

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 14, 1998 in Room 423-S-of the State Capitol.

All members were present except: Representative Jim Morrison - excused

Committee staff present: Robin Kempf, Legislative Research Department
Norman Furse, Revisor of Statutes
Lois Hedrick, Committee Secretary

Conferees appearing before the committee:
Ronald Hein, Mental Health Credentialing Coalition
Gary Mitchell, Secretary of the Kansas Department of Health and Environment

Others attending: See Guest List (Attachment 1)

Chairperson Mayans welcomed everyone to the meeting, especially Representatives Peggy Long and Vince Cook who replaced Representatives Joann Freeborn and Billie Vining. Representatives Long and Cook each spoke briefly to introduce themselves and distinguish their interests in the work of the committee. The Chairperson also related that the policy for approval of committee minutes is to distribute a draft of the minutes to each member and when any change or addition is warranted, the member must contact his office no later than 5:00 p.m. on the day the minutes are distributed; otherwise the minutes automatically will be approved. Also, the weekly agenda is due out on each Wednesday, and a copy of it will be e-mailed to each member.

The Chairperson then opened the meeting to hear proposals for new legislation. He first indicated that the Health Care Reform Legislative Oversight Committee's term had expired, but there was considerable work yet to be done and that it was the recommendation of that committee to introduce new legislation to extend the committee's life another four years. After discussion, upon motion of Representative Hutchins, seconded by Representative Horst, the committee approved the introduction of a bill to extend the committee's existence for another four years.

Chairperson Mayans then introduced Ronald Hein, representing the Mental Health Credentialing Coalition, who requested that a bill be introduced to authorize Licensed Professional Counselors and Licensed Marriage and Family Therapists to diagnose certain mental disorders and to require proof of competence in the diagnosis; to authorize Licensed Masters Level Psychologists to engage in private, independent practice of psychology without the current location and supervision restrictions; to add Licensed Professional Counselors and Licensed Marriage and Family Therapists as Qualified Mental Health Practitioners; and raise the qualifications of Licensed Masters Level Psychologists by increasing the required clock hours of postgraduate work, requiring supervised work experience, and giving the governing board the authority to approve the training plan (see Attachment 2). On motion of Representative Henry, seconded by Representative Geringer, the committee approved the introduction of a bill to incorporate these changes.

Gary Mitchell, Secretary of the Kansas Department of Health and Environment, presented an update to some of the management issues, including inventory management, payment of agency bills, Year 2000 computer challenges, and agency accounting practices that he has been addressing since he became Secretary of the Department. (See testimony, Attachment 3.) Mr. Mitchell noted that, with respect to the nursing home community, he first experienced a negative attitude; so a Nursing Home Summit was instituted to sort out the concerns of that community and to begin solving the problems that have been experienced. He described the management tools that are being instituted to track complaints and to begin an electronic system to track patients. Mr. Mitchell stated a Task Force developed definitions for certain responsibilities, such as defining "elopement" from care facilities. The guidelines that the Task Force has developed to define "elopement" are being adopted by the area federal authorities. The cooperation of the Kansas Department on Aging and SRS was specifically noted by the Secretary in addressing their overlapping responsibilities with KDHE. Budgetary needs, especially for the Year 2000 changeovers, were briefly described, wherein an estimated \$2.5 million may be the cost. A new project to address childhood poisonings is being undertaken, and special work is being done to improve the childhood immunizations percentage, which is now up to 64%. Secretary Mitchell noted that the Chairperson's recommendation for a "score card" to inform consumers about the

CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON HEALTH AND HUMAN SERVICES, Room 423-S of the State Capitol, at 1:30 p.m. on January 14, 1998.

status of nursing homes may be possible on the Internet at a later time.

Chairperson Mayans then indicated that SRS will present an update of their responsibilities at tomorrow's meeting. He indicated that future agenda items probably will include uninsured children (Title XXI) issues, dental issues, and that the nursing home (staff training) issue will be a priority.

The meeting was adjourned at 2:30 p.m.

The next meeting is scheduled for January 15, 1998.

