

Approved: 3-31-99  
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 March 24, 1999 in Room 526-S of the Capitol.

All members were present except:

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

Others attending: See attached list

**Action on: HB 2215 - Respiratory therapist licensure**

Staff briefed the Committee on a balloon of the bill showing a proposed amendment which would add language relating to a student who holds a special permit to practice respiratory therapy under the supervision of a licensed respiratory therapist. (Attachment 1)

After Committee discussion on the amendment, Senator Hardenburger made a motion to adopt the amendment, and that the Committee recommend HB 2215 as amended favorably for passage, seconded by Senator Steineger. The motion carried.

**Action on: HB 2074 - HIV and AIDS monitoring**

Danielle Noe, Governor's Legislative Liaison, presented testimony to the Committee that would abolish the Department of Health and Environment, and create the Department of Health and the Department of Environment, as shown in a balloon of HB 2074. (Attachment 2) Ms. Noe pointed out that only two states, Kansas and South Carolina, still have fully combined public health and environmental protection agencies, and that the creation of two separate departments would allow the structure of each to flatten, removing a layer of bureaucracy between program managers and those elected by and accountable to the people of Kansas. (Attachment 3) In regard to questions relating to funding, it was noted that KDHE is authorized to have 834.6 full time equivalent (FTE) positions (a total of 975 employees, including unclassified) which would remain approximately the same, and that KDHE spends about \$170 million per year, with \$27 million of that being State General Fund dollars. The balance, or nearly 80 percent of the agency's budget (\$142 million) is Federal money and grants from private foundations. During Committee discussion, it was noted this issue on splitting KDHE has been proposed in past Legislative Sessions.

Senator Langworthy made a motion to adopt the balloon amendments that would abolish the Department of Health and Environment and create the Department of Health and the Department of Environment as shown in the balloon of HB 2074, seconded by Senator Becker. The motion carried with two descending votes.

Senator Langworthy made a motion the Committee recommend HB 2074 as amended favorably for passage, seconded by Senator Becker. The motion carried.

**Action on: HB 2213 - Diagnosis and treatment of mental disorders by Behavioral Sciences Regulatory Board licensees**

Ron Hein, representing the Mental Health Credentialing Coalition, briefed the Committee on a balloon of the bill showing compromised amendments from proponents and opponents of the bill. (Attachment 4) During Committee discussion it was suggested staff make technical changes to the bill and amend confidentiality language by inserting the following where appropriate: "There is no provision under this section for information which is required to be reported to a public official."

Senator Salmans made a motion to adopt the balloon amendments to the bill, technical clean-up by staff, and insert confidentiality language where appropriate as noted by staff, and that the Committee recommend HB 2213 as amended favorably for passage, seconded by Senator Hardenburger. The motion carried.

**Adjournment**

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

# SENATE PUBLIC HEALTH AND WELFARE COMMITTEE GUEST LIST

DATE: 3-24-99

NAME	REPRESENTING
St. Westford	KNASW
Susan Linn	KPA
Whitney Dameron	KS Psychological Assn.
Don Richards	KRCB
Janet Stubbins	KRCB
Holly Fung	Ks. Public Health Association
Mike Beam	Ks. Luth. Assn.
Debra Long	Legis.
Gianfranco Pizzano	KDHE
Karl Milhan	KDHE
Don Jordan	SRS - MH + DD
LORNE PHILLIPS	KDHE
Conie Hueser	SRS - MH/DD
Terri Roberts	KSDA
Carolyn Muddendorf	Ks St Ns Assn

## HOUSE BILL No. 2215

By Committee on Health and Human Services

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9 AN ACT concerning respiratory therapy; relating to licensure; amending  
10 K.S.A. 39-952, 40-12a01, 65-4116, 65-4921, 65-5502, 65-5503, 65-  
11 5504, 65-5505, 65-5506, 65-5507, 65-5510, 65-5511, 65-5512 and 65-  
12 5514 and K.S.A. 1998 Supp. 40-3103, 65-4915, 65-5508, 65-5509, 74-  
13 4916 and 74-4960a and repealing the existing sections.

14  
15 *Be it enacted by the Legislature of the State of Kansas:*

16 Section 1. K.S.A. 39-952 is hereby amended to read as follows: 39-  
17 952. The secretary of health and environment or the secretary's designee  
18 shall not issue a correction order to a person licensed to operate an adult  
19 care home because of a violation of a provision of article 9 of chapter 39  
20 of the Kansas Statutes Annotated or a rule and regulation adopted there-  
21 under which was caused by any person licensed by the state board of  
22 healing arts *to practice a branch of the healing arts* if such person licensed  
23 by the state board of healing arts is not an owner, operator or employee  
24 of the adult care home and if the person licensed to operate the adult  
25 care home shows that ~~he or she~~ *such person* has exercised reasonable  
26 diligence in notifying ~~such~~ *the* person licensed by the state board of heal-  
27 ing arts *to practice a branch of the healing arts* of ~~his or her~~ *such person's*  
28 duty to the residents of the adult care home.

29 Sec. 2. K.S.A. 40-12a01 is hereby amended to read as follows: 40-  
30 12a01. As used in this act: (a) "Health care provider" means any person  
31 licensed to practice any *branch of the healing arts* by the board of  
32 healing arts or any hospital licensed under the provisions of K.S.A. 65-  
33 425 *et seq.*, and amendments thereto, or a private psychiatric hospital  
34 authorized under K.S.A. 75-3307b and amendments thereto;

35 (b) "person" means an individual, corporation, partnership, associa-  
36 tion, joint stock company, trust, unincorporated organization or any sim-  
37 ilar entity;

38 (c) "affiliate" means a person that directly or indirectly, through one  
39 or more intermediaries, employs, controls or is controlled by, or is under  
40 common control with a health care provider;

(d) "commissioner" means the commissioner of insurance; and

(e) "association" means any organization whose income is exempt  
43 from taxation pursuant to section 501(a) of the internal revenue code of

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1 shall be paid amounts provided in subsection (e) of K.S.A. 75-3223 and  
2 amendments thereto from the healing arts fee fund.

3 Sec. 10. K.S.A. 65-5505 is hereby amended to read as follows: 65-  
4 5505. The board shall pass upon the qualifications of all applicants for  
5 examination and ~~registration licensure~~, provide for ~~and conduct~~ all ex-  
6 aminations, determine the applicants who successfully pass the exami-  
7 nation, duly ~~register license~~ such applicants and adopt rules and regula-  
8 tions as may be necessary to administer the provisions of this act. The  
9 board shall keep a record of all proceedings under this act and a roster  
10 of all individuals ~~registered licensed~~ under this act. Only an individual  
11 may be ~~registered licensed~~ under this act.

12 Sec. 11. K.S.A. 65-5506 is hereby amended to read as follows: 65-  
13 5506. (a) An applicant applying for ~~registration licensure~~ as a respiratory  
14 therapist shall file a written application on forms provided by the board,  
15 showing to the satisfaction of the board that the applicant meets the  
16 following requirements:

17 (1) Education: The applicant shall present evidence satisfactory to the  
18 board of having successfully completed ~~the academic requirements~~ of an  
19 educational program in respiratory therapy ~~recognized approved~~ by the  
20 board.

21 (2) Experience: ~~The applicant shall submit to the board evidence of~~  
22 ~~having successfully completed a period of supervised field work at a min-~~  
23 ~~imum recognized by the board.~~

24 ~~(3)~~ Examination: The applicant shall pass an examination as provided  
25 for in K.S.A. 65-5507 and amendments thereto.

26 ~~(4)~~ (3) Fees: The applicants shall pay to the board all applicable fees  
27 established under K.S.A. 65-5509 and amendments thereto.

28 (b) The board shall adopt rules and regulations establishing the cri-  
29 teria ~~which for~~ an educational program in respiratory therapy ~~shall satisfy~~  
30 ~~to be recognized to obtain successful recognition~~ by the board under par-  
31 agraph (1) of subsection (a). The board may send a questionnaire devel-  
32 oped by the board to any school or other entity conducting an educational  
33 program in respiratory therapy for which the board does not have suffi-  
34 cient information to determine whether the program should be recog-  
35 nized by the board and whether the program meets the rules and regu-  
36 lations adopted under this section. The questionnaire providing the  
37 necessary information shall be completed and returned to the board in  
38 order for the program to be considered for recognition. The board may  
39 contract with investigative agencies, commissions or consultants to assist  
40 the board in obtaining information about an educational program in res-  
41 piratory therapy. In entering such contracts the authority to recognize an  
42 educational program in respiratory therapy shall remain solely with the  
43 board.

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1 Sec. 12. K.S.A. 65-5507 is hereby amended to read as follows: 65-  
2 5507. (a) Each applicant for ~~registration~~ *licensure* under this act shall be  
3 examined by *a* written examination ~~required~~ *chosen* by the board to test  
4 the applicant's knowledge of the basic and clinical sciences relating to  
5 respiratory therapy, and respiratory ~~care~~ *therapy* theory and practice, in-  
6 cluding the applicant's professional skills and judgment in the utilization  
7 of respiratory therapy techniques and methods, and such other subjects  
8 as the board may deem useful to determine the applicant's fitness to  
9 practice.

10 (b) Applicants for ~~registration~~ *licensure* shall be examined at a time  
11 and place and under such supervision as the board may determine. Ex-  
12 aminations shall be given at least twice each year at such places ~~within~~  
13 ~~this state~~ as the board may determine and the board shall give *or cause*  
14 *to be given* reasonable public notice of such examinations at least 60 days  
15 prior to their administration.

16 (c) Applicants may obtain their examination scores.

17 Sec. 13. K.S.A. 1998 Supp. 65-5508 is hereby amended to read as  
18 follows: 65-5508. (a) ~~The board shall waive the examination, education~~  
19 ~~and experience requirements and grant registration to any person who~~  
20 ~~applies for registration on or before July 1, 1987, who pays the application~~  
21 ~~fee and who was registered or certified immediately prior to the effective~~  
22 ~~date of this act as a respiratory therapist or respiratory therapy technician~~  
23 ~~by the national board for respiratory care or who has been employed as~~  
24 ~~a respiratory therapist for the purpose of providing respiratory therapy~~  
25 ~~for at least two years within the three-year period immediately prior to~~  
26 ~~the effective date of this act.~~

27 ~~(b)~~ The board may waive the examination, education or experience  
28 requirements and grant *registration licensure* to any applicant who pres-  
29 ents proof of current licensure or registration as a respiratory therapist in  
30 another state, the District of Columbia or territory of the United States  
31 which requires standards for licensure or registration determined by the  
32 board to be equivalent to ~~or exceed~~ the requirements for ~~registration~~  
33 *licensure* under this act.

34 ~~(e)~~ *(b)* At the time of making an application under this section, the  
35 applicant shall pay to the board the application fee as required under  
36 K.S.A. 65-5509 and amendments thereto.

37 ~~(d)~~ *(c)* The board may issue a special permit to a student enrolled in  
38 an approved school of respiratory therapy who applies for such special  
39 permit on a form provided by the board and who pays to the board the  
40 special permit fee as required under K.S.A. 65-5509 and amendments  
41 thereto. The special permit shall ~~authorize a student who is enrolled in~~  
42 ~~an approved school of respiratory therapy and who holds such special~~  
43 ~~permit to practice respiratory therapy under the supervision of a regis-~~

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authorize a student who is enrolled in an approved school of respiratory therapy and who holds such special permit to practice respiratory therapy under the supervision of a licensed respiratory therapist. Such special permit shall

1 ~~tered respiratory therapist. Such special permit shall~~ expire on the date  
2 that the student graduates from an approved school of respiratory therapy  
3 or otherwise ceases to be enrolled in an approved school of respiratory  
4 therapy.

