home:	The statutory term used to describe nursing homes required to be licensed in Kansas, including what used to be known as skilled care facilities (SNFs), intermediate care facilities (ICFs), personal care facilities, and one and two-bed adult care homes.
Adult Family Home:	An adult foster care home registered by the Secretary of Social and Rehabilitation Services pursuant to Kansas statutes in which an adult is provided nonmedical services such as assistance with dressing, bathing, or supervision, or both.

Advanced Registered Nurse Practitioner (ARNP): In Kansas, a licensed professional nurse who has received advanced training and/or education in nursing and who is certified by the Board of Nursing to practice on an advanced level as defined by rules and regulations of the Board.

Affiliation: A formal agreement between two or more otherwise independent entities or individuals which defines how they will relate to one another, *e.g.*, an agreement between a hospital and a medical school for specific medical student training purposes or an agreement between a physician and a mid-level health care provider in regard to consultation or supervision.

Allied Health Personnel: Specially trained health care workers other than licensees in the healing arts, dentists, optometrists, nurses, pharmacists, and podiatrists. Allied health personnel may be registered or licensed but need not be.

Allowable Costs: Items or elements of an institution's costs that are reimbursable under a payment formula. Both Medicare and Medicaid reimburse on the basis of costs but do not allow reimbursement for all costs.

Alternatives in Long-Term Care: A whole range of services designed to keep individuals, particularly the elderly, disabled, and retarded, out of institutions such as nursing facilities which provide care on a long-term basis.

Ambulatory Care: All types of health services that are provided on an outpatient basis, in contrast to services provided in the home or to persons who are inpatients.

Ambulatory Surgical Center: A medical care facility licensed by the Secretary of Health and Environment to provide one-day surgery, *e.g.*, the patient does not remain in the facility overnight.

Bad Debts: The amount of income lost to a provider because of the failure or inability of patients to pay total amounts owed.

Board Certified: Status granted to a person licensed to practice medicine and surgery who completes a required course of training and experience and passes an examination in a specialty. Board certification is carried out by private organizations and is not a governmental function or recognition.

Capitation: A method of payment for health services in which an individual or institutional provider is paid a fixed amount for each person served without regard to the actual number or nature of services provided to each person in a set period of time.

Catastrophic Health Insurance: Health insurance that provides protection against the high cost of treating lengthy or severe illnesses or disability. Usually catastrophic insurance covers a percentage of costs incurred after the individual or another insurer has reimbursed for a specified amount or percentage of incurred costs.

Catchment Area: A geographic area defined and served by a health program or institution such as a hospital or community mental health center.

Certificate of Need (CON): A certificate issued to an individual or organization proposing to construct, modify, or acquire a health facility or major medical equipment or offer a new health service. Kansas has not had a certificate-of-need program since our law expired in 1986.

Certification: In Kansas, the process by which a nongovernmental entity evaluates and recognizes an individual, institution, or educational program meeting predetermined standards. Uncertified persons are not excluded from practice but may advertise themselves as being certified by an association or nongovernmental agency.

- CHAMPUS:** Civilian Health and Medical Program of the Uniformed Services, which is a Department of Defense program supporting private sector care for military dependents and retirees.
- Charity Care:** Refers to physician or hospital services provided to persons who are unable to pay for the cost of the services.
- Chronic Disease:** A disease that has one or more of the following characteristics: is permanent; leaves a residual disability; is caused by irreversible pathological alteration; may be expected to require a long period of supervision, observation, or care.
- Clinic:** Generally a facility devoted to diagnosis and treatment of outpatients, although the term is not specifically defined and may be used to describe facilities that serve only indigent or public patients or facilities in which medical education is carried out. Clinics are not licensed and regulated by the state in Kansas.
- Coinsurance:** A cost-sharing requirement under a health insurance or other health benefits plan under which the beneficiary is responsible for a percentage of costs up to an agreed to maximum.
- Community Based Care:** A range of health and social services provided to an individual in his place of residence for the purpose of promoting, maintaining, or restoring health or minimizing the effects of illness and disability.
- Community Mental Health Center (CMCH):** An entity licensed by the state which provides comprehensive (primarily ambulatory) mental health services to individuals residing or working in a defined catchment area. Centers are created and operated pursuant to specific Kansas statutes.
- Comprehensive Health Planning:** Health planning that encompasses personal factors and community programs that impact on people's health. Also refers to a specific federal assistance program no longer in effect arising from the National Health Planning and Resources Development Act of 1974. The Kansas comprehensive health planning structure was disbanded in the mid-1980s.
- Consumer:** One who may receive or is receiving health services. Usually used in health programs and legislation to refer to persons who are never a provider, *i.e.*, are not associated in any direct or indirect way with the provision of health services.
- Cost:** Expenses incurred in the provision of health goods or services which may or may not be the same as charges. Many different types of costs are referenced in the health field, such as allowable costs, direct and indirect costs, and operating costs.
- Cost Center:** An accounting practice wherein all related costs attributable to a "financial center" within an institution (an activity, department, or program) are segregated for accounting or reimbursement purposes, *e.g.*, a newborn intensive care unit in a hospital or nursing services in an adult care home.
- Cost Containment:** The control or reduction of inefficiencies in the consumption, allocation, or production of health care services which lead to higher than necessary costs.
- Credentialing:** In Kansas the term credentialing is usually used to refer to the licensing or registration of a health care provider by the state as these terms are defined in the Kansas Act on Credentialing. More generically, the term refers to recognition of professional or technical competence through registration, licensure, certification, membership in a professional association, or the award of a degree.

