

Approved: 1-26-99
Date

MINUTES OF THE SENATE COMMITTEE ON PUBLIC HEALTH AND WELFARE.

The meeting was called to order by Chairperson Sandy Praeger at 10:00 a.m. on January 21, 1999 in Room 526-S of the Capitol.

All members were present except:

Committee staff present: Emalene Correll, Legislative Research Department
JoAnn Bunten, Committee Secretary

Conferees appearing before the committee: Matthew Hickam, nominee, Long-term Care Ombudsman
Randy Tongier, Audit Manager, Division of Post Audit
Elizabeth Saadi, KD&E

Others attending: See attached list

Confirmation Hearing on Long-term Care Ombudsman

Matthew Hickam, nominee for the state's Long-term Care Ombudsman, addressed the Committee and presented his qualifications, perspective and priorities for that position as outlined in his written testimony. (Attachment 1) During Committee discussion, members of the Committee questioned Mr. Hickam on his commitment, dedication, qualification, salary, closing of the Hays Regional office, and future role as the state's Long-term Care Ombudsman. Senator Becker made a motion that the Committee recommend Matthew Hickam to the full Senate for confirmation as the state's Long-term Care Ombudsman, seconded by Senator Langworthy. The motion carried with one member abstaining. Senator Lee requested her abstention be recorded.

Performance Audit Report on Health Care Data Base

Randy Tongier, Audit Manager, Legislative Division of Post Audit, briefed the Committee on the audit of the Health Care Data Base which is required by statute and conducted by Wendling Noe Nelson & Johnson under contract with Legislative Post Audit. The audit found that additional staffing is needed to carry out the initiatives assigned by the Health Care Data Governing Board. Additional staffing would facilitate efforts in terms of maintaining and updating health care information for dissemination to legislators, policy makers, program managers, and the public in general. (Attachment 2)

Briefing on SB 20 - Limitations on disclosure and use of health information

Staff briefed the Committee on **SB 20** which was recommended during the interim by the Special Committee on Information Management that examined several issues regarding privacy, including the sale, distribution, disclosure or use of any information obtained from an individual's health care records without the consent of the individual. Specific concerns centered around the use of such information for commercial or employment purposes. **SB 20** addresses such concerns as outlined in the attached briefing. (Attachment 3) It was noted that a similar bill will be recommended for introduction by the Commissioner of Insurance this legislative session.

Briefing on Health Care Data Governing Board

Elizabeth Saadi, Ph.D., Director of Office of Health Care Information, Kansas Department of Health and Environment, presented a progress report to the Committee of accomplishments during 1998 of the Health Care Data Governing Board as outlined in her written testimony. (Attachment 4) Dr. Saadi also concurred with the findings of the audit of the Health Care Data Base, and noted that an annual report will be forthcoming.

Adjournment

The meeting was adjourned at 11:00 a.m.

The next meeting date is scheduled for January 26, 1999.

SENATE PUBLIC HEALTH AND WELFARE COMMITTEE
GUEST LIST

DATE: 1-21-99

NAME	REPRESENTING
RANDY TONGIOR	POST AUDIT
Martha Hozgesund	Attorney General
Carolyn Spaldenborg	KSAWA
John Becherly	SRS
Narinder Singh	SRS
TK Shively	Ks Legal Services
Eric Cortman	South Park
David Purusas	Ks Press
John Holmgren	Assn / Med Under ^{Coalition} on Aging
Anna Williamson	Kansas Health Institute
Martha J. Cooper	KACHA
Michelle Peterson	Peterson Public Affairs Group
Gayle A. Myers	Johnson + Johnson
Bob Williams	Ks. Pharmacists Assoc
Bob Anderson	"
David Miles	Associated Press
Teruya Tracy MA	KDHR-DWC
Kevin R. W...	KDHR-DWC
Karen DiVita	Ku. Law / Sulzer

SENATE PUBLIC HEALTH AND WELFARE COMMITTEE
GUEST LIST

DATE: 1-21-99

NAME	REPRESENTING
Steve Ashley	Health Care Commission
Julie Thomas	DOB
Paul Davis	Kansas Insurance Dept.
Maggie Keating	" " "
Nancy Zogleman	Pfizer
Stacy Saldan	Hein & Hein Chd
Harrie Ann Brown	KAHP
Mick Draper	KANSAS
Jimmie Langston	"
Ronald Seelke	Dept of Admin
David Hanson	Ks Insur Assns
Paul Dameron	St Lukes Shawnee Mission Health

STATEMENT OF MATTHEW HICKAM

NOMINEE FOR

STATE LONG-TERM CARE OMBUDSMAN

BEFORE THE PUBLIC HEALTH AND WELFARE COMMITTEE

KANSAS SENATE

JANUARY 21, 1999

Madame Chair, Senator Steineger, distinguished members of the Committee, I thank each of you for the invitation to be here today and for the courtesies you have already extended to me in the confirmation process. I appreciate this opportunity to discuss my qualifications, commitment and vision for the role of State Long-Term Care Ombudsman. It is indeed an honor to appear before this committee.

Madame Chair, I want to begin by thanking Governor Graves for nominating me last July. I am truly grateful for his confidence and support.

As someone with experience advocating for individuals and a broad background in health legislative policy, I am eager to meet the challenges that lie ahead for this newly created agency. Everyone, whether it is concerning themselves or a loved one, will have an experience with long-term care at some time in their lives. It is the Long-Term Care Ombudsman's responsibility to assure that the experience is a good one, that a resident receives the highest level of care, and that they are neither abused nor neglected.