5 ~~(e) (d)~~ The board may issue a temporary ~~registration~~ license to an  
6 applicant for ~~registration licensure~~ as a respiratory therapist who applies  
7 for temporary ~~registration licensure~~ on a form provided by the board, who  
8 meets the requirements for ~~registration licensure~~ or who meets all of the  
9 requirements for ~~registration licensure~~ except examination and who pays  
10 to the board the temporary ~~registration~~ license fee as required under  
11 K.S.A. 65-5509 and amendments thereto. Such temporary ~~registration~~  
12 ~~licensure~~ shall expire one year from the date of issue or on the date that  
13 the board approves the application for ~~registration licensure~~, whichever  
14 occurs first. No more than one such temporary ~~registration~~ license shall  
15 be permitted to any one person.

16 *(e) A person registered to practice respiratory therapy on February*  
17 *29, 2000, shall be deemed to be licensed to practice respiratory therapy*  
18 *under this act, and such person shall not be required to file an original*  
19 *application for licensure under this act. Any application for registration*  
20 *filed but which has not been granted prior to March 1, 2000, shall be*  
21 *processed as an application for licensure under this act.*

22 Sec. 14. K.S.A. 1998 Supp. 65-5509 is hereby amended to read as  
23 follows: 65-5509. (a) The board shall charge and collect in advance fees  
24 provided for in this act as fixed by the board by rules and regulations,  
25 subject to the following limitations:

26	Application fee, not more than .....	\$80
27	Temporary <del>registration</del> license fee, not more than .....	40
28	Special permit fee, not more than .....	80
29	<del>Registration License</del> renewal fee, not more than .....	80
30	<del>Registration License</del> late renewal fee, not more than .....	80
31	<del>Registration License</del> reinstatement fee, not more than .....	80
32	Certified copy of <del>registration</del> license, not more than .....	40
33	Written verification of <del>registration</del> license, not more than .....	25

34 (b) The board shall charge and collect in advance fees for any ex-  
35 amination administered by the board under the respiratory therapy prac-  
36 tice act as fixed by the board by rules and regulations in an amount equal  
37 to the cost to the board of the examination. If the examination is not  
38 administered by the board, the board may require that fees paid for any  
39 examination under the respiratory therapy practice act be paid directly to  
40 the examination service by the person taking the examination.

41 Sec. 15. K.S.A. 65-5510 is hereby amended to read as follows: 65-  
42 5510. (a) The board may deny, refuse to renew, suspend or revoke a  
43 ~~special permit license~~ when the ~~respiratory therapist~~ applicant for ~~registra-~~

HOUSE BILL No. 2074

By Representative Neufeld

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concerning the department of health and environment; abolishing the department of health and environment, the division of health and the division of environment; creating the department of health and the department of environment;

Senate Public Health and Welfare  
Date: 3-24-99  
Attachment No. 2

12 AN ACT relating to HIV infection; amending K.S.A. 65-6003, 65-6005  
13 and 65-6007 and K.S.A. 1998 Supp. 65-6001, 65-6002 and 65-6004  
14 and repealing the existing sections

15  
16 *Be it enacted by the Legislature of the State of Kansas.*  
17 [Section ] K.S.A. 1998 Supp. 65-6001 is hereby amended to read as  
18 follows 65-6001. As used in K.S.A. 65-6001 to 65-6007, inclusive, and  
19 K.S.A. 1998 Supp. 65-6008, 65-6009 and 65-6010, and amendments  
20 thereto, unless the context clearly requires otherwise:

- 21 (a) "AIDS" means the disease acquired immune deficiency
- 22 syndrome.
- 23 (b) "HIV" means the human immunodeficiency virus
- 24 (c) "Positive reaction to an AIDS test" means a positive screening
- 25 test, approved by the secretary, indicating infection by HIV, with a positive
- 26 specific test as specified by the secretary comprising confirmed analytical
- 27 results which are evidence of HIV infection "Laboratory confirmation
- 28 of HIV infection" means positive test results from a confirmation
- 29 test approved by the secretary
- 30 (d) "Secretary" means the secretary of health and environment.
- 31 (e) "Physician" means any person licensed to practice medicine and
- 32 surgery.
- 33 (f) "Laboratory director" means the person responsible for the professional,
- 34 administrative, organizational and educational duties of a
- 35 laboratory.
- 36 (g) "HIV infection" means the presence of HIV in the body.
- 37 (h) "Racial/ethnic group" shall be designated as either white, black,
- 38 Hispanic, Asian/Pacific islander or American Indian/Alaskan Native.
- 39 (i) "Corrections officer" means an employee of the department of
- 40 corrections as defined in subsections (f) and (g) of K.S.A. 75-5202, and
- 41 amendments thereto.
- 42 (j) "Emergency services employee" means an attendant or first responder
- 4 as defined under K.S.A. 65-6112, and amendments thereto, or a

; also repealing K.S.A. 75-5601, 75-5602, 75-5603, 75-5604, 75-5605, 75-5606, 75-5607, 75-5608, 75-5609, 75-5610, 75-5610a, 75-5611, 75-5611a, 75-5612, 75-5613, 75-5616, 75-5617, 75-5618, 75-5619, 75-5620, 75-5621, 75-5622, 75-5623, 75-5624, 75-5625, section 30 of this act and K.S.A. 1998 Supp. 74-72,102.

Section 1, see attached

Sec. 33

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1 firefighter.

2 (k) "Law enforcement employee" means:

3 (1) Any police officer or law enforcement officer as defined under  
4 K.S.A. 74-5602, and amendments thereto;

5 (2) any person in the service of a city police department or county  
6 sheriff's office who performs law enforcement duties without pay and is  
7 considered a reserve officer;

8 (3) any person employed by a city or county who is in charge of a jail  
9 or section of jail, including jail guards and those who conduct searches of  
10 persons taken into custody; or

11 (4) any person employed by a city, county or the state of Kansas who  
12 works as a scientist or technician in a forensic laboratory.

13 (l) "Employing agency or entity" means the agency or entity employ-  
14 ing a corrections officer, emergency services employee, law enforcement  
15 employee or jailer.

16 (m) "Infectious disease" means AIDS.

17 (n) "Infectious disease tests" means tests approved by the secretary  
18 for detection of infectious diseases.

19 (o) "Juvenile correctional facility staff" means an employee of the  
20 juvenile justice authority working in a juvenile correctional facility as de-  
21 fined in K.S.A. 38-1602, and amendments thereto.

22 Sec. ~~24~~ K.S.A. 1998 Supp. 65-6002 is hereby amended to read as  
23 follows: 65-6002. (a) Whenever any physician has information indicating  
24 that a person is suffering from or has died from AIDS, such knowledge  
25 or information shall be reported immediately to the secretary, together  
26 with the name and address of the person who has AIDS; ~~or the name~~  
27 ~~and former address of the deceased individual who had such disease.~~ Any  
28 ~~laboratory director shall report all positive reactions to an AIDS test to~~  
29 ~~the secretary.~~ Any physician who is in receipt of a report indicating a  
30 ~~positive reaction to a test for HIV infection~~ *laboratory confirmation of*  
31 *HIV infection* resulting from the examination of any specimen provided  
32 to a laboratory by such physician shall report all such ~~positive reactions~~  
33 ~~information~~ to the secretary. Reports ~~by physicians and laboratory direc-~~  
34 ~~tors~~ shall be provided within ~~one week of receipt or interpretation of the~~  
35 ~~positive test results [30 days of testing]~~ and shall ~~designate~~ *include the*  
36 *name and address of the person tested*, the type of test or tests performed,  
37 the date of performance of the test or tests, the results of the test or tests,  
38 the sex, date of birth, county of residence and racial/ethnic group of the  
39 person tested. ~~For the purpose of reporting HIV infection only, the name~~  
40 ~~of the patient shall not be reported.~~ The provisions of this subsection shall  
41 ~~not apply to a physician who, while performing services, other than the~~  
~~direct rendition of medical services, for an insurance company or health~~  
~~maintenance organization becomes aware that a person has tested positive~~



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1 ~~for HIV or is suffering from or has died from AIDS.~~

2     ~~b)~~ Whenever any laboratory director has information on laboratory  
3     ~~firmation of HIV infection, this information shall be reported to the~~  
4     ~~secretary. Reports shall be provided within 30 days of testing and shall~~  
5     ~~include the type of test or tests, the results of the test or tests, dates of~~  
6     ~~performance of the test or tests, the name of the physician or facility~~  
7     ~~requesting the test or tests, and any identifying information about the~~  
8     ~~person tested as the laboratory director has access to, such as the name~~  
9     ~~and address of the person tested, the sex, date of birth, county of residence~~  
10    ~~and racial/ethnic group, exposure category and pregnancy status of the~~  
11    ~~person tested.~~

12    ~~(b)~~ (c) Any physician or laboratory director who reports the infor-  
13    ~~mation required to be reported under subsection (a) or (b) in good faith~~  
14    ~~and without malice to the secretary shall have immunity from any liability,~~  
15    ~~civil or criminal, that might otherwise be incurred or imposed in an action~~  
16    ~~resulting from such report. Any such physician or laboratory director shall~~  
17    ~~have the same immunity with respect to participation in any judicial pro-~~  
18    ~~ceeding resulting from such report.~~

19    ~~(e)~~ (d) Information required to be reported under subsection (a) or  
20    ~~(b) and information obtained through laboratory tests conducted by the~~  
21    ~~department of health and environment relating to HIV or AIDS and per-~~  
22    ~~sons suffering therefrom or infected therewith shall be confidential and~~  
23    ~~shall not be disclosed or made public, upon subpoena or otherwise, be-~~  
24    ~~yond the disclosure necessary under subsection (a) or (b) or under sub-~~  
25    ~~section (a) of K.S.A. 65-6003 and amendments thereto or the usual re-~~  
26    ~~porting of laboratory test results to persons specifically designated by the~~  
27    ~~secretary as authorized to obtain such information, except such infor-~~  
28    ~~mation may be disclosed:~~

29     (1) If no person can be identified in the information to be disclosed  
30     and the disclosure is for statistical purposes;

31     (2) if all persons who are identifiable in the information to be dis-  
32     closed consent in writing to its disclosure;

33     (3) if the disclosure is necessary, and only to the extent necessary, as  
34     specified by rules and regulations of the secretary, to protect the public  
35     health;

36     (4) if a medical emergency exists and the disclosure is to medical  
37     personnel qualified to treat AIDS or HIV infection, except that any in-  
38     formation disclosed pursuant to this paragraph shall be disclosed only to  
39     the extent necessary to protect the health or life of a named party; or

40     (5) if the information to be disclosed is required in a court proceeding  
41     involving a minor and the information is disclosed in camera.

42    ~~(d)~~ (e) Information regarding cases of AIDS or HIV infection re-  
43    ~~ported in accordance with this section shall be used only as authorized~~

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1 under this act. Such information shall not be used in any form or manner  
 2 which would lead to the discrimination against any individual or group  
 3 with regard to employment, to provision of medical care or acceptance  
 4 into any facilities or institutions for medical care, housing, education,  
 5 transportation, or for the provision of any other goods or services.

35

6 Sec. ~~3~~ K.S.A. 65-6003 is hereby amended to read as follows: 65-  
 7 6003. (a) The secretary shall investigate cases of persons who have *HIV*  
 8 *infection or AIDS* and ~~maintain a supervision over~~ *monitor* such cases  
 9 during their continuance. The secretary may adopt and enforce rules and  
 10 regulations for the prevention and control of *HIV infection or AIDS* ~~and~~  
 11 ~~for such other matters relating to~~ cases of persons who have *HIV infection*  
 12 ~~or AIDS~~ as may be necessary to protect the public health. **The secretary**  
 13 **shall adopt rules and regulations for maintaining confidentiality of**  
 14 **information under this act which at a minimum are as strict as the**  
 15 **centers for disease control and prevention guidelines.**

16 (b) Any information relating to persons who have *HIV infection or*  
 17 *AIDS* which is required to be disclosed or communicated under subsec-  
 18 tion (a) shall be confidential and shall not be disclosed or made public  
 19 beyond the disclosure necessary under subsection (a) or under subsection  
 20 (a) of K.S.A. 65-6002 and amendments thereto to persons specifically  
 21 designated by the secretary as authorized to obtain such information,  
 22 except as otherwise permitted by subsection (e) (d) of K.S.A. 65-6002 and  
 23 amendments thereto.