- Deductible:** The amount of loss or expense that must be incurred by an insured, a subscriber, or other beneficiary of health benefits before the carrier assumes liability for all or a part of the remaining cost of covered services. Deductibles may be a fixed dollar amount or the value of specified services such as a hospital day or a physician visit.
- Deinstitutionalization:** A policy under which individuals are moved from institutional settings such as state hospitals or adult care homes into community settings in which supportive services, care, and treatment are provided. Also refers to providing services in the community to keep individuals from entering a community setting.
- Developmental Disability:** A severe, chronic disability attributable to mental or physical impairment or a combination of mental and physical impairment that is manifested before an individual is 22; is likely to continue indefinitely; results in substantial functional limitations in three or more of specified areas of major life activity, *e.g.*, self care, learning, mobility, language, capacity for independent living, etc.; and reflects the individual's need for special, interdisciplinary, or generic care treatments or other services that are lifelong or of extended duration.
- Disability:** Any limitation on physical, mental, or social activity of an individual as compared with other individuals of similar age, sex, and occupation. Frequently used to refer to limitation of a person's usual or major activities and to varying types of disability such as functional or vocational, degree such as partial or total, or length such as temporary or permanent.
- Early and Periodic Screening Diagnosis, and Treatment Program (EPSDT):** Known as "Kan-Be-Healthy" in Kansas, EPSDT is a federally mandated part of the Medicaid program under which the states must have a program in effect for all children under age 21 to ascertain physical and mental defects and to provide health care services, treatment, or other measures necessary or correct or ameliorate defects and chronic conditions identified. Programs are not just to pay for services, but must have an active outreach component to inform eligible persons of available benefits, to provide screening, and if necessary, to assist in obtaining appropriate treatment. States without a program that meets federally prescribed standards are subject to a financial penalty.
- Emergency Medical Services (EMS):** In Kansas refers to licensed services utilized in responding to individual needs for immediate medical services (ambulance services capable of varying levels of emergency care).
- Emergency Medical Services Personnel:** Attendants employed by or volunteering to serve as emergency medical service attendants who are certified by the Emergency Medical Service Board as meeting state-established standards of training and proficiency. Includes various levels of attendants.
- Epidemiology:** The study of the patterns of determinants and antecedents of disease in human populations utilizing biology, clinical medicine, and statistics in an effort to understand the causes of illness and disease.
- Extended Care Facility:** No longer used, except as a type of shorthand, but once used in the Medicare program to describe a skilled nursing facility which qualified for Medicare benefits. Sometimes used in the phrase "extended care benefits" as a type of shorthand manner of referring to the Medicare benefit limitations on nursing facility care under Medicare.
- Family Practice:** A medical specialty practice in which physicians provide continuing comprehensive primary care within the context of a family unit. Considered one of the primary care or general practice specialties.
- Fee-For-Service:** Method of billing for health services under which a practitioner charges separately for each patient encounter or service rendered that is the usual billing practice for the majority of

physicians in this country. This billing practice contrasts with salary, per capita, or prepayment billing systems in which the payment to the provider does not change with the number of services actually used.

Foreign Medical Graduate (FMG): A practitioner of medicine and surgery who graduated from a medical school located outside the United States or Canada.