HOUSE COMMITTEE ON
HEALTH AND HUMAN SERVICES
GUEST LIST
JANUARY 14, 1998

NAME	REPRESENTING
Martha Hugesstl	Attorney General
Susan Anderson	Hein + Wein
Rich Oettinger	Health Midwest
Ron Hein	MHCC
Mike Meacham	N/A
Sandra Strand	KS Advocates for Better Care
KEITH R LANDIS	CHRISTIAN SCIENCE COMMITTEE ON PUBLICATION FOR KANSAS
Judy Eyerly	KS ASSN. for Medically Underserved
LARRY FROELICH	Bd of Pharmacy
Bob Williams	KS Pharmacists Assoc.
Michelle Peterson	Peterson Public Affairs Group
Tom Webb-Cross	N/A.
Dawn Reed	KSNA
Gally Finney	Kansas Public Health Association
Don Bran	KDHE
Jesio Torres	Families Together
Candice Dunn	KDHE
Ed Puller	DOB
STANLEY RYAN	KADCA

HEIN AND WEIR, CHARTERED

ATTORNEYS AT LAW

5845 S.W. 29th Street, Topeka, KS 66614-2462

Telephone: (785) 273-1441

Telefax: (785) 273-9243

Ronald R. Hein

Stephen P. Weir

Susan Baker Anderson

THE MENTAL HEALTH CREDENTIALING COALITION 1998 BILL

The MHCC 1998 Bill:

authorizes Licensed Professional Counselors and Licensed Marriage and Family Therapists to diagnose mental disorders classified in the diagnostic manuals commonly used in such licensee's accepted practice, just as their peer professional Licensed Specialist Clinical Social Workers were authorized to do in 1994.

requires applicants for licensure as Professional Counselors or Marriage and Family Therapists to demonstrate to the BSRB that the applicant is competent in the diagnosis of mental disorders.

authorizes Licensed Masters Level Psychologists to engage in the private, independent practice of psychology without the current location and supervision restrictions.

adds Licensed Professional Counselors and Licensed Marriage and Family Therapists as Qualified Mental Health Practitioners.

raises the qualifications of Licensed Masters Level Psychologists by increasing to 4,000 (from 2,000) the clock hours of postgraduate, supervised work experience required for licensure and giving the BSRB the authority to approve the training plan.

If approved, the bill will:

insure that Kansas law treats all mental health professionals with peer qualifications equally with regards to their ability to practice their profession.

conform Kansas law for all peer mental health professionals with the standards established by the Legislature for Licensed Specialist Clinical Social Workers in 1994.

increase the deliverability of quality mental health care in rural or underserved areas of the state.

give the public more choices and access regarding the type of mental health professional they would like and need to see.

insure that mental health professionals with equal qualifications are able to use the diagnostic manuals within their limits of professional training and competency.

insure the greatest availability of mental health care to all citizens of Kansas.

HOUSE HHS COMMITTEE

Attachment 2-1

1 - 14 - 98

HOUSE BILL NO. _____

By Committee on Health and Human Services

AN ACT concerning the behavioral science regulatory board; relating to qualified mental health professionals; diagnosing of mental disorders; amending K.S.A. 1997 Supp. 59-2946, 65-5804, 65-6404, 74-5362, 74-5363 and 74-5367 and repealing the existing sections; also repealing K.S.A. 1997 Supp. 59-2946a.

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

New Section 1. (a) The following licensed professional counselors may diagnose mental disorders classified in the diagnostic manuals commonly used as a part of the licensee's accepted practice: (1) Licensed professional counselors and (2) professional counselors licensed by temporary permit pursuant to K.S.A. 65-5804.

(b) This section shall be part of and supplemental to the provisions of article 58 of chapter 65 of the Kansas Statutes Annotated and amendments thereto.

New Sec. 2. (a) The following licensed marriage and family therapists may diagnose mental disorders classified in the diagnostic manuals commonly used as part of the licensee's accepted practice: (1) Licensed marriage and family therapists and (2) marriage and family therapists licensed by temporary

permit pursuant to K.S.A. 65-6405.

(b) This section shall be part of and supplemental to the provisions of article 64 of chapter 65 of the Kansas Statutes Annotated and amendments thereto.

Sec. 3. K.S.A. 1997 Supp. 59-2946 is hereby amended to read as follows: 59-2946. When used in the care and treatment act for mentally ill persons:

(a) "Discharge" means the final and complete release from treatment, by either the head of a treatment facility acting pursuant to K.S.A. 1997 Supp. 59-2950 and amendments thereto or by an order of a court issued pursuant to K.S.A. 1997 Supp. 59-2973 and amendments thereto.

(b) "Head of a treatment facility" means the administrative director of a treatment facility or such person's designee.

(c) "Law enforcement officer" shall have the meaning ascribed to it in K.S.A. 22-2202, and amendments thereto.