24 (c) The secretary may enter into agreements with any county or joint  
 25 board of health to perform duties required to be performed by the sec-  
 26 retary under subsection (a) as specified by such agreement. The confi-  
 27 dentiality requirements of subsection (b) shall apply to any duties per-  
 28 formed pursuant to such an agreement.

36

29 Sec. ~~4~~ K.S.A. 1998 Supp. 65-6004 is hereby amended to read as  
 30 follows: 65-6004. (a) Notwithstanding any other law to the contrary, a  
 31 physician performing medical or surgical procedures on a patient who the  
 32 physician knows has an infectious disease or has had *laboratory confir-*  
 33 *mation of* a positive reaction to an infectious disease test may disclose  
 34 such information to other health care providers, emergency services em-  
 35 ployees, corrections officers or law enforcement employees who have  
 36 been or will be placed in contact with body fluids of such patient. The  
 37 information shall be confidential and shall not be disclosed by such health  
 38 care providers, emergency services employees, corrections officers or law  
 39 enforcement employees except as may be necessary in providing treat-  
 40 ment for such patient.

41 (b) Notwithstanding any other law to the contrary, a physician who  
 42 has reason to believe that the spouse or partner of a person who has had  
 43 ~~a positive reaction to an AIDS test~~ *laboratory confirmation of HIV infec-*

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on or who has AIDS may have been exposed to HIV and is unaware of such exposure may inform the spouse or partner of the risk of exposure. The information shall be confidential and shall not be disclosed by such spouse or partner to other persons except to the spouse or partner who has had a positive reaction to an AIDS test laboratory confirmation of HIV infection or who has AIDS.

(c) Nothing in this section shall be construed to create a duty to warn any person of possible exposure to HIV.

(d) Any physician who discloses or fails to disclose information in accordance with the provisions of this section in good faith and without malice shall have immunity from any liability, civil or criminal, that might otherwise be incurred or imposed in an action resulting from such disclosure. Any such physician shall have the same immunity with respect to participation in any judicial proceeding resulting from such disclosure.

Sec. [5] K S A 65-6005 is hereby amended to read as follows: 65-6005. ~~Any~~ Except as otherwise provided in this section, any person violating, refusing or neglecting to obey any provision of K.S.A. 65-6001 through 65-6004, and amendments thereto, or of the rules and regulations adopted by the secretary for the prevention and control of HIV infection or AIDS shall be guilty of a class C misdemeanor. Any person who discloses information which is made confidential and prohibited from disclosure under K.S.A. 65-6002 through 65-6004, and amendments thereto, shall be guilty of a misdemeanor punishable by a fine of not less than \$500 nor more than \$1,000 and by imprisonment in the county jail for not more than six months.

Sec. [6] K S A 65-6007 is hereby amended to read as follows: 65-6007. The secretary shall establish and maintain test sites throughout the state where the anonymous testing for HIV may be undertaken. ~~Anonymous testing for HIV may be conducted at such sites as the secretary specifies~~ including anonymous testing. The secretary shall establish test sites throughout the state so that an anonymous test site is available within 100 miles of any resident of the state

Sec. [7] K.S.A. 65-6003, 65-6005 and 65-6007 and K.S.A. 1998 Supp. 65-6001, 65-6002 and 65-6004 are hereby repealed.

Sec. [8] This act shall take effect and be in force from and after its publication in the [statute book]

37

38

Sec. 39. On or before January 8, 2001, the secretary of health shall report to the legislature concerning the impact of the changes made to K.S.A. 65-6001 et seq. by sections 33 to 38, inclusive, of this act. On July 1, 2001, the provisions of K.S.A. 65-6001 to 65-6010, inclusive, and amendments thereto, are hereby repealed.

Sec. 40. On and after October 1, 1999, K.S.A. 75-5601, 75-5602, 75-5603, 75-5604, 75-5605, 75-5606, 75-5607, 75-5608, 75-5609, 75-5610, 75-5610a, 75-5611, 75-5611a, 75-5612, 75-5613, 75-5616, 75-5617, 75-5618, 75-5619, 75-5620, 75-5621, 75-5622, 75-5623, 75-5624, 75-5625 and section 30 of this act and K.S.A. 1998 Supp. 74-72,102 are hereby repealed.

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Kansas register

Section 1. (a) In order to reorganize the administration and regulation of the state's policies related to public health, there is hereby established within the executive branch of government, the Kansas department of health.

(b) The provisions of the Kansas governmental operations accountability law shall apply to the Kansas department of health, and the department is subject to audit, review and evaluation under such law.

(c) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 2. (a) The Kansas department of health shall be administered under the direction and supervision of the secretary of health, who shall be appointed by the governor subject to confirmation by the senate as provided in K.S.A. 75-4315b, and amendments thereto. The secretary shall serve at the pleasure of the governor. The secretary of health shall be in the unclassified service under the Kansas civil service act and shall receive an annual salary fixed by the governor.

(b) The provisions of the Kansas governmental operations accountability law shall apply to the office of secretary of health, and the office is subject to audit, review and evaluation under such law.

(c) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 3. (a) The secretary of health may appoint assistant secretaries and a chief attorney who shall serve at the pleasure of the secretary. The assistant secretaries and chief attorney

shall be in the unclassified service under the Kansas civil service act and shall receive annual salaries fixed by the secretary of health and approved by the governor. The secretary of health also may appoint such other staff assistants, attorneys and employees necessary to enable the secretary to carry out the duties of the office. Such other staff assistants, attorneys and employees shall be in the classified service under the Kansas civil service act. Assistant secretaries, other staff assistants and employees shall have powers, duties and functions as are assigned to them by the secretary or as prescribed by law. The assistant secretaries, staff assistants and employees shall act for and exercise the powers of the secretary of health to the extent authority to do so is delegated by the secretary of health as provided by law. The secretary of health may appoint one public information officer, one personal secretary and one special assistant who shall be in the unclassified service under the Kansas civil service act and shall receive compensation fixed by the secretary of health and approved by the governor.

(b) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 4. (a) All employees of the department of health and environment as it existed prior to October 1, 1999, in the health officer II job class and all employees of the department of health created pursuant to this act in the health officer II job class, or any successor job class that may be approved under K.S.A. 75-2938, and amendments thereto, which has substantially

the same duties and responsibilities shall be in the unclassified service under the Kansas civil service act.

(b) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 5. (a) The secretary of health may create advisory committees. Members of such advisory committees shall receive compensation in an amount determined by the secretary and approved by the finance council.

(b) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 6. (a) The secretary of health shall adopt all general policies and rules and regulations relating to all forms of health which are administered or supervised by or under the department of health.

(b) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 7. (a) Except as otherwise provided by law, the secretary of health shall have the legal custody of all records, memoranda, writings, entries, prints, representations or combinations thereof, of any action, transaction, occurrence or event of the department of health.

(b) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 8. (a) The secretary of health may contract for the services of persons who are not officers or employees of the department of health to act as hearing officers on behalf of the

secretary of health in conducting hearings authorized by law to be conducted by a hearing officer designated by the secretary. Compensation for a person employed as a hearing officer pursuant to a contract under this section shall be fixed by the provisions of the contract.

(b) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 9. (a) In order to reorganize the administration and regulation of the state's policies related to the environment, there is hereby established within the executive branch of government, the Kansas department of environment.

(b) The provisions of the Kansas governmental operations accountability law shall apply to the department of environment, and the department is subject to audit, review and evaluation under such law.

(c) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 10. (a) The Kansas department of environment shall be administered under the direction and supervision of the secretary of environment, who shall be appointed by the governor subject to confirmation by the senate as provided in K.S.A. 75-4315b, and amendments thereto. The secretary shall serve at the pleasure of the governor. The secretary of environment shall be in the unclassified service under the Kansas civil service act and shall receive an annual salary fixed by the governor.

(b) The provisions of the Kansas governmental operations

accountability law shall apply to the office of secretary of environment, and the office is subject to audit, review and evaluation under such law.

(c) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 11. (a) The secretary of environment may appoint assistant secretaries and a chief attorney who shall serve at the pleasure of the secretary. The assistant secretaries and chief attorney shall be in the unclassified service under the Kansas civil service act and shall receive annual salaries fixed by the secretary of environment and approved by the governor. The secretary of environment also may appoint such other staff assistants, attorneys and employees necessary to enable the secretary to carry out the duties of the office. Such other staff assistants, attorneys and employees shall be in the classified service under the Kansas civil service act. Assistant secretaries, other staff assistants and employees shall have powers, duties and functions as are assigned to them by the secretary or as prescribed by law. The assistant secretaries, staff assistants and employees shall act for and exercise the powers of the secretary of environment to the extent authority to do so is delegated by the secretary of environment as provided by law. The secretary of environment may appoint one public information officer, one personal secretary and one special assistant who shall be in the unclassified service under the Kansas civil service act and shall receive compensation fixed by



the secretary of environment and approved by the governor.

(b) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 12. (a) The secretary of environment may create advisory committees. Members of such advisory committees shall receive compensation in an amount determined by the secretary and approved by the finance council.

(b) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 13. (a) The secretary of environment shall adopt all general policies and rules and regulations relating to all forms of environment which are administered or supervised by or under the department of environment.

(b) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 14. (a) Except as otherwise provided by law, the secretary of environment shall have the legal custody of all records, memoranda, writings, entries, prints, representations or combinations thereof, of any action, transaction, occurrence or event of the department of environment.

(b) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 15. (a) The secretary of environment may contract for the services of persons who are not officers or employees of the department of environment to act as hearing officers on behalf of the secretary of environment in conducting hearings authorized by

law to be conducted by a hearing officer designated by the secretary. Compensation for a person employed as a hearing officer pursuant to a contract under this section shall be fixed by the provisions of the contract.

(b) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 16. (a) The Kansas department of health and environment and the secretary of health and environment created by K.S.A. 75-5601, and amendments thereto, are hereby abolished.

(b) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 17. (a) The division of health established pursuant to K.S.A. 75-5603, and amendments thereto, and the position of director of the division of health are hereby abolished.

(b) Except as otherwise provided by this act, all powers, duties and functions of the existing division of health and the existing director of the division of health are hereby transferred to and conferred and imposed upon the secretary of health established by this act.

(c) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 18. (a) The division of environment established pursuant to K.S.A. 75-5605, and amendments thereto, and the position of director of the division of environment are hereby abolished.

(b) Except as otherwise provided by this act, all powers,

duties and functions of the existing division of environment and the existing director of the division of environment are hereby transferred to and conferred and imposed upon the secretary of environment established by this act.

(c) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 19. (a) Except as otherwise provided by this act, whenever the Kansas department of health and environment or words of like effect is referred to or designated by a statute, contract or other document, such reference or designation shall be deemed to apply to the Kansas department of health or the Kansas department of environment as established by this act. If any conflict arises as to whether the department of health or department of environment is being designated or referenced, such conflict shall be resolved by the governor whose decision shall be final.

(b) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 20. (a) All rules and regulations of the secretary of health and environment in existence on the effective date of this act shall continue to be effective and shall be deemed to be duly adopted rules and regulations of the secretary of health or the secretary of environment established by this act until amended or revoked pursuant to law. The determination of which rules and regulations shall be administered by the secretary of health or the secretary of environment shall be made based upon the terms

of this act. If any conflict arises as to the responsibility for enforcement or administration of rules and regulations of the secretary of health and environment, such conflict shall be resolved by the governor whose decision shall be final.

(b) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 21. (a) All certificates, permits, licenses, orders and directives of the Kansas department of health and environment or the secretary of health and environment in existence on the effective date of this act shall continue to be effective and shall be deemed to be the certificates, permits, licenses, orders and directives of either the secretary of health or the secretary of environment until amended or revoked pursuant to law. The determination as to whether the certificates, permits, licenses, orders and directives of the Kansas department of health and environment or the secretary of health and environment shall be the responsibility of the secretary of health or the secretary of environment shall be determined pursuant to the provisions of this act. If any conflict arises as to the responsibility for such certificates, permits, licenses, orders and directives, the conflict shall be resolved by the governor whose decision shall be final.