The Long-Term Care Ombudsman Program provides skilled, one-to-one advocacy services on behalf of long-term care consumers. An Ombudsman investigates complaints about care and treatment provided in adult care homes throughout the state and seeks to protect the rights of residents, working to achieve the best possible solutions to consumers' problems. Complaints may be made by the resident, by family members and friends, or by facility staff or another care provider. We also address anonymous complaints.

Madame Chair, if I am confirmed, my priorities will be very clear. First will be ensuring that all Kansans who have complaints or concerns about long-term care services for an older person have the access to someone who will advocate for them. My return to public service is in large part driven by the opportunity to help others who are having difficulty maneuvering through the bureaucracy of government and business. I intend to build on the existing structure of the Ombudsman Program, working closely with the Legislature, residents of adult care homes, their families, and health care professionals. I am deeply committed to building bridges of communication between the Ombudsman Program, nursing home residents and providers, and breaking down the barriers that prevent residents from receiving the highest level of care possible.

Senate Public Health and Welfare
Date: 1-21-99
Attachment No. 1

I also intend to focus on other essential responsibilities of the Long-Term Care Ombudsman Program. In particular, I share the commitment of the members of the Legislature to make our state's nursing homes as safe as can be. The safety of our state's elderly is of great concern. It is a sad fact that there continue to be nursing homes in Kansas that are poor performers. It is an outrage that there continue to be nursing homes in this state where you can find men and women unbathed, laying in their own urine, and spotted with bed sores. These are the grandmothers of Kansas who struggled through the Depression and then worked the wheat fields when their husbands and sons went off to war. These are the grandfathers of Kansas who farmed the dusty soil during the Dust Bowl Years and then fought courageously for their country overseas. These people deserve better. You and I can, and must, work together to assure Kansans that we, as a government, are doing all we can, and should do, in this area.

Finally, if I am confirmed as State Long-Term Care Ombudsman, it will be a high priority of mine to encourage people to play an active role in the oversight of their town's nursing facilities by becoming volunteer ombudsmen. Recruiting and retaining volunteer ombudsmen is the key to the Long-Term Care Ombudsman Program's success. Public concern with the care of the elderly is critical to ensure the highest level of care for our state's elderly. It should concern us all that after all the state and federal regulations and laws that have been passed there are still nursing home residents not receiving proper care. Only by encouraging individuals to participate, as volunteer ombudsmen, in the oversight of their town's nursing homes will this situation improve.

I am confident these difficult and often complex issues can be managed efficiently and effectively. Nevertheless, you also need to know why I am confident, and why I am qualified to lead this important public agency.

I am a person who has a background in advocacy for individuals and has a broad knowledge of Medicare, Medicaid, private long-term care insurance, and health care legislative policy.

The long-term care industry is one that I know well. For two years, I was the Director of Government Affairs for the American Health Care Association, a trade association representing non-profit and for-profit long-term care providers. I know the strengths of the industry and I know its limitations.

Advocating for individuals that are having problems with a bureaucracy or a situation is not a new experience for me. I served as Legislative Assistant to Senator Bob Dole in Washington D.C. In this capacity, I helped thousands of Kansans with complaints and concerns that they had with federal and state health agencies. In addition, I reviewed health care policy initiatives and advised Senator Dole. Before my federal service, I was a Medical Service Representative for Pfizer Pharmaceuticals and worked with physicians, hospitals, nursing homes, and consumers, educating them on health care conditions and treatments.

As you know, I am a native Topekan, and much of what has shaped my career is rooted here. I worked my way through the University of Kansas, as an aide at Topeka State Hospital and spent many days with residents who never had a friend or relative visit. Each day that passed made me think more and more about who would speak for those that had no one to speak for them. It is

this prevailing thought that will guide me as an advocate for those residents of adult care homes in Kansas.