General Practice: A medical practice in which a physician who does not have specialty training provides a wide range of primary care services to patients.

Group Practice: A formal association of three or more physicians or other health professionals, with income from the practice pooled and distributed according to some prearranged plan. Group practice is growing rapidly in the United States.

Habilitation: A continuous process by which the individual's ability to participate in normal life activities and function in society is developed. Distinguished from rehabilitation which implies restoration or return to prior functioning following an accident or illness, while habilitation applies to individuals born with limited functional ability.

Handicapped: As defined in Section 504 of the federal Rehabilitation Act of 1973, any person who has a physical or mental impairment which substantially limits one or more major life activities; has a record of such impairment; or is regarded as having such impairment.

Healing Arts: In Kansas, the term refers specifically to medical doctors, doctors of osteopathic medicine, and chiropractors. The term "licensed to practice the healing arts" is used in the Kansas statutes to refer to the above three types of providers.

Health Care Financing Administration (HCFA): The administration within the Department of Health and Human Services which manages the federal Medicare and federal-state Medicaid programs under Titles XVIII and XIX of the Social Security Act.

Health Care Provider Regulatory Boards: Those boards that license or register health care providers and regulate the practice of such providers, including:

1. the Board of Healing Arts which licenses practitioners of the healing arts and podiatrists and registers physical therapists and physical therapist assistants, occupational therapists, and maintains a register of physician assistants;
2. the Behavioral Sciences Regulatory Board which licenses doctoral level psychologists and social workers and registers masters level psychologists and professional counselors;
3. the Kansas Dental Board which licenses dentists and dental assistants;
4. the Board of Nursing which licenses professional nurses (RNs), practical nurses (LPNs), and mental health technicians;
5. the Board of Pharmacy which licenses pharmacists and pharmacies; and
6. the Board of Optometric Examiners which licenses optometrists.

- Health Facilities:** Used collectively to refer to all physical plants used in the provision of health services, although the term is usually limited to those facilities built for the purpose of providing health care, such as hospitals and adult care homes. Usually not used to refer to providers' offices.
- Health Insurance:** Often used generically to refer to any type of financial protection against medical costs arising from disease or accident that covers all or part of the cost of treatment. Accident and health insurance specifically is that form of financial protection that indemnifies the insured as opposed to protection provided through medical and hospital service corporations or health maintenance organizations.
- Health Maintenance Organization (HMO):** An entity that:
1. has an organized system providing health care in a specified geographic area which accepts responsibility for the provision of or the delivery of
 2. an agreed to set of basic and supplemental health maintenance and treatment services to
 3. a voluntarily enrolled group of subscribers and
 4. for which services the entity is reimbursed through a predetermined, fixed, periodic prepayment made by or on behalf of the enrolled individual or family.
- Health Manpower:** Refers collectively to all persons who provide health services, whether as individual practitioners or employees of health institutions and programs, whether or not professionally trained, and whether or not regulated by the state.
- Health Promotion or Health Promotion Program:** Any combination of health education and related organizational, political, and economic interventions designed to facilitate behavioral and environmental change that will improve or protect health.
- Hill-Burton:** Derived from the names of the principal sponsors of P.L. 79-725 (The Hospital Survey and Construction Act of 1946), the term is used to refer to the program under which hospitals (primarily rural) were constructed or modernized with federal funds made available under the former federal law. Hill-Burton obligation refers to the obligation that hospitals that accepted Hill-Burton funds have to provide a specified amount of charity care, although many Kansas hospitals have completed any such obligation.
- Home Health:** Health services provided in the home to the aged, disabled, sick, or convalescent who do not need institutional care. Services may be provided by a licensed home health agency, a visiting nurses association, health department, hospital, or other group.
- Hospice:** A program that provides supportive care to terminally ill persons and their families, either directly or on a consulting basis. May include a facility or not.
- Hospital:** A medical care facility that provides general or specialized inpatient 24-hour care, generally acute care, that has an organized medical staff and other necessary staff, and in Kansas, that is licensed by the Secretary of Health and Environment.
- Indemnity:** Health insurance benefits provided in the form of cash payments rather than services.

Independent Practice Association (IPA): An organized prepaid medical practice in which participating physicians remain in their independent practice office settings and provide services to both enrollees and private pay patients.