(b) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 22. (a) The Kansas department of health and the Kansas department of environment and the secretary of health and the

secretary of environment established by this act respectively shall be continuations of the Kansas department of health and environment, the secretary of health and environment, the director of the division of health and the director of the division of environment.

(b) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 23. (a) Except as otherwise provided in this act, on the effective date of this act officers and employees who, immediately prior to such date, were engaged in the performance of powers, duties or functions of any state agency or office which is abolished by this act or which becomes a part of the department of health or the powers, duties and functions of which are transferred to the secretary of health and who in the opinion of the secretary of health are necessary to perform the powers, duties and functions of the Kansas department of health shall be transferred to and shall become officers and employees of the Kansas department of health. Any such officer or employee shall retain all retirement benefits and all rights of civil service which have accrued to or vested in such officer or employee prior to the effective date of this act. The service of each such officer and employee so transferred shall be deemed to have been continuous. If a conflict arises as to whether an officer or employee shall be assigned to the Kansas department of health or the Kansas department of environment, such conflict shall be resolved by the governor whose decision shall be final.

(b) Nothing in this act shall affect the classified status of any person employed as a classified employee of the department of health and environment on the day immediately preceding the effective date of this section and the unclassified status shall apply only to persons appointed to such positions on and after the effective date of this section.

(c) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 24. (a) Except as otherwise provided in this act, on the effective date of this act officers and employees who, immediately prior to such date, were engaged in the performance of powers, duties or functions of any state agency or office which is abolished by this act or which becomes a part of the department of environment or the powers, duties and functions of which are transferred to the secretary of environment and who in the opinion of the secretary of environment are necessary to perform the powers, duties and functions of the Kansas department of environment shall be transferred to and shall become officers and employees of the Kansas department of environment. Any such officer or employee shall retain all retirement benefits and all rights of civil service which have accrued to or vested in such officer or employee prior to the effective date of this act. The service of each such officer and employee so transferred shall be deemed to have been continuous. If a conflict arises as to whether an officer or employee shall be assigned to the Kansas department of health or the Kansas department of environment,

such conflict shall be resolved by the governor whose decision shall be final.

(b) Nothing in this act shall affect the classified status of any person employed as a classified employee of the department of health and environment on the day immediately preceding the effective date of this section and the unclassified status shall apply only to persons appointed to such positions on and after the effective date of this section.

(c) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 25. (a) Except as otherwise provided in this act, the Kansas department of health shall succeed to all contracts, property, property rights and records which were used for or pertain to the performance of the powers, duties and functions transferred to the secretary of health. Except as provided in this act, the Kansas department of environment shall succeed to all contracts, property, property rights and records which were used for or pertain to the performance of the powers, duties and functions transferred to the secretary of environment. If any conflict as to the proper disposition of contracts, property, property rights or records arising under this act and resulting from the transfer, attachment or abolition of any state agency or office or all or part of the powers, duties and functions, such conflict shall be resolved by the governor whose decision shall be final.

(b) The provisions of this section shall be effective on and

after October 1, 1999.

Sec. 26. (a) No suit, action or other proceeding, judicial or administrative, lawfully commenced or which could have been commenced by or against any state agency abolished in this act or by or against any officer of the state in such officer's official capacity or in relation to the discharge of such officer's official duties shall abate by reason of the governmental reorganization under the provisions of this act. The court may allow any such suit, action or other proceeding to be maintained by or against the successor of such state agency or any officer affected.

(b) No criminal action commenced or which could have been commenced by the state shall abate by reason of the governmental reorganization under the provisions of this act.

(c) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 27. (a) The balance of all funds appropriated and reappropriated to any state agency abolished by this act is hereby transferred to either the Kansas department of health or the Kansas department of environment and shall be used only for the purpose for which the appropriation was originally made. The determination of whether particular funds shall be transferred to the department of health or to the department of environment shall be made pursuant to the terms of this act. If any conflict arises as to the proper disposition of funds, such conflict shall be resolved by the governor whose decision shall be final.

2-18



(b) On the effective date of this act, the liability for all accrued compensation or salaries of officers and employees who, immediately prior to such date, were engaged in the performance of powers, duties or functions of any state agency or office abolished by this act or which becomes a part of the Kansas department of health or the Kansas department of environment established by this act or the powers, duties and functions which are transferred to the secretary of health or the secretary of environment provided for by this act shall be assumed and paid by the Kansas department of health or the Kansas department of environment. The determination as to which department shall be liable for particular accrued compensation or salaries shall be made pursuant to the terms of this act. If any conflict arises as to which agency shall be responsible for particular accrued compensation or salaries, such conflict shall be resolved by the governor whose decision shall be final.

(c) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 28. (a) The secretary of health may organize the department of health in the manner deemed most efficient, so long as the same is not in conflict with law. The assistant secretaries, staff assistants and employees shall perform such duties and exercise such powers as prescribed by law and such other duties as the secretary of health prescribes. Such assistant secretaries shall act for, and exercise the powers of the secretary of health to the extent authority to do so is

delegated by the secretary of health. Personnel of the division shall perform such duties and exercise such powers as the assistant secretary or the head of the division may prescribe and such duties and powers as prescribed by law. Personnel of the division shall act for, and exercise the powers of their assistant secretary or division head to the extent authority to do so is delegated by the assistant secretary or division head.

(b) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 29. (a) The secretary of environment may organize the department of environment in the manner deemed most efficient, so long as the same is not in conflict with law. The assistant secretaries, staff assistants and employees shall perform such duties and exercise such powers as prescribed by law and such other duties as the secretary of environment prescribes. Such assistant secretaries shall act for, and exercise the powers of the secretary of environment to the extent authority to do so is delegated by the secretary of environment. Personnel of the division shall perform such duties and exercise such powers as the assistant secretary or the head of the division may prescribe and such duties and powers as prescribed by law. Personnel of the division shall act for, and exercise the powers of their assistant secretary or division head to the extent authority to do so is delegated by the assistant secretary or division head.

(b) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 30. The governor and the secretary of health and environment shall prepare a transition plan to provide for the separation of duties into the department of health and the department of environment pursuant to the provisions of this act.

Sec. 31. (a) The Kansas department of health created pursuant to section 1, and amendments thereto, and the office of secretary of health, created by section 2, and amendments thereto, hereby are subjected to audit under the Kansas governmental operations accountability law, and to review and evaluation during the 2004 regular session of the legislature, or such other regular session of the legislature designated by the legislative post audit committee in accordance with the provisions of subsection (c) of K.S.A. 74-7285, and amendments thereto.

(b) The provisions of this section shall be effective on and after October 1, 1999.

Sec. 32. (a) The Kansas department of environment created pursuant to section 9, and amendments thereto, and the office of secretary of environment, created by section 10, and amendments thereto, hereby are subjected to audit under the Kansas governmental operations accountability law, and to review and evaluation during the 2004 regular session of the legislature, or such other regular session of the legislature designated by the legislative post audit committee in accordance with the provisions of subsection (c) of K.S.A. 74-7285, and amendments thereto.

2-21

(b) The provisions of this section shall be effective on and after October 1, 1999.

# STATE OF KANSAS

BILL GRAVES, *Governor*  
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## OFFICE OF THE GOVERNOR WEEKLY COLUMN

Week of March 7, 1999  
BY GOV. BILL GRAVES

### *Health, Environment Policy Needs Sharper Focus*

There's an issue brewing in the State Capitol that, on the surface, would seem to impact only a handful of people in Topeka. That's a short-sighted view. The issue has to do with dividing the Kansas Department of Health & Environment in two -- creating an agency to deal solely with public health, and another that tackles only issues related to the environment. It is a situation that matters to each and every Kansan who cares about healthy children, clean water, safe nursing homes and a range of other health and environment-related issues.

The mission statement of the Kansas Department of Health & Environment calls for the agency to 'protect and promote the health of Kansans by providing community and personal health services, ensuring adequate sanitary conditions in public and health facilities, and regulating and promoting environmental quality.' That's a pretty tall order. The current organizational structure is unwieldy and lethargic. The agency spends far too much time reacting to problems and concerns, and not enough time building creative proactive solutions and innovations.

Only two states, Kansas and South Carolina, still have fully combined public health and environmental protection agencies. The trend is toward separation. The number of states with combined agencies has dwindled over the last 10 years, from roughly 14 states during the 1980's, to the two remaining today. What do the other 48 states know that we don't?

From the day we walked through the door in January 1995, one of this Administration's major goals for state government has been to increase efficiency and accountability. We have succeeded on a number of fronts -- tax administration, juvenile corrections, and senior citizens programs just to name a few. I believe we have a golden opportunity to duplicate those success stories by dividing KDHE into separate entities. By creating a pair of separate departments, each with a single, focused mission, we allow for the targeted delivery of government services.

Those who argue we are simply creating more bureaucracy are wrong. In fact, I would argue just the opposite: the creation of two separate departments allows the structure of each to flatten, removing a layer of bureaucracy between program managers and those elected by and accountable to the people of Kansas.

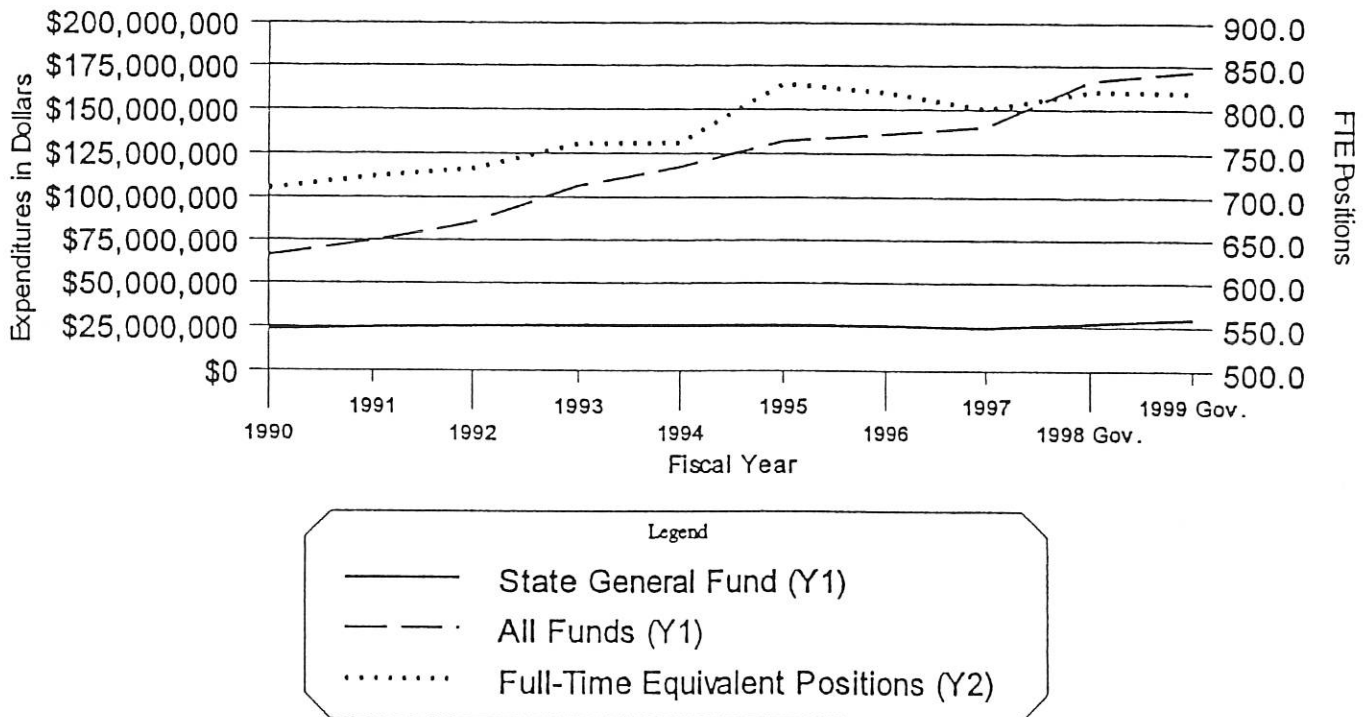
I learned a valuable lesson early in life -- if you try to do too much, the chances are you won't succeed at anything. It's a lesson we should apply to the Department of Health & Environment.