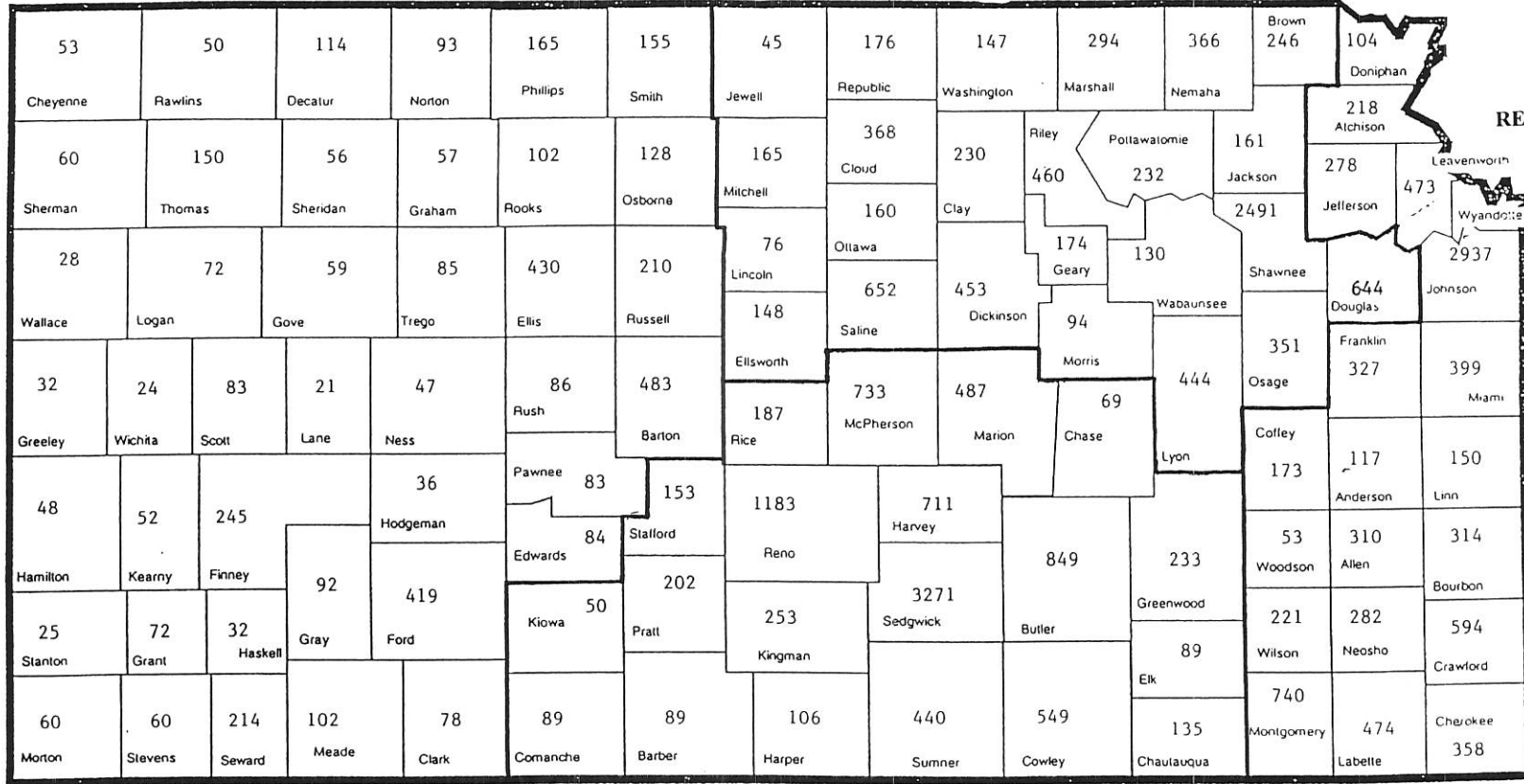
I have been fortunate to enjoy a challenging career that, I believe, well prepares me for the task at hand. I look forward to our discussion today and to our working together in the future. Thank you. I am pleased to stand for questions.

REGION II

- | | | | |
|-----------|----------|------------|------------|
| Brown | Jackson | Osage | Wabaunsee |
| Clay | Jewell | Ottawa | Washington |
| Cloud | Lincoln | Potawatomi | |
| Dickinson | Lyon | Republic | |
| Douglas | Marshall | Riley | |
| Ellsworth | Mitchell | Saline | |
| Geary | Morris | Shawnee | |
| | Nemaha | | |

REGION I

- Barton
 Cheyenne
 Clark
 Decatur
 Edwards
 Ellis
 Finney
 Ford
 Geary
 Gove
 Graham
 Grant
 Greeley
 Hamilton
 Haskell
 Hodgeman
 Kearny
 Lane
 Logan
 Meade
 Morton
 Ness
 Norton
 Osborne
 Pawnee
 Phillips
 Rawlins
 Rooks
 Rush
 Russell
 Scott
 Seward
 Sheridan
 Sherman
 Smith
 Stanton
 Stevens
 Thomas
 Trego
 Wallace
 Wichita



REGION - III

- Allen
 Anderson
 Atchison
 Bourbon
 Cherokee
 Coffey
 Crawford
 Doniphan
 Franklin
 Jefferson
 Johnson
 Labette
 Leavenworth
 Linn
 Miami
 Montgomery
 Neosho
 Wilson
 Woodson
 Wyandotte

REGION - IV

- | | | | |
|------------|-----------|-----------|----------|
| Barber | Elk | Marion | Sedgwick |
| Butler | Greenwood | McPherson | Stafford |
| Chase | Harper | Pratt | Sumner |
| Chautauqua | Harvey | Reño | |
| Comanche | Kingman | Rice | |
| Cowley | Kiowa | | |



KANSAS COMMISSION ON GOVERNMENTAL STANDARDS AND CONDUCT

STATEMENT OF SUBSTANTIAL INTERESTS FOR INDIVIDUALS WHOSE

APPOINTMENT TO STATE OFFICE IS SUBJECT TO SENATE CONFIRMATION

INSTRUCTIONS. This statement (pages 1 through 4) must be completed by each person whose appointment to a state position is subject to Senate confirmation (K.S.A. 46-247 and 46-248). Failure to complete and return this statement may result in a fine of \$10 per day for each day it remains unfiled. Also, any individual who intentionally fails to file as required by law, or intentionally files a false statement, is subject to prosecution for a class B misdemeanor.

Please read the "Guide" and "Definition" section provided with this form for additional assistance in completing sections "C" through "G". If you have questions or wish assistance, please contact the Commission office at 109 West 9th, Topeka, KS or call 913-296-4219.

A. IDENTIFICATION: PLEASE TYPE OR PRINT

H I C K A M M A T T H E W F

Last Name First Name MI

H I C K A M S T A C E Y C

Spouse's Name

4 1 0 8 S W S T O N E A V E

Number & Street Name, Apartment Number, Rural Route, or P.O. Box Number

T O P E K A , K A N S A S 6 6 6 1 0

City, State, Zip Code

** **

Home Phone Number

7 8 5 ** 2 9 6 ** 3 0 1 7

Business Phone Number

B. APPOINTED POSITION SUBJECT TO SENATE CONFIRMATION:

O F F I C E O F S T A T E L O N G - T E R M

List Name of Agency, Commission or Board CARE OMBUDSMAN

S T A T E L O N G - T E R M C A R E

Position OMBUDSMAN

* The last four digits of your social security number will aid in identifying you from others with the same name on the computer list. This information is optional.