Indigent Care: Health services provided to the poor or those unable to pay for their care and who are not eligible for Medicaid or other governmental programs.

Inpatient: A patient who is admitted to a hospital or other health care facility at least overnight for the purpose of diagnostic or treatment services.

Intermediate Care Facility (ICF): Formerly used to describe a level of adult care home services for individuals who did not require the degree of nursing care or treatment that a skilled care facility (SNF) was designed to provide, but who needed care and services above the level of personal care services. Previously required by federal regulations to have licensed nurses on duty eight hours a day. The distinctions between ICF and SNF adult care homes have largely been replaced by new federal requirements and both former ICFs and SNFs are now referred to as nursing facilities (NFs) for Medicaid and Medicare purposes.

Joint Commission on the Accreditation of Health Care Facilities: Formerly the Joint Commission on the Accreditation of Hospitals. A national, nonprofit organization whose purpose is to encourage high standards of institutional care through the development of standards and inspection and voluntary certification of health care facilities.

License or Licensure: Authority granted by the state to practice a health care profession which grants an exclusive right to provide the specific health service. In Kansas, practitioners of the healing arts, dentists, optometrists, pharmacists, podiatrists, nurses, and Ph.D. psychologists are licensed.

Long-Term Care: Health and/or personal care services needed by persons who are chronically ill, aged, disabled, or retarded in an institution, the home, or the community in which the individual resides on a long-term basis.

Medical Care Facility: Under Kansas law, refers to three types of facilities licensed by the Secretary of Health and Environment, *i.e.*, general or special hospitals; ambulatory surgical centers; and recuperation centers.

Medically Underserved: A population experiencing a shortage of personal health services. A medically underserved population may or may not reside in a medically underserved area or be defined by its place of residence.

Medication Aide: An individual employed in a licensed adult care home or long-term care unit of a hospital who has received a certificate issued by the Secretary of Health and Environment attesting to successful completion of a course in medication administration. Although medication aides are often referred to as CMAs or certified medication aides, they are not in fact certified as the term is used in the Kansas Act on Credentialing.

Mental Health Technician: Individuals licensed in Kansas by the State Board of nursing to carry out certain paraprofessional patient care responsibilities for inpatient mental health patients.

Morbidity: The extent of an illness, injury, or disability in a defined population which is usually expressed in general or specific rates of incidence or prevalence.

Mortality: Death. Used to describe the relation of deaths to the population in which they occur. Mortality rate expresses the number of deaths in a unit of population in a specified time.

- Nurse:** Includes licensed professional nurses (RNs) and licensed practical Nurses (LPNs) licensed in Kansas by the State Board of Nursing.
- Outpatient:** A patient who is receiving ambulatory care at a hospital or other health facility without being admitted to the facility. Usually not used to refer to persons who are receiving services from a physician's office or other program which does not provide inpatient care.
- Peer Review:** Generally, the evaluation of a health care professional by others practicing the same profession of the effectiveness and proficiency of the services ordered or performed by the member of the profession whose work is being reviewed.
- Physician Assistant:** An individual who meets the statutory requirements for inclusion on a register maintained by the Board of Healing Arts and who may provide health care services as authorized by the licensee in medicine and surgery who has agreed to accept the legal responsibility for the actions of the physician assistant.
- Preadmission Certification or Screening:** A process under which admission to a health facility is reviewed in advance to determine the need for and appropriateness of inpatient admission. May include a determination of the inpatient length of stay that is authorized.
- Preferred Provider Organization (PPO):** A formally organized entity consisting of providers (usually the same type of provider such as physicians) and sometimes providers and a health facility that provides services to purchasers of health services at discounted rates in return for a predictable market share and often for expedited payment.
- Prepayment:** Although this term is not used consistently, it frequently is used to refer to payment made ahead of time to a provider for anticipated services. Sometimes the term is used to distinguish the payment method from insurance as in referring to HMOs, prepaid group practices, and medical foundations, which, unlike an insurance company, take responsibility for providing or arranging for the provision of needed services and paying providers for such services.
- Preventive Care:** Health care which has the goal of preventing disease or its consequences, including health care aimed at warding off illnesses, *e.g.*, immunizations; early detection of disease, *e.g.*, Pap smears; or preventing or inhibiting further deterioration, *e.g.*, exercise or prophylactic surgery.
- Primary Care:** Basic or general care focused on the point at which the patient first seeks assistance from the health care system. Primary care deals with the more simple and common illnesses or disease.
- Prospective Reimbursement:** Any method of paying hospitals or other health care programs in which the amounts of reimbursement or the rate of reimbursement is established in advance of the provision of service.
- Provider:** Hospital or other health facility or health care professional or groups of facilities or professionals that provide health care services to patients.
- Public Health:** Programs aimed at the protection and improvement of community health through organized community effort. Often encompasses health programs that are less effective when undertaken on an individual basis or less amenable to being undertaken by individuals, such as sanitation, quarantine, occupational health and safety programs, assurance of the safety of air, water, and food, etc.