- *For more information on this or other issues related to state government, contact Gov. Bill Graves' office at 800/748-4408, or visit the Governor's website at [www.ink.org/public/governor](http://www.ink.org/public/governor)*

Kansas Department of Health and Environment

KDHE is authorized to have 834.6 full time equivalent (FTE) positions (total of 975 employees, including unclassified) to carry out the mission. The agency spends about \$170 million per year, with \$27 million of that being State General Fund (SGF) dollars. The balance, or nearly 80 percent of the agency's budget (\$142 million) is Federal money and grants from private foundations. A representation of staffing and expenditures is as follows:

OPERATING EXPENDITURES  
FY 1990-FY 1999



Organizational Structure of Agencies in All States

Agency structure:	Years		
	1985	1992	1998
Health & Environment Consolidated	14	4	2
Partially Consolidated	4	6	2

# STATE OF KANSAS

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## OFFICE OF THE GOVERNOR LEGISLATIVE TESTIMONY

TO: Chair Benlon and Members of the Governmental Organization and Elections Committee

FROM: Jamie Clover Adams, Legislative Liaison

DATE: February 8, 1999

BILL: House Bill 2077 – Creating the Department of Health and the Department of Environment

---

Madam Chair and members of the Committee, thank you for the opportunity to appear today in support of H.B. 2077, a bill to split the current Department of Health and Environment into two separate cabinet level agencies.

### Rationale for Split

Increased efficiency and accountability in government have been a focus of the Graves Administration since 1995. Dividing the Department of Health and Environment into two separate cabinet level agencies is another step toward that goal. The split would accomplish three distinct objectives: (1) enhance efficiency and customer service; (2) increase accountability; and, (3) enhance visibility.

*Enhanced efficiency and customer service.* It is important to note that only a few states have a combined health and environment agency. Only two states, Kansas and South Carolina, have fully combined agencies, while another three have delegated substantial environmental duties to their health departments. The number of states with combined agencies has declined over the past decade, from roughly 14 states during the 1980s to the remaining two today.

Extensive studies on the structure of the Department of Health and Environment have been done over the past 15 years, the last in 1993. Each study recognizes the problems within the agency and recommends change. To date, only cosmetic change has occurred. All parties agree that the Department could provide better service to the people of Kansas. However, the current organizational structure is lethargic and unwieldy. In many cases, Secretaries react rather than manage. Creating two separate departments, each with a single mission creates a situation where government can deliver service more effectively. The Secretary of each department can focus not only on current policy questions, but also on how service is delivered and anticipate future needs.

*Enhanced Accountability.* Creating two separate departments allows the structure of each to flatten making program managers directly accountable to the Secretary, the Governor and ultimately the people of Kansas for the effectiveness of their program. Two separate departments removes a layer of bureaucracy between program managers and those elected by and accountable to the people of the State. A clearly defined department mission also lends itself to greater accountability.

*Enhanced Visibility.* Creation of a single mission increases the visibility for the issue. Two departments would allow each Secretary to raise issues of concern in each field. Under the current scenario, the Secretary must choose between important issues in the division of health and the division of environment rather than being able to prioritize issues within each area.

#### Suggested Substantive Amendments to H.B. 2077

While the Administration supports the overall thrust of H.B. 2077, we do have three substantive amendments for Committee consideration. These include: (1) unclassifying all attorneys; (2) changing the implementation date to October 1, 1999; and, (3) adding a repealer section.

*Unclassifying Attorneys.* H.B. 2077 as it is currently drafted allows the Secretary of each department to appoint a chief attorney but places all other attorneys in the classified service. We believe all attorneys should be in the unclassified service. First, department attorneys need to reflect the enforcement philosophy of the Secretary – for example, use of consent orders to gain compliance rather than large monetary fines. Secondly, attorneys assist program managers with statutory interpretation. Again, this goes back to the Secretary's philosophy on enforcement. Finally, attorneys represent the Secretary and Administration in court. They should be accountable to their client.

*Implementation Date.* H.B. 2077 establishes July 1, 2001 as an implementation date. We believe October 1, 1999 is a more reasonable date. Waiting more than two years to implement a split in the agency would wreak havoc on the programs and delivery of service to Kansans. It effectively halts any change to current operations and creates great uncertainty for too long for agency employees. The Administration supports October 1, 1999 because it allows enough time for the two secretaries to work out the details of the split and also allows programs to close out the books on federal grants and start fresh in the new federal fiscal year. (More than 80% of the division of health budget comes from federal funds.)

*Repealer.* The Revisor informed us that H.B. 2077 did not contain a repealer section because of the lengthy implementation period. We raise this as a substantive issue because of the implication of leaving some sections in force. We request the Committee leave the following sections in statute: (1) coverage under the Kansas governmental operations accountability law; (2) designation of health officer II class in the unclassified service; (3) contracting for hearing officer services; (4) creation of advisory committees; and, (5) adoption of rules and regulations. We have not included the office of laboratory services. Abolishment of a statutorily created office of laboratory services increases the flexibility of the secretaries to determine the best method for providing laboratory services. Further, the Kansas Performance Review Board is currently reviewing this function. The secretaries should have the flexibility to consider the Board's recommendations.



### Suggested Technical Amendments

We ask the Committee to consider three technical amendments which include a drafting inconsistency in Sections three and six, clarification of intent in section 13 and clean-up of references in sections 19 and 20.

### Closing

The Governor supports H.B. 2077 to increase efficiency, accountability and visibility for the health and environment programs of the State. The Governor appreciates your consideration of this legislation. I would be happy to answer any questions you may have.



**KANSAS**  
**DEPARTMENT OF HEALTH & ENVIRONMENT**  
BILL GRAVES, GOVERNOR  
Clyde D. Graeber, Acting Secretary

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February 11, 1999

The Honorable Lisa Benlon, Chair  
House Governmental Organization and Elections  
Room 115-S  
Statehouse  
Topeka, Kansas 66612

RE: Division of KDHE: HB 2077

Dear Representative Benlon:

I apologize for not being able to appear before your committee during testimony on HB 2077 due to illness. I do, however, wish to give you a few of my impressions about the plan to divide the Kansas Department of Health and Environment into two agencies, a Department of Health and a Department of Environment.

During my 12 years of service in the Kansas Legislature, I must say that I never obtained a comfortable understanding of the wide scope of KDHE's regulatory and informational activities. Now, as Acting Secretary, it is even more apparent to me that this agency is spread out across a wide variety of programs, duties and responsibilities. Even in my short time with KDHE, I can see how difficult it must have been for previous Secretaries to set priorities given the numerous and competing interests all under one umbrella.

The majority of my time as Acting Secretary has been spent reacting to questions, concerns, problems and crises. These questions are very technical in nature and require me to act as an "expert" on any and all topics across the fields of health, environment, laboratories and statistical analysis. While this would be manageable given staff support in each individual Division of this agency, the combined impact of all of KDHE's programs leaves little time for a Secretary to focus on efficiencies and pro-active management.

Certainly, the division of KDHE would not solve all the problems we face, but I believe it would allow for the logical evaluation and separation of duties into more manageable groupings. By allowing environmental experts to work together with a Secretary who is dedicated only to their policies and programs, and by having a Secretary dedicated only to Kansas health issues and initiatives, I think Kansans would be better served.

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c:HGOE kdhe div  
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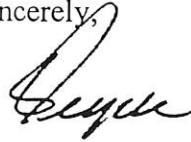
3-6

February 11, 1999

Page two

If, during your consideration of this bill, you need any additional assistance or information from KDHE, please contact me directly at 296-0461. I am dedicated to making this agency and all of its programs as efficient and customer-friendly as possible. I welcome your suggestions on ways to help us accomplish that mission.

Sincerely,

A handwritten signature in black ink, appearing to read "Clyde D. Graeber". The signature is fluid and cursive, with a large initial "C" and "G".

Clyde D. Graeber  
Acting Secretary

## Summary of Balloon Amendments to HB 2213

- Disclosures: All licensees under BSRB required to disclose information about their training, title, and abilities, and to document such disclosures in the client's file.
- Consultation: All licensees under BSRB, all of whom are not medical doctors, are required to consult with the client's primary care physician or psychiatrist, unless the client waives the consultation in writing, and to file such waiver in the client's file.
- DSM IV: All licensees under BSRB except social workers had consistent language with regards to the diagnostic and statistical manual to be used. This amendment conforms that language to the social workers as well.
- Name change: The Masters Level Psychologists who choose to engage in independent practice shall be known by the title of Clinical Psychotherapist.
- Technical: Other changes are technical in nature or are necessary because of amendments above.

Prepared by Ron Hein

HOUSE BILL No. 2213

By Committee on Health and Human Services

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10 AN ACT concerning the behavioral sciences regulatory board; concern-  
11 ing professions regulated by the board; amending K.S.A. 65-5805, 65-  
12 6302, 65-6308, 65-6313, 65-6315, 74-5302 and 74-5318 and 74-5323  
13 and K.S.A. 1998 Supp. 65-5802, 65-5803, 65-5804, 65-5806, 65-5808,  
14 65-5809, 65-5810, 65-5812, 65-6306, 65-6319, 65-6402, 65-6403, 65-  
15 6404, 65-6407, 65-6410, 65-6411, 74-5361, 74-5362, 74-5363, 74-  
16 5365, 74-5369, 74-5371 and 74-5372 and repealing the existing  
17 sections.

18  
19 *Be it enacted by the Legislature of the State of Kansas:*

20 Section 1. K.S.A. 1998 Supp. 65-5802 is hereby amended to read as  
21 follows: 65-5802. As used in the professional counselors licensure act:

22 (a) "Board" means the behavioral sciences regulatory board created  
23 by K.S.A. 74-7501 and amendments thereto.

24 (b) "Practice of professional counseling" means assisting an individual  
25 or group for a fee, monetary or otherwise, through counseling, assess-  
26 ment, consultation and referral and includes the diagnosis and treatment  
27 of mental disorders as authorized under the professional counselors licen-  
28 sure act.

29 (c) "Professional counseling" means to assist an individual or group  
30 to develop understanding of personal strengths and weaknesses, to re-  
31 structure concepts and feelings, to define goals and to plan actions as  
32 these are related to personal, social, educational and career development  
33 and adjustment.

34 (d) "Assessment" means selecting, administering, scoring and inter-  
35 preting instruments designed to describe an individual's aptitudes, abili-  
36 ties, achievements, interests and personal characteristics.

37 (e) "Consultation" means the application of principles, methods and  
38 techniques of the practice of counseling to assist in solving current or  
39 potential problems of individuals or groups in relation to a third party.

40 (f) "Referral" means the evaluation of information to identify prob-  
41 lems and to determine the advisability of referral to other practitioners.