* 1 5 7 6

C. **OWNERSHIP INTERESTS:** List any corporation, partnership, proprietorship, trust, joint venture and every other business interest, including land used for income in, which either you or your spouse has owned within the preceding 12 months a legal or equitable interest exceeding \$5,000 or 5%, whichever is less. If you or your spouse own more than 5% of a business, you must disclose the percentage held. Please insert additional page if necessary to complete this section.

If you have nothing to report in Section "C", check here .

BUSINESS NAME AND ADDRESS	TYPE OF BUSINESS	DESCRIPTION OF INTERESTS HELD	HELD	PERCENT OF
			BY WHOM	OWNERSHIP INTERESTS
1.			<input type="checkbox"/>	<input type="checkbox"/> You
			<input type="checkbox"/>	<input type="checkbox"/> Spouse
			<input type="checkbox"/>	<input type="checkbox"/> Jointly
2.			<input type="checkbox"/>	<input type="checkbox"/> You
			<input type="checkbox"/>	<input type="checkbox"/> Spouse
			<input type="checkbox"/>	<input type="checkbox"/> Jointly
3.			<input type="checkbox"/>	<input type="checkbox"/> You
			<input type="checkbox"/>	<input type="checkbox"/> Spouse
			<input type="checkbox"/>	<input type="checkbox"/> Jointly
4.			<input type="checkbox"/>	<input type="checkbox"/> You
			<input type="checkbox"/>	<input type="checkbox"/> Spouse
			<input type="checkbox"/>	<input type="checkbox"/> Jointly
5.			<input type="checkbox"/>	<input type="checkbox"/> You
			<input type="checkbox"/>	<input type="checkbox"/> Spouse
			<input type="checkbox"/>	<input type="checkbox"/> Jointly
6.			<input type="checkbox"/>	<input type="checkbox"/> You
			<input type="checkbox"/>	<input type="checkbox"/> Spouse
			<input type="checkbox"/>	<input type="checkbox"/> Jointly
7.			<input type="checkbox"/>	<input type="checkbox"/> You
			<input type="checkbox"/>	<input type="checkbox"/> Spouse
			<input type="checkbox"/>	<input type="checkbox"/> Jointly

D. **GIFTS OR HONORARIA:** List any person or business from whom you or your spouse either individually or collectively, have received gifts or honoraria having an aggregate value of \$500 or more in the preceding 12 months.

If you have nothing to report in Section "D", check here .

NAME OF PERSON OR BUSINESS FROM WHOM GIFT RECEIVED	ADDRESS	RECEIVED BY:
1.		
2.		
3.		

E. RECEIPT OF COMPENSATION: List all places of employment in the last calendar year, and any other businesses from which you or your spouse received \$2,000 or more in compensation (salary, thing of value, or economic benefit conferred on in return for services rendered, or to be rendered), which was reportable as taxable income on your federal income tax returns.

1. YOUR PLACE(S) OF EMPLOYMENT OR OTHER BUSINESS IN THE PRECEDING CALENDAR YEAR. IF SAME AS SECTION "B", CHECK HERE ____.
If you have nothing to report in Section "E"1, check here ____.

	NAME OF BUSINESS	ADDRESS	TYPE OF BUSINESS
1.	American Health Care Association	1201 L St. NW, Washington, DC 20005	Trade Association
2.			

2. SPOUSE'S PLACE(S) OF EMPLOYMENT OR OTHER BUSINESS IN THE PRECEDING CALENDAR YEAR.
If you have nothing to report in Section "E"2, check here X.

	NAME OF BUSINESS	ADDRESS	TYPE OF BUSINESS
1.	National Association of Broadcasters	1771 N St. NW, Washington, DC 20007	Trade Association
2.			

F. OFFICER OR DIRECTOR OF AN ORGANIZATION OR BUSINESS: List any organization or business in which you or your spouse hold a position of officer, director, associate, partner or proprietor at the time of filing, irrespective of the amount of compensation received for holding such position. Please insert additional page if necessary to complete this section. If you have nothing to report in Section "F", check here X.

	BUSINESS NAME AND ADDRESS	POSITION HELD	HELD BY WHOM
1.			
2.			
3.			
4.			
5.			

G. **RECEIPT OF FEES AND COMMISSIONS:** List each client or customer who pays fees or commissions to a business or combination of businesses from which fees or commissions you or your spouse received an aggregate of \$2,000 or more in the preceding calendar year. *The phrase "client or customer" relates only to businesses or combination of businesses.* In the case of a partnership, it is the partner's proportionate share of the business, and hence of the fee, which is significant, without regard to expenses of the partnership. An individual who receives a salary as opposed to portions of fees or commissions is generally not required to report under this provision. Please insert additional page if necessary to complete this section.

If you have nothing to report in Section "G", check here X.

	NAME OF CLIENT / CUSTOMER	ADDRESS	RECEIVED BY
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			

H. **DECLARATION:**

I, Matthew F. Hickam, declare that this statement of substantial interests (including any accompanying pages and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of all of my substantial interests and other matters required by law. I understand that the intentional failure to file this statement as required by law or intentionally filing a false statement is a class B misdemeanor.

8/06/98
Date

Matthew F. Hickam
Signature of Person Making Statement

NUMBER OF ADDITIONAL PAGES _____.

Turn your completed statement to the Secretary of State, State House, Topeka, Kansas 66612.

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APPOINTMENTS QUESTIONNAIRE

Office of Governor Bill Graves

Please complete and return this form to the Governor's Appointments Office. Attach additional sheets if necessary.

Name: Matthew F. Hickam

Home Address: 4108 SW Stone Ave.