(d) (1) "Mental health center" means any community mental health center organized pursuant to the provisions of K.S.A. 19-4001 through 19-4015 and amendments thereto, or mental health clinic organized pursuant to the provisions of K.S.A. 65-211 through 65-215 and amendments thereto, or a mental health clinic organized as a not-for-profit or a for-profit corporation pursuant to K.S.A. 17-1701 through 17-1775 and amendments thereto or K.S.A. 17-6001 through 17-6010 and amendments thereto, and licensed in accordance with the provisions of K.S.A. 75-3307b and amendments thereto.

(2) "Participating mental health center" means a mental health center which has entered into a contract with the secretary of social and rehabilitation services pursuant to the provisions of K.S.A. 39-1601 through 39-1612 and amendments thereto.

(e) "Mentally ill person" means any person who is suffering from a mental disorder which is manifested by a clinically significant behavioral or psychological syndrome or pattern and associated with either a painful symptom or an impairment in one or more important areas of functioning, and involving substantial behavioral, psychological or biological dysfunction, to the extent that the person is in need of treatment.

(f) (1) "Mentally ill person subject to involuntary commitment for care and treatment" means a mentally ill person, as defined in subsection (e), who also lacks capacity to make an informed decision concerning treatment, is likely to cause harm to self or others, and whose diagnosis is not solely one of the following mental disorders: Alcohol or chemical substance abuse; antisocial personality disorder; mental retardation; organic personality syndrome; or an organic mental disorder.

(2) "Lacks capacity to make an informed decision concerning treatment" means that the person, by reason of the person's mental disorder, is unable, despite conscientious efforts at explanation, to understand basically the nature and effects of hospitalization or treatment or is unable to engage in a rational decision-making process regarding hospitalization or treatment,

as evidenced by an inability to weigh the possible risks and benefits.

(3) "Likely to cause harm to self or others" means that the person, by reason of the person's mental disorder: (a) Is likely, in the reasonably foreseeable future, to cause substantial physical injury or physical abuse to self or others or substantial damage to another's property, as evidenced by behavior threatening, attempting or causing such injury, abuse or damage; except that if the harm threatened, attempted or caused is only harm to the property of another, the harm must be of such a value and extent that the state's interest in protecting the property from such harm outweighs the person's interest in personal liberty; or (b) is substantially unable, except for reason of indigency, to provide for any of the person's basic needs, such as food, clothing, shelter, health or safety, causing a substantial deterioration of the person's ability to function on the person's own.

No person who is being treated by prayer in the practice of the religion of any church which teaches reliance on spiritual means alone through prayer for healing shall be determined to be a mentally ill person subject to involuntary commitment for care and treatment under this act unless substantial evidence is produced upon which the district court finds that the proposed patient is likely in the reasonably foreseeable future to cause substantial physical injury or physical abuse to self or others or substantial damage to another's property, as evidenced by

behavior threatening, attempting or causing such injury, abuse or damage; except that if the harm threatened, attempted or caused is only harm to the property of another, the harm must be of such a value and extent that the state's interest in protecting the property from such harm outweighs the person's interest in personal liberty.

(g) "Patient" means a person who is a voluntary patient, a proposed patient or an involuntary patient.

(1) "Voluntary patient" means a person who is receiving treatment at a treatment facility pursuant to K.S.A. 1997 Supp. 59-2949 and amendments thereto.

(2) "Proposed patient" means a person for whom a petition pursuant to K.S.A. 1997 Supp. 59-2952 or K.S.A. 1997 Supp. 59-2957 and amendments thereto has been filed.

(3) "Involuntary patient" means a person who is receiving treatment under order of a court or a person admitted and detained by a treatment facility pursuant to an application filed pursuant to subsection (b) or (c) of K.S.A. 1997 Supp. 59-2954 and amendments thereto.

(h) "Physician" means a person licensed to practice medicine and surgery as provided for in the Kansas healing arts act or a person who is employed by a state psychiatric hospital or by an agency of the United States and who is authorized by law to practice medicine and surgery within that hospital or agency.

(i) "Psychologist" means a licensed psychologist, as defined by K.S.A. 74-5302 and amendments thereto.

(j) "Qualified mental health professional" means a physician or psychologist who is employed by a participating mental health center or who is providing services as a physician or psychologist under a contract with a participating mental health center, ~~or~~ a licensed masters level psychologist ~~or~~, a licensed marriage and family therapist, a licensed professional counselor, a licensed specialist social worker or a licensed master social worker or a registered nurse who has a specialty in psychiatric nursing, who is employed by a participating mental health center and who is acting under the direction of a physician or psychologist who is employed by, or under contract with, a participating mental health center.