42 (g) "Licensed professional counselor" means a person who is licensed  
under this act and who engages in the private practice of professional

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1 ing psychotherapy and assessments with individuals, couples, families or  
 2 groups and not less than 150 hours of clinical supervision, including not  
 3 less than 50 hours of person-to-person individual supervision, integrating  
 4 diagnosis and treatment of mental disorders with use of the American  
 5 psychiatric association's diagnostic and statistical manual, except that  
 6 one-half of the requirement of this part (D) may be waived for persons  
 7 with a doctor's degree in professional counseling or a related field ac-  
 8 ceptable to the board;

9 (E) for persons earning a degree under subsection (b) prior to July 1,  
 10 2003, in lieu of the education requirements under parts (B) and (C) of  
 11 this subsection, has completed the education requirements for licensure  
 12 as a professional counselor in effect on the day immediately preceding the  
 13 effective date of this act;

14 (F) for persons who apply for and are eligible for a temporary permit  
 15 to practice as a licensed professional counselor on the day immediately  
 16 preceding the effective date of this act, in lieu of the education and training  
 17 requirements under parts (B), (C) and (D) of this subsection, has com-  
 18 pleted the education and training requirements for licensure as a profes-  
 19 sional counselor in effect on the day immediately preceding the effective  
 20 date of this act;

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

22 (H) has paid the application fee fixed under K.S.A. 65-5808 and  
 23 amendments thereto.

24 (2) A person who was licensed or registered as a professional coun-  
 25 selor in Kansas at any time prior to the effective date of this act and whose  
 26 last license or registration in Kansas prior to the effective date of this act  
 27 was not suspended or revoked, upon application to the board, payment  
 28 of fees and completion of applicable continuing education requirements,  
 29 shall be licensed as a licensed clinical professional counselor by providing  
 30 demonstration of competence to diagnose and treat mental disorders  
 31 through at least two of the following areas acceptable to the board:

32 (a) Either (i) graduate coursework or (ii) passing a national, clinical  
 33 examination;

34 ~~(b)~~ either (i) three years of clinical practice in a community mental  
 35 health center, its contracted affiliate or a state mental hospital or (ii) three  
 36 years of clinical practice in other settings with demonstrated experience  
 37 in diagnosing or treating mental disorders; or

38 (c) attestation from one professional licensed to diagnose and treat  
 39 mental disorders in independent practice or licensed to practice medicine  
 40 and surgery that the applicant is competent to diagnose and treat mental  
 41 disorders.

42 (3) A licensed clinical professional counselor may engage in the in-  
 43 dependent practice of professional counseling and is authorized to diag-

(b)

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1 nose and treat mental disorders specified in the edition of the diagnostic  
 2 and statistical manual of mental disorders of the American psychiatric  
 3 association designated by the board by rules and regulations. On and after  
 4 January 1, 2002, a licensed professional counselor may diagnose and treat  
 5 mental disorders specified in the edition of the diagnostic and statistical  
 6 manual of mental disorders of the American psychiatric association des-  
 7 ignated by the board by rules and regulations only under the direction of  
 8 a licensed clinical professional counselor, licensed psychologist, person  
 9 licensed to practice medicine and surgery or person licensed to provide  
 10 mental health services as an independent practitioner and whose licensure  
 11 allows for the diagnosis and treatment of mental disorders.

12 (e) (d) The board shall adopt rules and regulations establishing the  
 13 criteria which a college or university shall satisfy in order to be approved  
 14 by the board. The board may send a questionnaire developed by the board  
 15 to any college or university for which the board does not have sufficient  
 16 information to determine whether the school meets the requirements for  
 17 approval and rules and regulations adopted under this section. The ques-  
 18 tionnaire providing the necessary information shall be completed and  
 19 returned to the board in order for the college or university to be consid-  
 20 ered for approval. The board may contract with investigative agencies,  
 21 commissions or consultants to assist the board in obtaining information  
 22 about colleges and universities. In entering such contracts the authority  
 23 to approve college and universities shall remain solely with the board.

24 (d) (e) A person who intends to pursue the postgraduate supervised  
 25 training experience shall apply to the board for a temporary permit to  
 26 practice as a licensed professional counselor by (1) paying an application  
 27 fee of no more than \$150, (2) providing evidence of graduating from a  
 28 masters or doctoral program in professional counseling acceptable to the  
 29 board, (3) submitting letters from three professionals attesting to the ap-  
 30 plicant's integrity, competence, and worthiness to merit the public's trust,  
 31 one of whom has provided direct clinical supervision of the applicant's  
 32 graduate program clinical training and (4) completing a postgraduate su-  
 33 pervised training plan on forms supplied by the board describing services  
 34 to be provided, place of employment, persons responsible for adminis-  
 35 trative oversight and clinical supervision, and statement acknowledging  
 36 behavioral sciences regulatory board postgraduate training requirements.

37 (e) (f) (1) A temporary permit may be issued by the board after the  
 38 application has been reviewed and approved by the board and the appli-  
 39 cant has paid the appropriate fee set by the board for issuance of new  
 40 licenses.

41 (2) A temporary permit issued by the board shall expire at such time  
 42 as final action on the application is completed or two years after the date  
 43 of issuance of the permit. A temporary permit may be renewed for one

When a client has symptoms of a mental disorder, a licensed clinical professional counselor shall consult with the client's primary care physician or psychiatrist to determine if there may be a medical condition or medication that may be causing or contributing to the client's symptoms of a mental disorder. A client may request in writing that such consultation be waived and such request shall be made a part of the client's record. A licensed clinical professional counselor may continue to evaluate and treat the client until such time that the medical consultation is obtained or waived.

Insert new paragraph and "(4)"

When a client has symptoms of a mental disorder, a licensed professional counselor shall consult with the client's primary care physician or psychiatrist to determine if there may be a medical condition or medication that may be causing or contributing to the client's symptoms of a mental disorder. A client may request in writing that such consultation be waived and such request shall be made a part of the client's record. A licensed professional counselor may continue to evaluate and treat the client until such time that the medical consultation is obtained or waived.

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. 4. K.S.A. 65-5805 is hereby amended to read as follows: 65-5805. An application for examination as a professional counselor or as a clinical professional counselor shall be made to the board on a form provided by the board. The application shall be accompanied by the examination fee fixed under K.S.A. 65-5808. If an applicant fails to pass the examination, the applicant may reapply and shall be allowed to take a subsequent examination. An applicant who has failed two successive examinations may not reapply for two years from the date of the last examination.

Sec. 5. K.S.A. 1998 Supp. 65-5806 is hereby amended to read as follows: 65-5806. (a) An applicant who meets the requirements for licensure pursuant to this act, has paid the license fee provided for by K.S.A. 65-5808 and amendments thereto and has otherwise complied with the provisions of this act shall be licensed by the board.

(b) Licenses issued pursuant to this act shall expire 24 months from the date of issuance unless revoked prior to that time. A license may be renewed upon application and payment of the fee provided for by K.S.A. 65-5808 and amendments thereto. The application for renewal shall be accompanied by evidence satisfactory to the board that the applicant has completed during the previous 24 months the continuing education required by rules and regulations of the board. *As part of such continuing education, a licensee shall complete not less than six continuing education hours relating to diagnosis and treatment of mental disorders and not less than three continuing education hours of professional ethics.*

(c) A person whose license has been suspended or revoked may make written application to the board requesting reinstatement of the license upon termination of the period of suspension or revocation in a manner prescribed by the board, which application shall be accompanied by the fee provided for by K.S.A. 65-5808 and amendments thereto.

Sec. 6. K.S.A. 1998 Supp. 65-5808 is hereby amended to read as follows: 65-5808. (a) The board shall fix by rules and regulations the following fees:

- (1) For application for licensure, not more than \$100;
- (2) for an original license, not more than \$175;
- (3) for examination, not more than \$175;

Insert New Section and Renumber Sections:

A licensee under this act shall, at the beginning of a patient/therapist relationship, inform the patient of the level of such licensee's training and the title or titles and license or licenses of such licensee. As a part of such obligation, such licensee shall disclose whether such licensee has a masters degree or a doctoral degree. If such licensee has a doctoral degree, such licensee shall disclose whether or not such doctoral degree is a doctor of medicine degree or some other doctoral degree. If such licensee does not have a medical doctor's degree, such licensee shall disclose that the licensee is not authorized to practice medicine and surgery and is not authorized to prescribe drugs. As a part of such disclosure, such licensee shall advise the patient that certain mental disorders can have medical or biological origins, and that the patient should consult with a physician. Documentation of such disclosures to patient shall be made in the patient's record.

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1 agnostic and statistical manual, through identifiable study of the following  
 2 content areas: Psychopathology, diagnostic assessment, interdisciplinary  
 3 referral and collaboration, treatment approaches and professional ethics;

4 (C) has completed a graduate level supervised clinical practicum of  
 5 supervised professional experience including psychotherapy and assess-  
 6 ment, integrating diagnosis and treatment of mental disorders with use of  
 7 the American psychiatric association's diagnostic and statistical manual,  
 8 with not less than 350 hours of direct client contact or additional post-  
 9 graduate supervised experience as determined by the board;

10 (D) has completed as part of or in addition to the requirements of  
 11 subsection (c) not less than two years of postgraduate supervised profes-  
 12 sional experience in accordance with a clinical supervision plan approved  
 13 by the board of not less than 4,000 hours of supervised professional ex-  
 14 perience including at least 1,500 hours of direct client contact conducting  
 15 psychotherapy and assessments with individuals, couples, families or  
 16 groups and not less than 150 hours of clinical supervision, including not  
 17 less than 50 75 hours of person-to-person individual supervision, inte-  
 18 grating diagnosis and treatment of mental disorders with use of the Amer-  
 19 ican psychiatric association's diagnostic and statistical manual;

20 (E) for persons earning a degree under subsection (c) prior to July  
 21 1, 2003, in lieu of the education and training requirements under parts  
 22 (B) and (C) of this subsection, has completed the education requirements  
 23 for licensure as a specialist clinical social worker in effect on the day  
 24 immediately preceding the effective date of this act;

25 (F) for persons who apply for and are eligible for a temporary license  
 26 to practice as a specialist clinical social worker on the day immediately  
 27 preceding the effective date of this act, in lieu of the education and train-  
 28 ing requirements under parts (B), (C) and (D) of this subsection, has  
 29 completed the education and training requirements for licensure as a  
 30 specialist clinical social worker in effect on the day immediately preceding  
 31 the effective date of this act;

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

33 (H) has paid the application fee.

34 (2) A licensed specialist clinical social worker may engage in the social  
 35 work practice and is authorized to diagnose and treat mental disorders  
 36 specified in the edition of the diagnostic and statistical manual of mental  
 37 disorders of the American psychiatric association designated by the board  
 38 by rules and regulations.

39 (3) Notwithstanding any other provision of this subsection, a licensed  
 40 master social worker who has provided to the board an acceptable clinical  
 41 supervision plan for licensure as a specialist clinical social worker prior to  
 the effective date of this act shall be licensed as a specialist clinical social  
 worker under this act upon completion of the requirements in effect for

When a client has symptoms of a mental disorder, a licensed specialist clinical social worker shall consult with the client's primary care physician or psychiatrist to determine if there may be a medical condition or medication that may be causing or contributing to the client's symptoms of a mental disorder. A client may request in writing that such consultation be waived and such request shall be made a part of the client's record. A licensed specialist clinical social worker may continue to evaluate and treat the client until such time that the medical consultation is obtained or waived.

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1 the supervision of a licensed social worker when such information pertains  
 2 to criminal acts or violations of any law;

3 (3) when the person is a child under the age of 18 years and the  
 4 information acquired by the licensed social worker indicated that the child  
 5 was the victim or subject of a crime, the licensed social worker may be  
 6 required to testify fully in relation thereto upon any examination, trial or  
 7 other proceeding in which the commission of such a crime is a subject of  
 8 inquiry;

9 (4) (3) when the person waives the privilege by bringing charges  
 10 against the licensed social worker but only to the extent that such infor-  
 11 mation is relevant under the circumstances.

12 (b) *The confidential relations and communications between a licensed*  
 13 *master social worker's or a licensed specialist clinical social worker's client*  
 14 *are placed on the same basis as provided by law for those between an*  
 15 *attorney and an attorney's client.*

16 (b) (c) Nothing in this section or in this act shall be construed to  
 17 prohibit any licensed social worker from testifying in court hearings con-  
 18 cerning matters of adult abuse, adoption, child abuse, child neglect, or  
 19 other matters pertaining to the welfare of children or from seeking col-  
 20 laboration or consultation with professional colleagues or administrative  
 21 superiors, or both, on behalf of the client.