City, State, Zip: Topeka, Kansas 66610

Business Address: 610 SW 10th, 2nd Floor

City, State, Zip: Topeka, Kansas 66612-1616

Home Phone: _____ Business Phone: 785-296-3017

Date of Birth: 7/1/67 Place of Birth: Omaha, NE

Party Affiliation: Republican KBI Check: NA In Process Complete

BACKGROUND

1. List high school, college, or other education institutions attended along with the date attended and degree conferred.

<i>Education Institution</i>	<i>Dates</i>	<i>Degree</i>
<u>Univ. of Kansas</u>	<u>8/85 - 5/89</u>	<u>B.A.</u>
<u>Washburn Rural H.S.</u>	<u>8/81 - 5/85</u>	<u>Diploma</u>

2. List memberships in business, trade and professional organizations for the past 10 years.

<i>Organization</i>	<i>Dates</i>
<u>None</u>	

3. List any public offices you have been elected or appointed to, along with the dates of service.

<i>Office Held</i>	<i>Dates</i>
<u>None</u>	

4. List any positions held with a foreign, federal or local government entity along with the dates of service.

<i>Position</i>	<i>Government Entity</i>	<i>Dates</i>
Legislative Assistant	U.S. Senate/Sen. Bob Dole	2/94 - 8/96

5. List any lobbying activities you have been involved in during the past five years. This includes activities as a registered lobbyist activities for which you were compensated.

<i>Group</i>	<i>Compensation (yes/no)</i>	<i>Dates</i>
American Health Care Assn.	Yes	8/96 - 7/98

6. List experience or interest which qualify you for the position to which you have been appointed.

I have nine years of experience in health care related affairs,
including advocating for the safety and health of the elderly, public
speaking and public relations.

7. Summarize business and professional experience.

As the Director of Government Affairs for a long-term care provider
association, I drafted legislation to promote quality in nursing facilities
and ensure the safety and health of the frail elderly. As Legislative
Assistant to Senator Bob Dole, I traveled throughout Kansas, helping elderly
women and men with their Social Security and Medicare problems, and ensured
that they received their full Federal benefits.

8. List any service in the United State military. Include dates of service, branch, date and type of discharge.

<i>Branch</i>	<i>Discharge</i>	<i>Dates</i>
NA		

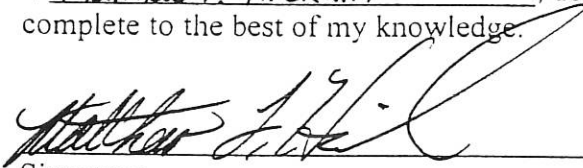
9. Provide details of any arrest, charge or questioning by a federal, state or other law enforcement authority for violation of any federal, state, county or municipal law, regulation or ordinance (excluding traffic violations for which a fine of \$100 or less was imposed).

None

10. List and provide details of any interests that may present a conflict of interest for this position.

None

I, Matthew F. Hickam, declare that this questionnaire is true, correct and complete to the best of my knowledge.


Signature

8/10/98
Date

*Return completed questionnaire to Judy Krueger, Secretary of Appointments, State Capitol, Rm 226-S, Topeka, Kansas 66612.
If you have questions, please call 913/296-4052.*

MATTHEW F. HICKAM

5226 Chowan Avenue
Alexandria, Virginia 22312
202-898-2809 (w)
703-642-0211 (h)

SUMMARY OF RELEVANT EXPERIENCE

Eight years experience in affairs relating to health care, including legislative and political affairs, public speaking, policy development, and public relations.

QUALIFICATIONS

American Health Care Association, Washington, DC - Director of Government Affairs (Aug. 1996 - present)
Represent more than 11,000 non-profit and for-profit assisted living, nursing facility, and subacute care providers that care for one million elderly and disabled individuals nationally before the Congress and Executive Branch. Track and analyze legislative and regulatory initiatives concerning the long-term care industry and the individuals for whom it cares. Prepare statements and testimony for various House and Senate committees. Specialize in Medicare, Medicaid, Social Security, disabilities, insurance, and labor issues.

Office of Senator Robert J. Dole (R-KS), Washington, DC - Legislative Assistant (Aug. 1993 - Aug. 1996)
Tracked and analyzed legislative and regulatory initiatives concerning health care reform and financial industry reform. Briefed Senator Dole on issues of key concern. Prepared statements and testimony for various House and Senate committees and the Senate floor. Worked with relevant agencies, industry officials and constituents on an issue-by-issue basis on behalf of the Senator. Served as liaison to the White House, Health Care Financing Administration and the Department of Health and Human Services. Coordinated efforts between the Office of the Majority Leader and the Kansas offices of Senator Dole.

Pfizer Pharmaceuticals, Burlington, IA - Medical Service Representative (1990 - 1993)
Represented the interests of the nation's third largest diversified health care company. Responsible for all physician, pharmacy and hospital issues. Educated physicians about innovative treatment methods, breakthrough drug products and pending legislation affecting the pharmaceutical industry. Implemented cost-effective strategies with hospital administrators and pharmacists. Organized and conducted educational symposiums for physicians and other health care providers.

Dean Witter Reynolds, Inc., Kansas City, MO (1989 - 1990)
Managed \$1.1 million in assets and reviewed individual and corporate investment holdings. Obtained necessary licensure for the sale of stocks, bonds and insurance. Instructed clients on the design of their personal financial portfolios. Conducted public educational seminars.