(1) "Direction" means monitoring and oversight including regular, periodic evaluation of services.

(2) "Licensed master social worker" means a person licensed as a master social worker by the behavioral sciences regulatory board under K.S.A. 65-6301 through 65-6318 and amendments thereto.

(3) "Licensed specialist social worker" means a person licensed in a social work practice specialty by the behavioral sciences regulatory board under K.S.A. 65-6301 through 65-6318 and amendments thereto.

(4) "Licensed masters level psychologist" means a person licensed as a licensed masters level psychologist by the behavioral sciences regulatory board under K.S.A. 74-5361 through 74-5373 and amendments thereto.

(5) "Registered nurse" means a person licensed as a registered professional nurse by the board of nursing under K.S.A. 65-1113 through 65-1164 and amendments thereto.

(6) "Licensed marriage and family therapist" means a person licensed as a marriage and family therapist by the behavioral sciences regulatory board under K.S.A. 65-6401 through 65-6412 and amendments thereto.

(7) "Licensed professional counselor" means a person licensed as a professional counselor by the behavioral sciences regulatory board under K.S.A. 65-5801 through 65-5816 and amendments thereto.

(k) "Secretary" means the secretary of social and rehabilitation services.

(l) "State psychiatric hospital" means Larned state hospital, Osawatomie state hospital, Rainbow mental health facility or Topeka state hospital.

(m) "Treatment" means any service intended to promote the mental health of the patient and rendered by a qualified professional, licensed or certified by the state to provide such service as an independent practitioner or under the supervision of such practitioner.

(n) "Treatment facility" means any mental health center or clinic, psychiatric unit of a medical care facility, state psychiatric hospital, psychologist, physician or other institution or person authorized or licensed by law to provide either inpatient or outpatient treatment to any patient.

(o) The terms defined in K.S.A. 59-3002 and amendments thereto shall have the meanings provided by that section.

Sec. 4. K.S.A. 1997 Supp. 65-5804 is hereby amended to read as follows: 65-5804. (a) Applications for licensure as a professional counselor shall be made to the board on a form and in the manner prescribed by the board. Each application shall be accompanied by the fee fixed under K.S.A. 65-5808 and amendments thereto.

(b) Each applicant for licensure as a professional counselor shall furnish evidence satisfactory to the board that the applicant:

(1) Is at least 21 years of age;

(2) has completed 60 graduate semester hours including a graduate degree in counseling from a college or university approved by the board and which includes 45 graduate semester hours distributed among each of the following areas:

- (A) Counseling theory and practice;
- (B) the helping relationship;
- (C) group dynamics, processing and counseling;
- (D) human growth and development;
- (E) life-style and career development;
- (F) appraisal of individuals;
- (G) social and cultural foundations;
- (H) research and evaluation;
- (I) professional orientation;
- (J) supervised practicum and internship;

(3) (A) has over a minimum period of two years with a minimum of 4,000 supervised hours of professional experience as a professional counselor inclusive of at least 1,000 supervised hours of actual client contact acceptable to the board;

(B) has received a minimum of 200 hours of supervision including (i) 100 hours of administrative supervision regarding general professional function, and (ii) 100 hours of clinical supervision regarding delivery of direct client contact services with no more than 50 hours conducted as group supervision and no less than 50 hours conducted as individual supervision and no less than four hours of clinical supervision contact monthly, (iii) one-half of this requirement may be waived for persons with a doctor's degree in professional counseling or a related field acceptable to the board;

(4) has passed an examination required by the board; and

(5) has satisfied the board that the applicant is a person who merits the public trust.

(c) The board shall only issue the license of professional counselor to an applicant who has met the requirements of subsection (b) of this section and demonstrated to the board that the applicant is competent in the diagnosis of mental disorders. The board shall adopt rules and regulations to determine competency through curriculum requirements and examination proficiency.

(d) The board shall adopt rules and regulations establishing the criteria which a college or university shall satisfy in order

to be approved by the board. The board may send a questionnaire developed by the board to any college or university for which the board does not have sufficient information to determine whether the school meets the requirements for approval and rules and regulations adopted under this section. The questionnaire providing the necessary information shall be completed and returned to the board in order for the college or university to be considered for approval. The board may contract with investigative agencies, commissions or consultants to assist the board in obtaining information about colleges and universities. In entering such contracts the authority to approve college and universities shall remain solely with the board.