- Rehabilitation:** Combined and coordinated use of medical, social, educational, and vocational measures for the training or retraining of individuals who have been disabled by illness or injury to reach the highest possible level of functioning.
- Reimbursement:** The process by which health care providers, whether institutional, receive payment for their services. Health care providers, unlike providers of other consumer goods and services, are often reimbursed by third parties rather than directly by the consumer of the service.
- Retrospective Reimbursement:** The traditional method of payment for the services of health facilities, in which payment is made "after-the-fact," *i.e.*, payment for the service based on the costs incurred by the facility.
- Screening:** In the health care field, the use of quick procedures to differentiate persons who apparently are well who have a disease or are at risk of a disease from those who probably do not have the disease. Generally used to identify high risk individuals who are in need of more definitive diagnostic studies.
- Secondary Care:** Services provided by medical specialists who generally are not the first contact for patients, such as cardiologists, urologists, etc.
- Skilled Nursing Facility (SNF):** Until recently, used to distinguish those adult care homes that provided licensed nursing services 24 hours a day and met specified Medicare and Medicaid requirements. Now included within the term "nursing facility."
- Specialist:** A physician, dentist, or other health care professional who is specially trained in a certain branch of medicine or dentistry, care of a specific age category of patients, specific body systems, or specific diseases. Usually involves advanced education and training related to the specialty.
- Tertiary Care:** Services provided by highly specialized providers and requiring highly sophisticated equipment and support facilities.
- Third-Party Payer:** Any organization (public or private) that pays or insures health or medical expenses on behalf of beneficiaries or recipients. (First party -- individual receiving service. Second party -- provider of service.)
- Title XVIII:** Title of the Social Security Act that authorizes and governs the Medicare program.
- Title XIX:** Title of the Social Security Act that authorizes and governs the Medicaid program.
- Uncompensated Care:** Service provided by physicians or hospitals for which no reimbursement is received from the patient or a third-party payer.
- Utilization Review:** Evaluation of the necessity, appropriateness, or efficiency of the use of medical services, procedures, or facilities.
- Vital Statistics:** Statistics relating to births, deaths, marriages, mortality, and morbidity.

Board of Pharmacy

K.S.A. 65-1627. Grounds for revocation, suspension, placement in probationary status or denial of license for pharmacist, permit for retail dealer or registration for pharmacy or manufacturer or distributor; procedure. (a) The board may revoke, suspend, place in a probationary status or deny a renewal of any license of any pharmacist upon a finding that:

- (1) The license was obtained by fraudulent means;
- (2) the licensee has been convicted of a felony and the licensee fails to show that the licensee has been sufficiently rehabilitated to warrant the public trust;
- (3) the licensee is found by the board to be guilty of unprofessional conduct or professional incompetency;
- (4) the licensee is addicted to the liquor or drug habit to such a degree as to render the licensee unfit to practice the profession of pharmacy;
- (5) the licensee has violated a provision of the federal or state food, drug and cosmetic act, the uniform controlled substances act of the state of Kansas, or any rule and regulation adopted under any such act;
- (6) the licensee is found by the board to have filled a prescription not in strict accordance with the directions of the practitioner;
- (7) the licensee is found to be mentally or physically incapacitated to such a degree as to render the licensee unfit to practice the profession of pharmacy;
- (8) the licensee has violated any of the provisions of the pharmacy act of the state of Kansas or any rule and regulation adopted by the board pursuant to the provisions of such pharmacy act;
- (9) the licensee has failed to comply with the requirements of the board relating to the continuing education of pharmacists;
- (10) the licensee as a pharmacist in charge or consultant pharmacist under the provisions of subsection (c) or (d) of K.S.A. 65-1648 and amendments thereto has failed to comply with the requirements of subsection (c) or (d) of K.S.A. 65-1648 and amendments thereto;
- (11) the licensee has knowingly submitted a misleading, deceptive, untrue or fraudulent misrepresentation on a claim form, bill or statement;
- (12) the licensee has had a license to practice pharmacy revoked, suspended or limited, has been censured or has had other disciplinary action taken, or an

application for license denied, by the proper licensing authority of another state, territory, District of Columbia or other country, a certified copy of the record of the action of the other jurisdiction being conclusive evidence thereof; ~~or~~