EDUCATION

B.A., Communication Studies, University of Kansas

Senate Confirmation Information Summary
Prepared and Submitted by the Office of Governor Bill Graves

Appointee: Matthew F. Hickam

Position: Longterm Care Ombudsman

Appointment Date: Upon Confirmation by Senate Expiration Date: 1/15/00 Term Length: until 1/15/00

Statutory Authority: KSA 75-5917 Party Affiliation: Republican
(as amended HB2607)

- ⇒ Statutory geographic representation requirements (*indicate any that apply*):
- Congressional District: _____
 - County: _____
 - Size requirement (*if any*): _____
 - Other, specify: _____

⇒ Statutory party affiliation requirement: No more than _____ members from the same political party.

⇒ Statutory industry or occupation requirements: Must have a baccalaureate or higher degree from an accredited college or university; demonstrated abilities to analyze problems of law, administration and public policy; and experience in investigation and conflict resolution procedures.

Salary: \$60,000 Predecessor: _____

Board Composition Prior to Confirmation of New Appointee: N/A

(SEE ATTACHED LIST)

**Performance Audit
HEALTH CARE DATA BASE**

Senate Public Health and Welfare Committee
January 21, 1999

Randy Tongier, Audit Manager
Legislative Division of Post Audit

Audit

- Required by statute
- One-time audit
- Conducted by Wendling Noe Nelson & Johnson under contract with Legislative Post Audit
- Cost paid for by Department of Health and Environment
- Identify costs and benefits of Health Care Data Base

Costs and Benefits of Health Care Data Base

- Costs to State to Establish and Maintain
- Costs to Providers of Data (survey)
- Benefits to State
- Benefits to Users of Data (survey)

Auditor's Comments

- Data Base is developing ways to gather information about cost of health services
- Certain inventories of health care providers and facilities aren't current; need for more resources

Office of Revisor of Statutes
300 S.W. 10th Avenue
Suite 322, Statehouse
Topeka, Kansas 66612-1592
Telephone 785-296-2321 FAX 785-296-6668

MEMORANDUM

To: Senate Committee on Public Health and Welfare
From: Kenneth M. Wilke, Assistant Revisor of Statutes
Date: January 21, 1999
Subject: Senate Bill 20

The Special Committee on Information Management examined several issues regarding privacy, including the sale, distribution, disclosure or use of any information obtained from an individual's health care records without the consent of the individual. Specific concerns centered around the use of such information for commercial or employment purposes. For example, information regarding genetic testing may indicate a predisposition toward a certain disease or medical condition which could affect whether or not a person may be hired. At least one legislator expressed concern that after being diagnosed with a particular condition, the legislator started receiving through the mail unsolicited information regarding the use of certain medications for the diagnosed condition.

While the Special Committee on Information Management received information on the Health Information Privacy Model Act of the National Association of Insurance Commissioners (NAIC), the committee made no recommendations regarding this legislation, but noted that the NAIC proposal was worthy of further legislative consideration.

The Special Committee's deliberation culminated in Senate Bill 20.

Section 1 (a) defines "health care information" to include any recorded information which pertains to the health or medical treatment of an individual.

Section 1 (b) prohibits the sale, distribution, disclosure or use of health care information without first obtaining the consent of the individual to whom the information relates. General consent forms

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are prohibited.

Section 1 (c) provides exceptions to the consent requirement for: providing medical treatment, processing medical claims for payment, discovery or other judicial processes, utilization review, research, and investigation of criminal or fraudulent activity.

Sections 1 (d) and (e) concern minors and incapacitated individuals.

Section 1 (f) makes a violation of the act a class A misdemeanor.

Progress Report - 1998 Accomplishments

Health Care Data Governing Board



Elizabeth W. Saadi, Ph.D.
Kansas Department of Health & Environment
Center for Health and Environmental Statistics

Presented to: Senate Public Health and Welfare Committee
January 21, 1999

Health Care Data Governing Board

**Clyde D. Graeber, Acting Secretary
& Chairman**

Kansas Dept. of Health & Environment
400 SW 8th Avenue, Suite 200
Topeka, KS 66603-3930
Tele: (785) 296-0461
Fax: (785) 368-6368

Michael Fox, Sc.D.

Dept. Of Health Services Administration
University of Kansas
6052B Malott Hall
Lawrence, KS 66045
Tele: (785) 864-3215
Fax: (785) 864-5089

John Grace, President, CEO

Kansas Assoc. of Homes and
Services for the Aging (KAHSA)
700 SW Harrison, Suite 1106
Topeka, KS 66603
Tele: (785) 233-7443
Fax: (785) 233-9471

Richard Huncker

Department of Insurance
420 SW 9th Street
Topeka, KS 66612-1678
Tele: (785) 296-7850
Fax: (785) 296-2283

Tom Johnson

Blue Cross/Blue Shield of Kansas
1133 SW Topeka Blvd.
Topeka, KS 66629-0001
Tele: (785) 291-8724
Fax: (785) 291-8442

Garold Minns, MD

Associate Dean, Academic and Student Affairs
University of Kansas School of Medicine
1010 N. Kansas
Wichita, KS 67214-3199
Tele: (316) 293-2650
Fax: (316) 293-1878

John Noonan, Ph.D.