22 Sec. 15. K.S.A. 1998 Supp. 65-6319 is hereby amended to read as  
 23 follows: 65-6319. (a) ~~The following licensed social workers may diagnose~~

24 ~~and treat mental disorders classified in the diagnostic manuals commonly~~  
 25 ~~used as a part of accepted social work practice. (1) (a) A licensed specialist~~  
 26 ~~clinical social worker, and (2) (b) a licensed master social worker who~~  
 27 ~~performs diagnoses of mental disorders within the course of employment~~  
 28 ~~by a licensed community mental health center, a state facility authorized~~  
 29 ~~to provide psychotherapeutic services or a not-for-profit entity approved~~  
 30 ~~under subsection (e) of section 501 of the internal revenue code when~~  
 31 ~~such licensed master social worker is under the direction of (i) a person~~  
 32 ~~licensed to practice medicine and surgery; (ii) a licensed psychologist; or~~  
 33 ~~(iii) a licensed specialist clinical social worker.~~

34 (b) Nothing in this section shall be construed to authorize a licensed  
 35 social worker who under subsection (a) may diagnose mental disorders  
 36 classified in the diagnostic manuals commonly used as a part of accepted  
 37 social work practice to provide direction for licensed masters level psy-  
 38 chologists under K.S.A. 74-5262 and amendments thereto.

39 (c) This section shall be part of and supplemental to the provisions  
 40 of article 63 of chapter 65 of the Kansas Statutes Annotated and acts  
 41 amendatory of the provisions thereof and supplemental thereto *engages*  
 42 *in the practice of social work only under the direction of a licensed spe-*  
 43 *cialist clinical social worker, a licensed psychologist, a person licensed to*

specified in the edition of the diagnostic and statistical manual of  
 mental disorders of the American psychiatric association  
 designated by the board by rules and regulations

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1 practice medicine and surgery or a person licensed to provide mental  
2 health services as an independent practitioner and whose licensure allows  
3 for the diagnosis and treatment of mental disorders.

4 Sec. 16. K.S.A. 1998 Supp. 65-6402 is hereby amended to read as  
5 follows: 65-6402. As used in the marriage and family therapists licensure  
6 act:

7 (a) "Board" means the behavioral sciences regulatory board created  
8 under K.S.A. 74-7501 and amendments thereto.

9 (b) "Marriage and family therapy" means the assessment and treat-  
10 ment of cognitive, affective or behavioral problems within the context of  
11 marital and family systems and includes the diagnosis and treatment of  
12 mental disorders as authorized under the marriage and family therapists  
13 licensure act.

14 (c) "Licensed marriage and family therapist" means a person who  
15 engages in the practice of marriage and family therapy and who is licensed  
16 under this act except that on and after January 1, 2002, such person shall  
17 engage in the practice of marriage and family therapy only under the  
18 direction of a licensed clinical marriage and family therapist, a licensed  
19 psychologist, a person licensed to practice medicine and surgery or a  
20 person licensed to provide mental health services as an independent prac-  
21 titioner and whose licensure allows for the diagnosis and treatment of  
22 mental disorders.

23 (d) "Licensed clinical marriage and family therapist" means a person  
24 who engages in the independent practice of marriage and family therapy  
25 including the diagnosis and treatment of mental disorders specified in the  
26 edition of the diagnostic and statistical manual of mental disorders of the  
27 American psychiatric association designated by the board by rules and  
28 regulations and is licensed under this act.

29 Sec. 17. K.S.A. 1998 Supp. 65-6403 is hereby amended to read as  
30 follows: 65-6403. (a) On and after January 1, 1997, No person shall engage  
31 in the practice of marriage and family therapy or represent that such  
32 person is a licensed marriage and family therapist or a marriage and family  
33 therapist without having first obtained a license as a marriage and family  
34 therapist under the marriage and family therapist licensure act.

35 (b) On and after the effective date of this act, no person shall engage  
36 in the practice of marriage and family therapy as a clinical marriage and  
37 family therapist or represent that such person is a licensed clinical mar-  
38 riage and family therapist or is a clinical marriage and family therapist  
39 without having first obtained a license as a clinical marriage and family  
40 therapist under the marriage and family therapist licensure act.

41 (b) (c) Violation of this section is a class B misdemeanor.

42 Sec. 18. K.S.A. 1998 Supp. 65-6404 is hereby amended to read as  
3 follows: 65-6404. (a) An applicant for licensure as a marriage and family

When a client has symptoms of a mental disorder, a licensed master social worker shall consult with the client's primary care physician or psychiatrist to determine if there may be a medical condition or medication that may be causing or contributing to the client's symptoms of a mental disorder. A client may request in writing that such consultation be waived and such request shall be made a part of the client's record. A licensed master social worker may continue to evaluate and treat the client until such time that the medical consultation is obtained or waived.

Insert New Section and Renumber Sections:

A licensee under this act shall, at the beginning of a patient/therapist relationship, inform the patient of the level of such licensee's training and the title or titles and license or licenses of such licensee. As a part of such obligation, such licensee shall disclose whether such licensee has a masters degree or a doctoral degree. If such licensee has a doctoral degree, such licensee shall disclose whether or not such doctoral degree is a doctor of medicine degree or some other doctoral degree. If such licensee does not have a medical doctor's degree, such licensee shall disclose that the licensee is not authorized to practice medicine and surgery and is not authorized to prescribe drugs. As a part of such disclosure, such licensee shall advise the patient that certain mental disorders can have medical or biological origins, and that the patient should consult with a physician. Documentation of such disclosures to patient shall be made in the patient's record.

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1 payment of fees and completion of applicable continuing education  
2 requirements, shall be licensed as a licensed clinical marriage and family  
3 therapist by providing demonstration of competence to diagnose and treat  
4 mental disorders through at least two of the following areas acceptable to  
5 the board:

6 (a) Either (i) graduate coursework or (ii) passing a national, clinical  
7 examination;

8 (b) either (i) three years of clinical practice in a community mental  
9 health center, its contracted affiliate or a state mental hospital or (ii) three  
10 years of clinical practice in other settings with demonstrated experience  
11 in diagnosing or treating mental disorders; or

12 (c) attestation from one professional licensed to diagnose and treat  
13 mental disorders in independent practice or licensed to practice medicine  
14 and surgery that the applicant is competent to diagnose and treat mental  
15 disorders.

16 (3) A licensed clinical marriage and family therapist may engage in  
17 the independent practice of marriage and family therapy and is author-  
18 ized to diagnose and treat mental disorders specified in the edition of the  
19 diagnostic and statistical manual of mental disorders of the American  
20 psychiatric association designated by the board by rules and regulations.

21 On and after January 1, 2002, a licensed marriage and family therapist  
22 may diagnose and treat mental disorders specified in the edition of the  
23 diagnostic and statistical manual of mental disorders specified in the edi-  
24 tion of the diagnostic and statistical manual of mental disorders of the  
25 American psychiatric association designated by the board by rules and  
26 regulations only under the direction of a licensed clinical marriage and  
27 family therapist, licensed psychologist, person licensed to practice medi-  
28 cine and surgery or person licensed to provide mental health services as  
29 an independent practitioner and whose licensure allows for the diagnosis  
30 and treatment of mental disorders.

31 Sec. 19. K.S.A. 1998 Supp. 65-6407 is hereby amended to read as  
32 follows: 65-6407. (a) An applicant who meets the requirements for licens-  
33 sure pursuant to this act, has paid the license fee provided for by K.S.A.  
34 65-6411 and amendments thereto and has otherwise complied with the  
35 provisions of this act shall be licensed by the board.

36 (b) Licenses issued pursuant to this act shall expire 24 months from  
37 the date of issuance unless revoked prior to that time. A license may be  
38 renewed upon application and payment of the fee provided for by K.S.A.  
39 65-6411 and amendments thereto. The application for renewal shall be  
40 accompanied by evidence satisfactory to the board that the applicant has  
41 completed during the previous 24 months the continuing education re-  
42 quired by rules and regulations of the board. *As part of such continuing*  
43 *education, the applicant shall complete not less than six continuing edu-*

When a client has symptoms of a mental disorder, a licensed clinical marriage and family therapist shall consult with the client's primary care physician or psychiatrist to determine if there may be a medical condition or medication that may be causing or contributing to the client's symptoms of a mental disorder. A client may request in writing that such consultation be waived and such request shall be made a part of the client's record. A licensed clinical marriage and family therapist may continue to evaluate and treat the client until such time that the medical consultation is obtained or waived.

Insert new paragraph and "(4)"

When a client has symptoms of a mental disorder, a licensed marriage and family therapist shall consult with the client's primary care physician or psychiatrist to determine if there may be a medical condition or medication that may be causing or contributing to the client's symptoms of a mental disorder. A client may request in writing that such consultation be waived and such request shall be made a part of the client's record. A licensed marriage and family therapist may continue to evaluate and treat the client until such time that the medical consultation is obtained or waived.

Insert New Section and Renumber Sections:

A licensee under this act shall, at the beginning of a patient/therapist relationship, inform the patient of the level of such licensee's training and the title or titles and license or licenses of such licensee. As a part of such obligation, such licensee shall disclose whether such licensee has a masters degree or a doctoral degree. If such licensee has a doctoral degree, such licensee shall disclose whether or not such doctoral degree is a doctor of medicine degree or some other doctoral degree. If such licensee does not have a medical doctor's degree, such licensee shall disclose that the licensee is not authorized to practice medicine and surgery and is not authorized to prescribe drugs. As a part of such disclosure, such licensee shall advise the patient that certain mental disorders can have medical or biological origins, and that the patient should consult with a physician. Documentation of such disclosures to patient shall be made in the patient's record.

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- 1 (5) for application for licensure as a clinical marriage and family ther-
- 2 apist, not to exceed \$175;
- 3 (6) for renewal for licensure as a clinical marriage and family ther-
- 4 apist, not to exceed \$175;
- 5 (5) (7) for reinstatement of a license, not to exceed \$175;
- 6 (6) (8) for replacement of a license, not to exceed \$20; and
- 7 (7) (9) for late charges, not to exceed \$5 for each 30 days of delay
- 8 beyond the date the renewal application was to be made.

9 (b) Fees paid to the board are not refundable.

10 Sec. ~~21~~ 22. K.S.A. 74-5302 is hereby amended to read as follows:

11 74-5302. For the purpose of this act the following definitions shall apply:

12 (a) "Practice of psychology" means the application of established princi-

13 ples of learning, motivation, perception, thinking and emotional relation-

14 ships to problems of behavior adjustment, group relations and behavior

15 modification, by persons trained in psychology. The application of such

16 principles includes, but is not restricted to, counseling and the use of

17 psychological remedial measures with persons, in groups or individually,

18 having adjustment or emotional problems in the areas of work, family,

19 school and personal relationships; measuring and testing personality, in-

20 telligence, aptitudes, public opinion, attitudes and skills; the teaching of

21 such subject matter; and the conducting of research on problems relating

22 to human behavior, except that in all cases involving the care of the sick

23 and ill as defined by the laws of this state, the primary responsibility

24 devolves upon those licensed under the Kansas healing arts act. *The prac-*

25 *tice of psychology includes the diagnosis and treatment of mental disor-*

26 *ders specified in the edition of the diagnostic and statistical manual of*

27 *mental disorders of the American psychiatric association designated by*

28 *the board by rules and regulations*

29 (b) "Represents oneself to be a psychologist" means that a person

30 engages in the practice of psychology for a fee, monetary or otherwise,

31 or holds oneself out to the public by any title or description of services

32 incorporating the word "psychologic," "psychological," "psychologist" or

33 "psychology" and under such title or description offers to render or ren-

34 ders services to individuals, corporations or the public for a fee, monetary

35 or otherwise.

36 (c) "Board" means the behavioral sciences regulatory board created

37 by K.S.A. 74-7501 and amendments thereto.

38 (d) "License" means a license as a psychologist issued by the board.