(13) the licensee has self-administered any controlled substance without a practitioner's prescription order; or

(14) in determining whether or not the licensee has violated Section (3), (4), (7), or (13) above, the board upon reasonable suspicion of such violation has authority to compel a licensee to submit to mental or physical examination or drug screen or any combination thereof, by such persons as the board may designate. To determine whether reasonable suspicion of such violation exists, the investigative information shall be presented to the board as a whole.

(b) The board may suspend, revoke, place in a probationary status or deny a renewal of any retail dealer's permit issued by the board when information in possession of the board discloses that such operations for which the permit was issued are not being conducted according to law or the rules and regulations of the board.

(c) The board may revoke, suspend, place in a probationary status or deny a renewal of the registration of a pharmacy upon a finding that: (1) Such pharmacy has been operated in such manner that violations of the provisions of the pharmacy act of the state of Kansas or of the rules and regulations of the board have occurred in connection therewith; (2) the owner or any pharmacist employed at such pharmacy is convicted, subsequent to such owner's acquisition of or such employee's employment at such pharmacy, of a violation of the pharmacy act or uniform controlled substances act of the state of Kansas, or the federal or state food, drug and cosmetic act; or (3) the owner or any pharmacist employed by such pharmacy has fraudulently claimed money for pharmaceutical services.

(d) A registration to manufacture or to distribute at wholesale a drug or a registration for the place of business where any such operation is conducted may be suspended, revoked, placed in a probationary status or the renewal of such registration may be denied by the board upon a finding that the registrant or the registrant's agent: (1) Has materially falsified any application filed pursuant to or required by the pharmacy act of the state of Kansas; (2) has been convicted of a felony

under any federal or state law relating to the manufacture or distribution of drugs; (3) has had any federal registration for the manufacture or distribution of drugs suspended or revoked; (4) has refused to permit the board or its duly authorized agents to inspect the registrant's establishment in accordance with the provisions of K.S.A. 65-1629 and amendments thereto; (5) has failed to keep, or has failed to file with the board or has falsified records required to be kept or filed by the provisions of the pharmacy act of the state of Kansas or by the board's rules and regulations; or (6) has violated the pharmacy act of the state of Kansas or rules and regulations adopted by the state board of pharmacy under the pharmacy act of the state of Kansas or has violated the uniform controlled substances act or rules and regulations adopted by the state board of pharmacy under the uniform controlled substances act.

(e) Orders under this section, and proceedings thereon, shall be subject to the provisions of the Kansas administrative procedure act.

K.S.A. 65-1627h. Same; costs. (a) If the order is adverse to the licensee, registrant or permit holder, the costs shall be charged to such person as in ordinary civil actions in the district court, but if the board is the unsuccessful party, the costs shall be paid out of any money in the state board of pharmacy fee fund. Witness fees and costs may be taxed according to the statutes applicable in the district courts.

(b) All costs accrued at the instance of the state, when it is the successful party, and which the attorney general certifies cannot be collected from the licensee, registrant or permit holder, shall be paid out of any available funds in the state treasury to the credit of the board.

(c) The board may consider if the costs have not been paid when assessed against the defendant and when considering a motion for reinstatement of a license or registration, or as a condition of probation.

K.S.A. 74-1606. State Board, officers; executive ~~secretary~~ director; compensation; employees. Annually, during the month of ~~May~~ June, the board shall organize by electing a president and a vice-president and shall also appoint a full-time executive ~~secretary~~ director who shall not be a member of the board and whose employment shall at all times be subject to the pleasure of the board. The executive ~~secretary~~ director shall be in the unclassified service of the Kansas civil service act and shall receive an annual salary fixed by the board and approved by the state finance council.

The board may employ, in accordance with the Kansas civil service act, such inspectors, chemists, agents and clerical help as may be necessary for the purpose of administering and enforcing the provisions of this act and may employ an attorney to assist in prosecutions under this act and for such other purposes as the board may designate.