AARP
2014 Meadowmere Court
Manhattan, KS 66502
Tele: (785) 539-4846
Fax: (785) 532-6925

Ann Koci, Commissioner

Adult & Medical Services, SRS
915 SW Harrison, Rm. 620
Docking State Office Building
Topeka, KS 66612-1570
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Progress Report Summary

Health Care Data Governing Board

Current new and ongoing priorities:

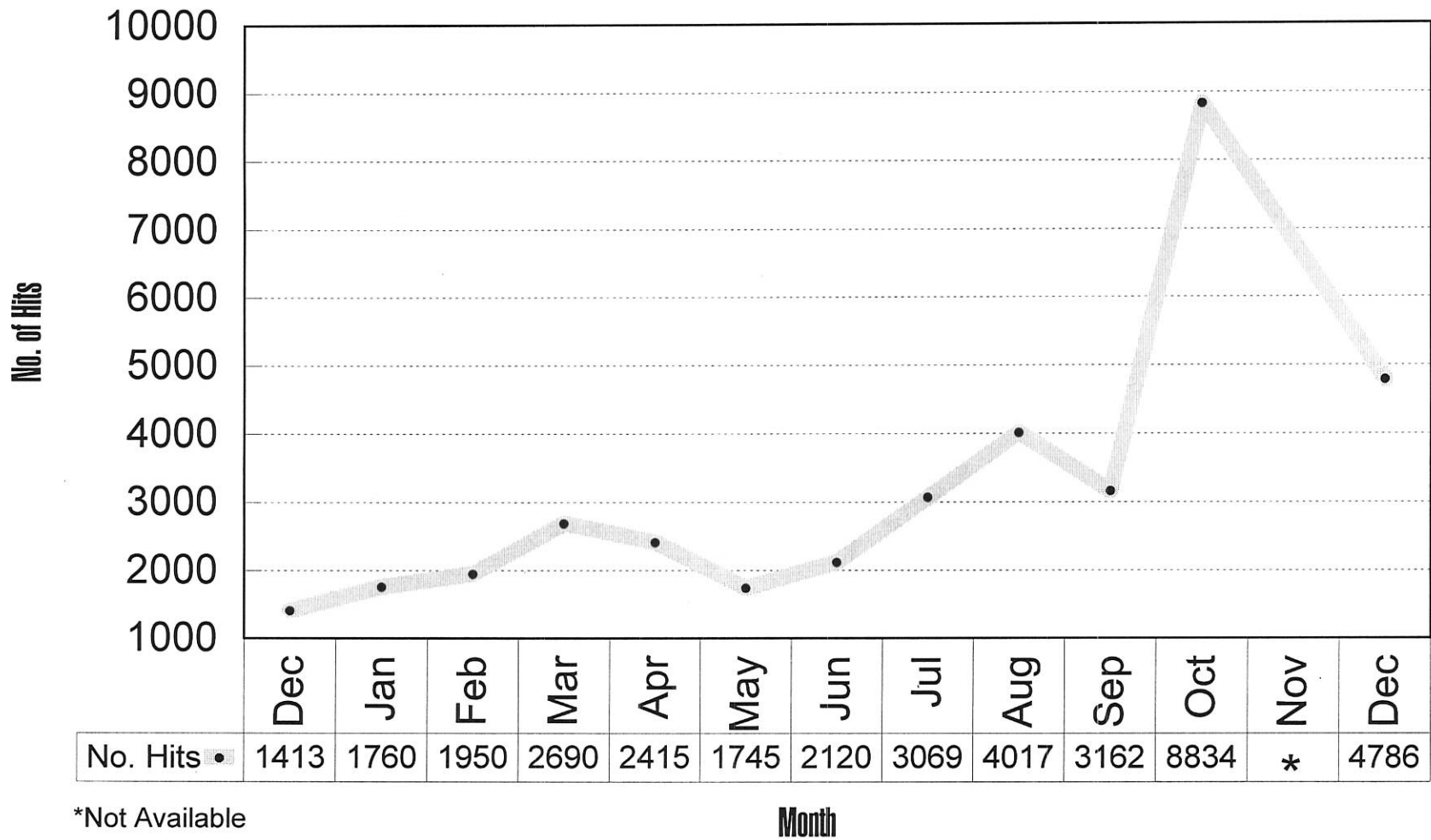
- Effect of managed care on health care costs, quality and access (includes evaluation of health system delivery changes).
- Utilization of health services across settings
- Standards-setting
- Clearinghouse for health information
- Health System Inventory
- Health Status Indicators

Projects approved during 1998

- Determining the extent of managed care in Kansas
- Improvement of external cause of injury coding in hospital data
- Monitoring the effect of the Health Wave program on the health status of children (identifying indicators)

Website Hits

Health Care Database



*Not Available

Legislative Post Audit
Audit of the Health Care Database

Legislative Post Audit Report - Highlights

- Legislatively required audit conducted by Wendling, Noe, Nelson and Johnson for the Legislative Post Audit Committee
- Purpose: To evaluate costs of providing data and benefits of the health care database and the Health Care Data Governing Board to the State.
- Surveys of data providers and data users were conducted.

Cost to the State

<u>State</u> <u>Fiscal Year</u>	<u>Establish</u> <u>Data Base</u>	<u>Maintain</u>	<u>Total</u>
1995	\$54,298	\$93,883	\$149,181
1996		129,950	129,950
1997		127,567	127,567
1998		135,494	135,494

Currently pays for salaries and small amount of operating funds for 1 analyst, 1 systems analyst and 1 clerical staff.

Cost to Data Providers

27 major providers of data

15 responded to the survey

8 reported no additional cost to reporting

7 reported total cost of \$3,375 in one 12-month period

Benefits to the State

- Improve quality of health care and provider performance.
- Promote informed decision-making by state officials.
- Encourage people to make prudent health care related purchases.
- Constrain rising costs of health care.
- Health data can be used as a tool to improve access to services.