~~(d)~~ (e) A person who intends to pursue the postgraduate supervised training experience shall apply to the board for a temporary permit to practice as a licensed professional counselor by (1) paying an application fee of no more than \$150, (2) providing evidence of graduating from a masters or doctoral program in professional counseling acceptable to the board, (3) submitting letters from three professionals attesting to the applicant's integrity, competence, and worthiness to merit the public's trust, one of whom has provided direct clinical supervision of the applicant's graduate program clinical training and (4) completing a postgraduate supervised training plan on forms supplied by the board describing services to be provided, place of employment, persons responsible for administrative oversight and clinical supervision, and statement acknowledging

behavioral sciences regulatory board postgraduate training requirements.

~~(e)~~ (f) (1) A temporary permit may be issued by the board after the application has been reviewed and approved by the board and the applicant has paid the appropriate fee set by the board for issuance of new licenses.

(2) A temporary permit issued by the board shall expire at such time as final action on the application is completed or two years after the date of issuance of the permit. A temporary permit may be renewed for one additional two-year period if the board finds that satisfactory progress toward the supervised experience requirement is being met.

~~(f)~~ (g) A person practicing professional counseling with a temporary permit may not use the title "licensed professional counselor" or the initials "LPC" independently. The word "licensed" may be used only when followed by the words "by temporary permit" such as licensed professional counselor by temporary permit, or professional counselor licensed by temporary permit.

Sec. 5. K.S.A. 1997 Supp. 65-6404 is hereby amended to read as follows: 65-6404. (a) An applicant for licensure as a marriage and family therapist shall furnish evidence that the applicant:

(1) Has attained the age of 21;

(2) (A) has over a minimum period of two years with a minimum of 4,000 supervised hours of professional experience as a marriage and family therapist inclusive of at least 1,000

supervised hours of actual client contact acceptable to the board; (B) has received a minimum of 200 hours of supervision including (i) 100 hours of administrative supervision regarding general professional functioning, (ii) 100 hours of clinical supervision regarding delivery of direct client contact services with no more than 50 hours conducted as group supervision and no less than 50 hours conducted as individual supervision and no less than four hours of clinical supervision contact monthly, (iii) one-half of this requirement may be waived for persons with a doctor's degree in marriage and family therapy or a related field acceptable to the board;

(3) (A) has completed a master's or doctoral degree from a marriage and family therapy program, in an educational institution with standards consistent with those of the state universities of Kansas, approved by the board; or (B) has completed a master's or doctoral degree from an educational institution in a related field for which the course work is considered by the board to be equivalent to that provided in clause (3)(A) of this paragraph and consists of a minimum of nine semester hours in human development, nine semester hours in theories of marriage and family functioning, nine semester hours of marital and family assessment and therapy, three semester hours in professional studies and three semester hours in research; or (C) completed a master's or doctoral degree from an educational institution in a related field with additional work from an educational program in marriage and family therapy

approved by the board and such degree program and additional work includes the course work requirements provided in clause (3)(B) of this paragraph;

(4) has passed an examination approved by the board; and

(5) has satisfied the board that the applicant is a person who merits the public trust.

(b) The board shall only issue the license of marriage and family therapist only to an applicant who has met the requirements of subsection (a) of this section and demonstrated to the board that the applicant is competent in the diagnosis of mental disorders. The board shall adopt rules and regulations to determine competency through curriculum requirements and examination proficiency.

(c) Each applicant shall pay an application fee and examination fee established by the board under K.S.A. 65-6411 and amendments thereto.

Sec. 6. K.S.A. 1997 Supp. 74-5362 is hereby amended to read as follows: 74-5362. Any person who is licensed under the provisions of this act as a licensed masters level psychologist shall have the right to ~~practice-only-insofar-as-such-practice-is part-of--the--duties--of--such--person's--paid--position--and--is performed--solely--on--behalf--of--the--employer, so long as such practice-is-under-the-direction-of-a-person-licensed-to--practice medicine--and--surgery--or--a--person--licensed-to-provide-mental health--services--as--an--independent--practitioner---and---whose licensure-allows-for-the-diagnosis-and-treatment-of-psychological~~

disorders engage in the private, independent practice of psychology. A licensed masters level psychologist may use the title licensed masters level psychologist and the abbreviation LMLP but may not use the title licensed psychologist or psychologist.