Whenever secretary, executive secretary, or words of like effect, is referred to or designated by a statute, rule and regulation, contract or other document in reference to the director of the board of pharmacy under the pharmacy act of the state of Kansas, such reference or designation shall be deemed to apply to the executive director of the board of pharmacy under this act.

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

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The Kansas

State Board of Mortuary Arts

CREATED AUG. 1, 1907

700 S.W. JACKSON ST., SUITE 904
TOPEKA, KANSAS 66603-3758
(913) 296-3980



Thursday, February 2, 1995

The House Committee on Health and Human Services
Representative Carlos Mayans, Chairperson
Room 423-South, State Capitol
Topeka, Kansas 66612

Chairman Mayans and Members of the Committee:

My name is Mack Smith, and I am the executive secretary to the Kansas State Board of Mortuary Arts. I am here to testify in favor of House Bill 2163 which I requested this committee to introduce.

The bill has six sections dealing with six different statutes that I will describe, and then do my best to answer any questions of the committee.

Section 1 deals with KSA 65-1703. Amendments would give better definition in regards to supervision of student and apprentice embalmers in regards to the embalming process. Student embalmers would be required to be under the direct personal supervision (defined as physical supervision) of a licensed embalmer. Student embalmers are enrolled in mortuary school, and they must serve two semesters of practicum at a funeral home prior to graduation. Apprentice embalmers would be required to be under the personal supervision (defined as taking on the full responsibility for the action thereof--but not requiring the physical presence) of a licensed embalmer. Apprentice embalmers have graduated from Mortuary School with at least an AA degree in Mortuary Science and passed the national embalmer examination.

Section 2 deals with KSA 65-1705 and up-dates the penalty for the practice of unlicensed embalming to a class A nonperson misdemeanor. This change coincides with the Kansas Sentencing Guidelines. KSA 21-4503a defines the penalty for a class A misdemeanor as a sum not to exceed \$2,500. This maximum penalty is considerably higher than current language, but it should help serve as a warning to possible violators.

HOUSE H&HS COMMITTEE
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Attachment 5-1

Section 3 involves KSA 65-1713a and amends the definition of funeral establishments. The current definition includes language involving retail sales, while the amended language covers situations where a dead human body would be present. Other changes include clarification that a funeral merchandise room is not required in cases of branch establishments and the addition of the word "cremation" where it is currently omitted.

Section 4 deals with KSA 65-1726 and up-dates the penalty for violating any provision of article 17 of chapter 65. Once again this change coincides with the Kansas Sentencing Guidelines. KSA 21-4503a defines the penalty for a class A misdemeanor as a sum not to exceed \$2,500. This maximum penalty is again considerably higher than current language, but it should help serve as a warning to possible violators.

Section 5 is KSA 65-1727 adds four new areas of fees that could be charged by the board. Two of these areas (duplicate licenses and rulebooks) are currently authorized via the Department of Administration statutes. The fees requested for continuing education program sponsor and licensee applications would be new. Please note that these fees are the maximum amounts. If this bill becomes law, the Mortuary Arts Board would set the exact amounts to be charged via regulation. Although no figures have been finalized by the board, fees of \$20 for sponsors and \$10 for licensees have been discussed. The only time a licensee would apply for approval of any individual continuing education program would be if the particular program had not already been applied for credit by a sponsor. Based on the figures of \$10 and \$20 as previously stated, an annual income of \$4,800 would go to the Mortuary Arts Fee Fund. This estimate is based on 200 sponsor applications @ \$20 (\$4,000) and 200 licensee applications @ \$10 (\$2,000) with 80% or \$4,800 going into the Mortuary Arts Fee Fund and 20% or \$1,200 going into the General Fund.

Section 6 deals with KSA 65-1751 and would include some minor amendments and grammatical changes dealing with the board's licensure action law.

I would like to request that a new section 7 be added to the bill, and I have included a copy of the proposed amendment. The amendment would involve KSA 65-1729 and would make it unlawful for any person to operate, offer to operate or advertise a funeral establishment or a branch establishment unless they were licensed to do so. Current language mentions misrepresentation, but the board's appointed legal counsel feels that this language would be more appropriate. I apologize for not making this language a part of the original request for introduction, but it was not finalized at that time.

Thank you very much for the opportunity to testify in front of you today, and I would be happy to answer any questions.