List of Reports

- Most Frequent Inpatient Conditions Treated In Community Hospitals (1993-1994)
- Health System Inventory for -
 - Professionals - 1996
 - Emergency Medical Service Professionals - 1996
 - Licensed Physicians - 1995 Renewals
 - Licensed Chiropractors
 - Licensed Podiatrists
 - Licensed Physician Assistants
 - Licensed Occupational Therapy Assistants
 - Licensed Physical Therapists
 - Licensed Physical Therapy Assistants
 - Licensed Respiratory Therapists
 - Nursing Professional Data - 1995 Renewals
 - Optometry Professional Data - 1994 Renewals

- Health Data Resource Directory
Source of data for:

Licensing and Credentialing Agencies
Health Care Facilities
Public Health Programs
Health Care Utilization
Quality Review/Improvement

Benefits to Users

Results from 22 respondents used data from the Health Care Database for:

- Recruiting of health care professionals
- Preparation of state and national reports
- Tracking of professionals graduated from KUMC
- Contacting individuals for continuing education programs and outbreak notifications.
- Community health assessments
- Flu immunization campaign

Findings And Recommendations

Conditions

The Health Care Data Base Governing Board has invested significant time and resources in compiling and publishing an inventory of health care providers and facilities over the last several years. Due to the level of staffing and funding for the Health Care Database, they are unable to keep the various inventories current.

Result

Health data should be valid, reliable, comprehensive, comparable and timely. The usefulness of this data may be compromised due to incomplete and untimely information.

Recommendation

If there is a need and intent to maintain a current inventory of health care resources in the State, then sufficient resources need to be committed to this program.

Activities/Priorities of the Health Care Data Governing Board

Progress Report

Priority	Status	Progress	Oversight Group	Goals
<p>Effect of managed care on health care costs, quality and access (includes evaluation of health system delivery changes).</p> <p>Initiative 1) Assess managed care penetration: identify provider networks, populations in managed care and managed care arrangements.</p> <p>Initiative 2) Identify a core set of indicators to evaluate quality, cost and access.</p>	<p>In process; established at July, 1997 retreat; being evaluated by the Technical Task Force</p> <p>In process; Data Users Task Force is addressing indicators for children and then will address other items.</p> <p>In Process;</p>	<p>--Establishing definitions and parameters for data collection</p> <p>--Developing report on findings</p> <p>--Identified the CHIP program as an opportunity for the HCDGB and SRS to jointly identify key indicators of health for Kansas children covered by in the CHIP plan for program evaluation.</p> <p>Health Wave baseline survey</p>	<p>Technical Task Force</p> <p>Data Users Task Force</p> <p>Technical Task Force</p>	<p>1) Design a multi-phased initiative to address the requirement of this priority.</p> <p>2) Develop a working definition of managed care and determine what data will be collected for analysis and decision-making.</p> <p>3) Determine specifications of products for distribution.</p> <p>--Identify indicators that are not burdensome for plans</p> <p>--Determine how data will be collected and where it will be deposited and maintained.</p> <p>--Determine what products will be developed from these data and how they should be distributed.</p> <p>-Work with SRS in Preparing a baseline survey for Health Care Data Governing Board approval</p>

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Activities/Priorities of the Health Care Data Governing Board

Progress Report

Priority	Status	Progress	Oversight Group	Goals
Utilization of health services across settings	Yet to be addressed; established at July, 1997 retreat.	-Identified KHIIS as a significant contributor to this effort	Data Users Task Force	-Define audience, products, data elements and collection methods and entities.
Standards-setting	Ongoing; established at July, 1997 retreat. Implemented by staff for health professional data.	-Minimum dataset for licensure -Recommended set of health status indicators	Data Users Task Force and Technical Task Force	-Increase the number of credentialing agencies implementing the minimum dataset. -Determine new data elements to be collected if warranted.
Clearinghouse for health information Dissemination of information related to issues that affect the health information policy development in Kansas.	Ongoing; established at July, 1997 retreat; staff implemented.	--Established website with linkages -Coordinating information related to administrative simplification -Proposing marketing of Governing Board activities	Technical Task Force	--Collect information on health services studies in Kansas. -Develop a strategy for marketing Governing Board activities.

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Activities/Priorities of the Health Care Data Governing Board

Progress Report

Priority	Status	Progress	Oversight Group	Goals
<p>Health System Inventory</p> <p>Centralization of licensure and facility data from licensing agencies.</p>	<p>Ongoing: established as first priority (1994); currently being implemented by staff.</p>	<ul style="list-style-type: none"> -Collection from 8 licensure boards and 41 categories. -Approved minimum dataset implemented by 2 boards. -Data partners are assisting with quality improvement of data reported by licensing agencies. -Proposing marketing of Governing Board activities 	<p>Technical Task Force</p>	<ul style="list-style-type: none"> -Increase the number of licensing agencies implementing the minimum dataset. -Complete publications for inventory. -Monitor licensure policy changes for credentialing boards to assure data collection continues as prescribed by the Governing Board.

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Activities/Priorities of the Health Care Data Governing Board

Progress Report

Priority	Status	Progress	Oversight Group	Goals
<p>Health Status Indicators</p> <p>Initiative 1) Collection of 140 sentinel health events to track the health status of Kansans over time.</p> <p>Initiative 2) Improvement of External Cause of Injury Coding in Kansas in Hospital Discharge Data and Kansas Outpatient Data Systems</p>	<p>Ongoing; established as second priority (1995); currently being implemented by staff.</p> <p>In Process; Identify barriers and encourage voluntary data collection.</p>	<p>–Reporting of data from 50% of recommended data providers.</p> <p>–55% of the indicators is collectible now.</p> <p>-Subcommittee is meeting and have held discussions with Kansas Hospital Association</p>	<p>Technical Task Force</p> <p>Technical Task Force</p>	<p>–Publish health status indicator information in format approved by Governing Board.</p> <p>–Make recommendations to improve data structure and compatibility issues.</p> <p>-Implement proposal for improving E-Code data collection</p>