Sec. 7. K.S.A. 1997 Supp. 74-5363 is hereby amended to read as follows: 74-5363. (a) Any person who desires to be licensed under this act shall apply to the board in writing, on forms prepared and furnished by the board. Each application shall contain appropriate documentation of the particular qualifications required by the board and shall be accompanied by the required fee.

(b) The board shall license as a licensed masters level psychologist any applicant for licensure who pays the fee prescribed by the board under K.S.A. 74-5365 and amendments thereto, which shall not be refunded, who has satisfied the board as to such applicant's training and who complies with the provisions of this subsection (b). An applicant for licensure also shall submit evidence verified under oath and satisfactory to the board that such applicant:

- (1) Is at least 21 years of age;
- (2) has satisfied the board that the applicant is a person who merits public trust;
- (3) has received at least a master's degree in clinical psychology based on a program of studies in psychology from an educational institution having a graduate program in psychology

consistent with state universities of Kansas; or has received at least a master's degree in psychology and during such master's or post-master's coursework completed a minimum of 12 semester hours or its equivalent in psychological foundation courses such as, but not limited to, philosophy of psychology, psychology of perception, learning theory, history of psychology, motivation, and statistics and 24 semester hours or its equivalent in professional core courses such as, but not limited to, two courses in psychological testing, psychopathology, two courses in psychotherapy, personality theories, developmental psychology, research methods, social psychology; or has passed comprehensive examinations or equivalent final examinations in a doctoral program in psychology and during such graduate program completed a minimum of 12 semester hours or its equivalent in psychological foundation courses such as, but not limited to, philosophy of psychology, psychology of perception, learning theory, history of psychology, motivation, and statistics and 24 semester hours or its equivalent in professional core courses such as, but not limited to, two courses in psychological testing, psychopathology, two courses in psychotherapy, personality theories, developmental psychology, research methods, social psychology;

(4) has completed 750 clock hours of academically supervised practicum in the master's degree program or 1,500 clock hours of postgraduate supervised work experience;

(5) has completed ~~2,000~~ 4,000 clock hours of postgraduate

work experience under the supervision of a licensed psychologist or a currently licensed ~~master's~~ masters level psychologist with three years' experience based upon a training plan approved by the board; and

(6) for applicants on and after January 1, 1997, has passed an examination approved by the board with a minimum score set by the board by rules and regulations at 10 percentage points below the score set by the board for licensed psychologists.

(c) The board shall adopt rules and regulations establishing the criteria which an educational institution shall satisfy in meeting the requirements established under item (3) of subsection (b). The board may send a questionnaire developed by the board to any educational institution for which the board does not have sufficient information to determine whether the educational institution meets the requirements of item (3) of subsection (b) and rules and regulations adopted under this section. The questionnaire providing the necessary information shall be completed and returned to the board in order for the educational institution to be considered for approval. The board may contract with investigative agencies, commissions or consultants to assist the board in obtaining information about educational institutions. In entering such contracts the authority to approve educational institutions shall remain solely with the board.

Sec. 8. K.S.A. 1997 Supp. 74-5367 is hereby amended to read as follows: 74-5367. (a) The board may issue a temporary permit

to practice as a licensed masters level psychologist to any person who pays a fee prescribed by the board under this section, which shall not be refunded, and who: (1) Meets all the requirements for licensure under this act as a licensed masters level psychologist, but whose application for licensure is pending; or (2) meets all the requirements for licensure under this act as a licensed masters level psychologist except the requirement of postgraduate supervised work experience or current employment, or both.

(b) A temporary permit issued by the board shall expire at such time as final action on the application is completed, but all such temporary permits shall expire ~~one-year~~ two years after the date of issuance of the permit. A temporary permit issued by the board may be renewed for one additional ~~twelve~~ twenty-four-month period if the board finds that satisfactory progress toward the supervised experience requirement is being met.

(c) The board shall fix by rules and regulations fees for application and renewal of each type of temporary permit under this section. The application and renewal fee shall not exceed \$100 except that the fee for application for and renewal of the two-year temporary permit under clause (1) of subsection (a) shall not exceed \$200.

(d) The application for a temporary permit may be denied or a temporary permit which has been issued may be suspended or revoked on the same grounds as provided for suspension or

revocation of a license under K.S.A. 74-5369 and amendments thereto.

Sec. 9. K.S.A. 1997 Supp. 59-2946, 59-2946a, 65-5804, 65-6404, 74-5362, 74-5363 and 74-5367 are hereby repealed.

Sec. 10. This act shall take effect and be in force from and after its publication in the statute book.