65-1729. FUNERAL ESTABLISHMENT LICENSE; BRANCH ESTABLISHMENT LICENSE; FEES; DISPOSITION OF MONEYS. (a) The funeral director in charge of a funeral establishment, as defined by K.S.A. 65-1713a and amendments thereto, including any branch establishment, located or doing business within the state shall apply for and obtain a funeral establishment license or branch establishment license, as appropriate, from the state board of mortuary arts for each location within the state of such funeral establishment or branch establishment.

(b) An application for a new license is required if the funeral establishment or branch establishment changes ownership, name or location. Such application shall be made to the state board of mortuary arts at least 30 days prior to such change of ownership, name or location.

(c) The funeral establishment license fee or branch establishment license fee shall be fixed by the state board of mortuary arts under K.S.A. 65-1727 and amendments thereto and shall be due and paid to the state board of mortary arts on or before the expiration date of such license. The disposition of all funds collected under the provision of this act shall be in accordance with the provisions of K.S.A. 65-1718 and amendments thereto.

(d) Each funeral establishment license or branch establishment license shall expire every two years on a date established by the state board of mortuary arts by duly adopted rules and regulations.

(e) It is unlawful for any person who does not hold a funeral establishment or branch establishment license to operate, offer to operate, advertise or represent oneself as operating a funeral or branch establishment.

HISTORY: L. 1973, ch. 250, & 1; L. 1979, ch. 188, & 12; L. 1981, ch. 300, & 5; L. 1985, ch. 215, & 16; L. 1986, ch. 238, & 4; L. 1991, ch. 190, & 7; L. 1992, ch. 51, & 2; July 1.

HOUSE BILL NO. _____

By _____

AN ACT concerning optometry; office lease provisions; amending K.S.A. 65-1502 and repealing the existing section.

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

Section 1. K.S.A. 65-1502 is hereby amended to read as follows: 65-1502. (a) Except as provided in K.S.A. 65-1508 and amendments thereto, a person shall be deemed to be practicing optometry within the meaning of the optometry law if such person in any manner:

(1) Holds oneself out to the public as being engaged in or who maintains an office for the practice of optometry as defined in K.S.A. 65-1501 and amendments thereto;

(2) makes a test or examination of the eye or eyes of another to ascertain the refractive, the muscular or the pathological condition thereof;

(3) adapts lenses to the human eye for any purpose, either directly or indirectly; or

(4) conducts or performs orthoptic exercises or visual training therapy for the correction, remedy or relief of any insufficiencies or abnormal conditions of the eyes.

(b) "Maintains an office for the practice of optometry" for the purposes of this section and the optometry law means:

(1) To directly or indirectly control or attempt to control the professional judgment or the practice of a licensee; or

(2) to bear any of the expenses of or to have, own or acquire any interest in the practice, books, records, files or materials of a licensee.

(c) (1) Nothing herein contained shall be construed to prohibit a licensee from entering into leases, agreements, mortgages or other types of debt instruments not in violation of this section or any other section of the optometry law.

(2) "Maintaining an office" shall not be interpreted as prohibiting an optometrist and an optical company from entering into a lease which provides for the following:

(A) Agreements as to the amount and method of payment of rent; except, that rent may not be based on the number or type of prescriptions written, number of patients seen or referrals between the parties;

(B) agreements as to hours of operation;

(C) insurance requirements for the premises;

(D) noncompetition in the sale of product during and for a reasonable time and geographic area after the term of the lease;

(E) lease of equipment and furnishings;

(F) provision of utilities; and

(G) agreements to participate in third-party programs.

Any such lease must contain a written statement that the landlord will not interfere, directly or indirectly, with the exercise of the optometrist's professional judgment and acknowledge the ownership of the patient records in the optometrist's office. Any optometrist entering into such a lease shall ensure through appropriate signage at the entrance to the office that the public is notified of the independence of such optometrists from the landlord. For purposes of this section, the phrase "independent doctor of optometry" or words to similar effect, used in conjunction with the optometrist's name shall suffice. In the case of an office setting, whereby the optometrist is located next to an optical shop, similar sign printing, color schemes or office frontage decoration shall not be construed as illegal or deceptive advertising so long as the optometrist displays signage as required above indicating that the optometrist is an independent practitioner.

Sec. 2. K.S.A. 65-1502 is hereby repealed.

Sec. 3. This act shall take effect and be in force from and after its publication in the statute book.