KANSAS
DEPARTMENT OF HEALTH & ENVIRONMENT
BILL GRAVES, GOVERNOR
Gary R. Mitchell, Secretary

Testimony Presented to

House Health and Human Services Committee

January 14, 1998

By

Gary R. Mitchell
Secretary of Health and Environment

Overview of Health and Environmental Issues

Thank you for this opportunity to appear before your committee. I have been Secretary of Health and Environment for nearly 2/3's of a year. It seems much longer.

Today I want to update the Committee on a few of the management issues I have been addressing at KDHE. (See Attachment A), update the Committee on KDHE activities as it regards nursing homes, Child care licensing, restaurant inspections, and then KDHE's legislative package.

KDHE Management Issues
(Attachment A)

Inventory Management
Payment of Agency Bills
Reports
Year 2000
Agency Accounts Receivables

Nursing Home update

1. Developed/implemented use of customer-service questionnaire (Attachment B)
2. Two "Improving Nursing Home Care Summits"

As result:

- Implemented complaint tracking system;
- Developed guidelines for prevention of resident elopement
- Developed checklist to be used by surveyors making compliance decisions.
- KPNHAA and KDHE coordinating regional co-training of KDHE surveyors and nursing

home administrators and nurses.

- 4 sessions planned for 1998.

Challenges this year:

- Assisted living-the level of regulation
- Resources necessary.
- Home health agencies.

Child Care update

Legislative Post Audit report issued November 1997

Survey recommendations focused on themes of Funding/Training:

- ▶ Resources for Local Health Departments - staffing to perform inspections, follow up complaint investigations and enforcement actions
 - ▶ Resources for KDHE to provide on-site training to Local Health Department staff
 - ▶ Resources to revise process/improve timeliness of licensing, enforcement actions
- SRS Federal Child Care Development Funds available - transfer federal money from SRS \$ 1 million FFY 98, \$ 1.5 million FFY 99

KDHE has already initiated systems analysis of the Child Care Program and plans to revise system, streamline process before computerizing.

Challenges this year:

- **Information /imaging system that will expedite the paper flow from local health departments to KDHE.**
- **ending the paper intensive manual file system**
- **speeding up enforcement actions.**
- **reviewing the appropriateness of the fee structure.**

Other Issues:

- Local Health Departments-
- Kansas Integrated Public Health Information System
- Food and Lodging Inspections
- Hand washing Grant from the Kansas Health Foundation
- Food Safety as a public health Issue
- Health Care Data Governing Board

KDHE Legislative Package:

1. **Childhood Lead Poisoning Prevention Program** (copy of bill provided)
Only health-related item in KDHE's legislative package
2. **Health Care Data Governing Board** initiative (copy of bill provided)
Requires researchers to provide Data Board with copies of health information gathered
Continuing effort to gather and maintain database in most efficient format

(Note: KDHE is proposing one other issue dealing with emergency disposal of in solid waste landfills.)



KANSAS
DEPARTMENT OF HEALTH & ENVIRONMENT
BILL GRAVES, GOVERNOR
Gary R. Mitchell, Secretary

January 14, 1998

During the past month I have talked with several legislators about some of the infrastructure problems I found following my appointment as Secretary of the Kansas Department of Health and Environment in May of 1997. Before focusing on setting policy direction for Health and Environment, I have had to use my time and resources (dedicating staff and funds) to put KDHE's affairs in order. I have hired staff to facilitate my efforts to address the myriad of problems found, as well as complete the day-to-day functions of KDHE; these include Assistant Secretary/General Counsel Linda Fund, Assistant for Health Policy Carolyn Duwe, Assistant for Internal Management Barry Greis and Assistant for Fiscal Management Jim Murphy.

The following is a list of problems the Office of the Secretary has been addressing:

INVENTORY MANAGEMENT

The agency employees over 975 employees, has a \$160 million budget, is located in 12 sites (4 buildings in Shawnee County, 6 district and 2 satellite offices) and had no capital equipment inventory in 4 years.

Problems: Equipment purchased and discarded without ever being inventoried
 Equipment purchased with Federal dollars - only Division of Environment had internally inventoried items (due to EPA funding)

Solutions: Computer hardware/applications inventory initiated 7/97 [Year 2000 Project]
 Complete inventory initiated for all capital outlay acquisitions (1992 - 1997)

Note: Some capital equipment has been discarded without being inventoried

PAYMENT OF AGENCY BILLS

Example of Problems:

- Department of Administration has complained we take up to 150 days to pay our telecommunications bills;
- As of September 15, 1997, KDHE had not paid its June 1997 motor pool bill, inhibiting the Department of Administration from closing out the fiscal year;
- Secretary received notices from the Turnpike Authority for unpaid K-Tag bills (several months).

REPORTS

Most Federal grants require a Financial Status Report (FSR) of how the money was spent; FSRs are due within 90 days of the close of the Federal Fiscal Year.

- FSRs on environment for Federal Fiscal Year 1996 were finalized this month (over a year late). The FSRs which were due December 1997 are not yet completed. The Regional EPA office initiated an audit of KDHE and is working with KDHE in an effort to avoid a full audit by the Inspector General.
- Failure to timely file the Air Quality FSR with EPA resulted in the loss of KDHE's ability to carry over \$90,000 and not allowing KDHE access this federal fiscal year's grant money which would have inflicted a hardship on Shawnee and Johnson County and prohibited their immediate access to \$76,000 of grant money due this year.

Note: This FSR has now been filed.

MISJUDGEMENT RE: YEAR 2000 COMPUTER ASSESSMENT AND REPAIR COSTS

Assistant Secretary/General Counsel Linda Fund has been given supervision of the Information Systems (IS) section of KDHE. Problems prior to her leadership of IS:

- Director of IS alienated DISC, failed to follow the CIA's requests and KIRC policies and was an obstruction to acceptance of new technology.
- Department of Administration asked IS Director to request enough money last year to assess and repair Year 2000 computer software applications and computer system problems.
- Requested was only \$180,000: \$70,000 short of the amount needed simply to **assess** computer systems and applications.
- Estimates now indicate KDHE may need \$2.6 million to repair or replace systems which are not Year 2000 compliant.
- KDHE did not request that money last legislative session when given opportunity to "piggy-back" on DISC's request.

Note: Director of IS responsible for these problems and the budget director who supervised him are no longer serving in these roles.

AGENCY ACCOUNTS RECEIVABLES

Example of Problems:

- Takes agency up to 90 days deposit checks
- Under K.S.A. 65-2409a(e) KDHE is required to collect a \$4 birth registration fee. Since 1994 KDHE collected \$15,200 - \$35,600 per year (Owed approximately \$92,500 - \$109,500 per year)

Solutions for Payments and Accounts Receivables:

- Full review of internal controls by an outside audit firm may be necessary.
- KQM team initiated to review our check handling policies.
- General Services has been decentralized, and is now under the direct supervision of my new Assistant for Internal Management, Barry Greis.

KDHE Provider Questionnaire



3

Dear Nursing Home Professional:

Let's face it ... surveys are not fun. But everyone benefits when a survey is performed professionally and courteously. It is the Kansas Department of Health and Environment's goal and my personal goal to continually improve the survey process by making it as accurate, consistent, and efficient as possible. In order for KDHE to achieve this goal, I need information from providers about the survey conducted at your facility.

Completion of this questionnaire is not a mandatory requirement; if completed, the information will be kept strictly confidential by the Secretary's office and will be shared only as aggregate data. We have a mutual interest in improving care to our elderly, and I appreciate facility administrators' participation in this effort. It is important to me that all who have been surveyed have been treated fairly. Thank you for taking the time to fill it out!

Secretary Gary R. Mitchell
Kansas Department of Health and Environment

1 Was the survey conducted in a courteous and professional matter? Yes No
Comments: _____

2 Was the exit interview conducted in a courteous, informative manner, and an explanation given? Yes No
Comments: _____

3 If differences arose during the survey, were they resolved or attempts made to resolve them prior to the surveyors' departure? Yes No
Comments: _____

4 Was facility time better spent correcting cited deficiencies than in writing a plan of correction? Yes No

If Yes, why, and how much staff time (e.g., Administrator, DON, attorney, etc.) was saved?

Comments: _____

5 Do you have any suggestions for improving the survey or review procedures?

Please complete the information on the other side.

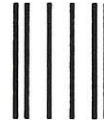
▲
Fold this panel in first.

Survey Date _____

State License Number (optional): _____

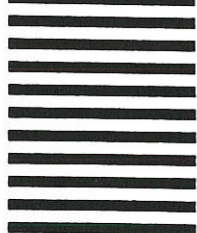
Please attach additional sheets if you need more room. Please fold this sheet so the KDHE address shows and tape the fold where indicated and return it to us. **Thank you for your input.**

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