39 (e) "Licensed psychologist" means a person licensed by the board

40 under the provisions of this act.

41 Sec. ~~22~~ 23. K.S.A. 74-5318 is hereby amended to read as follows:

42 74-5318. On or before the first day of April of alternate years, the board

43 shall mail to every psychologist licensed in Kansas; an application blank

If a licensed psychologist cannot make an independent diagnosis of a mental disorder, such psychologist shall consult with the client's primary care physician or psychiatrist to determine if there may be a medical condition or medication that may be causing or contributing to the client's symptoms of a mental disorder. A client may request in writing that such consultation be waived and such request shall be made a part of the client's record. A licensed psychologist may continue to evaluate and treat the client until such time that the medical consultation is obtained or waived.

Insert New Section and Renumber Sections:

A licensee under this act shall, at the beginning of a patient/therapist relationship, inform the patient of the level of such licensee's training and the title or titles and license or licenses of such licensee. As a part of such obligation, such licensee shall disclose whether such licensee has a masters degree or a doctoral degree. If such licensee has a doctoral degree, such licensee shall disclose whether or not such doctoral degree is a doctor of medicine degree or some other doctoral degree. If such licensee does not have a medical doctor's degree, such licensee shall disclose that the licensee is not authorized to practice medicine and surgery and is not authorized to prescribe drugs. As a part of such disclosure, such licensee shall advise the patient that certain mental disorders can have medical or biological origins, and that the patient should consult with a physician. Documentation of such disclosures to patient shall be made in the patient's record.

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1 for renewal, which shall contain space for insertion of information as  
 2 required for the application blank under K.S.A. 74-5317 and amendments  
 3 thereto, addressing the same in accordance with to the post office address  
 4 given at the last previous renewal. *In addition, the application for renewal*  
 5 *shall be accompanied by evidence satisfactory to the board that the ap-*  
 6 *plicant has completed, during the previous 24 months, the continuing*  
 7 *education required by rules and regulations of the board. As part of such*  
 8 *continuing education, a licensed psychologist shall complete not less than*  
 9 *six continuing education hours relating to diagnosis and treatment of men-*  
 10 *tal disorders and not less than three continuing education hours of pro-*  
 11 *fessional ethics.*

12 **Sec. 24.** K.S.A. 74-5323 is hereby amended to read as follows:  
 13 74-5323. (a) The confidential relations and communications be-  
 14 tween a licensed psychologist and the psychologist's client are  
 15 placed on the same basis as provided by law for those between an  
 16 attorney and the attorney's client. *Except as provided in subsection*  
 17 *(b), nothing in this act shall be construed to require such privileged*  
 18 *communications to be disclosed.*

19 (b) Nothing in this section or in this act shall be construed to  
 20 prohibit any licensed psychologist from testifying in court hearings  
 21 concerning matters of adult abuse, adoption, child abuse, child  
 22 neglect, or other matters pertaining to the welfare of children or  
 23 from seeking collaboration or consultation with professional col-  
 24 leagues or administrative superiors, or both, on behalf of a client.

25 **Sec. 23: 25.** K.S.A. 1998 Supp. 74-5361 is hereby amended to read  
 26 as follows: 74-5361. As used in this act:

27 (a) "Practice of psychology" shall have the meaning ascribed thereto  
 28 in K.S.A. 74-5302 and amendments thereto.

29 (b) "Board" means the behavioral sciences regulatory board created  
 30 by K.S.A. 74-7501 and amendments thereto.

31 (c) "Licensed masters level psychologist" means a person licensed by  
 32 the board under the provisions of this act.

33 (d) "~~Licensed clinical masters level psychologist~~" means a person li-  
 34 censed by the board under this act who engages in the independent prac-  
 35 tice of ~~clinical~~ masters level psychology including the diagnosis and treat-  
 36 ment of mental disorders specified in the edition of the diagnostic and  
 37 statistical manual of mental disorders of the American psychiatric asso-  
 38 ciation designated by the board by rules and regulations.

39 (d) (e) "Masters level psychology" means the practice of psychology  
 40 pursuant to the restrictions set out in K.S.A. 74-5362 and amendments  
 41 thereto and includes the diagnosis and treatment of mental disorders as  
 42 authorized under K.S.A. 74-5361 et seq.

43 **Sec. 24: 26.** K.S.A. 1998 Supp. 74-5362 is hereby amended to read

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[correct cite]

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1 as follows: 74-5362. (a) Any person who is licensed under the provisions  
 2 of this act as a licensed masters level psychologist shall have the right to  
 3 practice *psychology* only insofar as such practice is part of the duties of  
 4 such person's paid position and is performed solely on behalf of the em-  
 5 ployer, so long as such practice is under the direction of a *licensed clinical*  
 6 ~~masters level psychologist~~, a *licensed psychologist*, a person licensed to  
 7 practice medicine and surgery or a person licensed to provide mental  
 8 health services as an independent practitioner and whose licensure allows  
 9 for the diagnosis and treatment of *psychological mental disorders*.

10 (b) A licensed masters level psychologist may use the title licensed  
 11 masters level psychologist and the abbreviation LMLP but may not use  
 12 the title licensed psychologist or psychologist. A *licensed clinical masters*  
 13 ~~level psychologist~~ may use the title *licensed clinical masters level psy-*  
 14 ~~chologist~~ and the abbreviation ~~LMLP~~ but may not use the title licensed  
 15 *psychologist or psychologist*.

16 Sec. 25: 27. K.S.A. 1998 Supp. 74-5363 is hereby amended to read  
 17 as follows: 74-5363. (a) Any person who desires to be licensed under this  
 18 act shall apply to the board in writing, on forms prepared and furnished  
 19 by the board. Each application shall contain appropriate documentation  
 20 of the particular qualifications required by the board and shall be accom-  
 21 panied by the required fee.

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

- 29 (1) Is at least 21 years of age;
- 30 (2) has satisfied the board that the applicant is a person who merits  
31 public trust;
- 32 (3) has received at least 60 graduate hours including a master's de-  
33 gree in clinical psychology based on a program of studies in psychology  
34 from an educational institution having a graduate program in psychology  
35 consistent with state universities of Kansas; or until July 1, 2003, has  
36 received at least a master's degree in psychology and during such master's  
37 or post-master's coursework completed a minimum of 12 semester hours  
38 or its equivalent in psychological foundation courses such as, but not  
39 limited to, philosophy of psychology, psychology of perception, learning  
40 theory, history of psychology, motivation, and statistics and 24 semester  
41 hours or its equivalent in professional core courses such as, but not limited  
42 to, two courses in psychological testing, psychopathology, two courses in  
43 psychotherapy, personality theories, developmental psychology, research

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When a client has symptoms of a mental disorder, a licensed masters level psychologist shall consult with the client's primary care physician or psychiatrist to determine if there may be a medical condition or medication that may be causing or contributing to the client's symptoms of a mental disorder. A client may request in writing that such consultation be waived and such request shall be made a part of the client's record. A licensed masters level psychologist may continue to evaluate and treat the client until such time that the medical consultation is obtained or waived.

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Insert New Section and Renumber Sections:

A licensee under this act shall, at the beginning of a patient/therapist relationship, inform the patient of the level of such licensee's training and the title or titles and license or licenses of such licensee. As a part of such obligation, such licensee shall disclose whether such licensee has a masters degree or a doctoral degree. If such licensee has a doctoral degree, such licensee shall disclose whether or not such doctoral degree is a doctor of medicine degree or some other doctoral degree. If such licensee does not have a medical doctor's degree, such licensee shall disclose that the licensee is not authorized to practice medicine and surgery and is not authorized to prescribe drugs. As a part of such disclosure, such licensee shall advise the patient that certain mental disorders can have medical or biological origins, and that the patient should consult with a physician. Documentation of such disclosures to patient shall be made in the patient's record.

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1 methods, social psychology; or has passed comprehensive examinations  
 2 or equivalent final examinations in a doctoral program in psychology and  
 3 during such graduate program completed a minimum of 12 semester  
 4 hours or its equivalent in psychological foundation courses such as, but  
 5 not limited to, philosophy of psychology, psychology of perception, learn-  
 6 ing theory, history of psychology, motivation, and statistics and 24 se-  
 7 mester hours or its equivalent in professional core courses such as, but  
 8 not limited to, two courses in psychological testing, psychopathology, two  
 9 courses in psychotherapy, personality theories, developmental psychol-  
 10 ogy, research methods, social psychology;

11 (4) has completed 750 clock hours of academically supervised prac-  
 12 ticum in the master's degree program or 1,500 clock hours of postgrad-  
 13 uate supervised work experience;

14 (5) (A) has completed 2,000 clock hours of postgraduate work ex-  
 15 perience under the supervision of a licensed psychologist or a currently  
 16 licensed master's level psychologist with three years' experience if such  
 17 applicant commenced such postgraduate work experience prior to July 1,  
 18 1998; or (B) if such applicant commenced such postgraduate work ex-  
 19 perience on or after July 1, 1998; has completed 4,000 clock hours of  
 20 postgraduate work experience under the supervision of a licensed psy-  
 21 chologist or a currently licensed master's level psychologist with three  
 22 years' experience;

23 (6) for applicants on and after January 1, 1997; has passed an exami-  
 24 nation approved by the board with a minimum score set by the board by  
 25 rules and regulations at 10 percentage points below the score set by the  
 26 board for licensed psychologists.

27 (c) (1) Applications for licensure as a clinical ~~masters level psychol-~~  
 28 ~~ogist~~ shall be made to the board on a form and in the manner prescribed  
 29 by the board. Each applicant shall furnish evidence satisfactory to the  
 30 board that the applicant:

31 (A) Is licensed by the board as a licensed masters level psychologist  
 32 or meets all requirements for licensure as a masters level psychologist;

33 (B) has completed 15 credit hours as part of or in addition to the  
 34 requirements under subsection (b) supporting diagnosis or treatment of  
 35 mental disorders with use of the American psychiatric association's di-  
 36 agnostic and statistical manual, through identifiable study of the following  
 37 content areas: Psychopathology, diagnostic assessment, interdisciplinary  
 38 referral and collaboration, treatment approaches and professional ethics;

39 (C) has completed a graduate level supervised clinical practicum of  
 40 supervised professional experience including psychotherapy and assess-  
 41 ment with individuals, couples, families or groups, integrating diagnosis  
 42 and treatment of mental disorders with use of the American psychiatric  
 association's diagnostic and statistical manual, with not less than 350

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1 hours of direct client contact or additional postgraduate supervised ex-  
 2 perience as determined by the board;

3 (D) has completed not less than two years of postgraduate supervised  
 4 professional experience in accordance with a clinical supervision plan ap-  
 5 proved by the board of not less than 4,000 hours of supervised professional  
 6 experience including at least 1,500 hours of direct client contact conduct-  
 7 ing psychotherapy and assessments with individuals, couples, families or  
 8 groups and not less than 150 hours of clinical supervision, including not  
 9 less than 50 hours of person-to-person individual supervision, integrating  
 10 diagnosis and treatment of mental disorders with use of the American  
 11 psychiatric association's diagnostic and statistical manual;

12 (E) for persons earning a degree under subsection (b) prior to July 1,  
 13 2003, in lieu of the education requirements under parts (B) and (C) of  
 14 this subsection, has completed the education requirements for licensure  
 15 as a licensed masters level psychologist in effect on the day immediately  
 16 preceding the effective date of this act;

17 (F) for persons who apply for and are eligible for a temporary permit  
 18 to practice as a licensed masters level psychologist on the day immediately  
 19 preceding the effective date of this act, in lieu of the education and training  
 20 requirements under parts (B), (C) and (D) of this subsection, has com-  
 21 pleted the education and training requirements for licensure as a masters  
 22 level psychologist in effect on the day immediately preceding the effective  
 23 date of this act;

24 (G) has passed an examination approved by the board with the same  
 25 minimum passing score as that set by the board for licensed psychologists;  
 26 and

27 (H) has paid the application fee.

28 (2) A person who was licensed or registered as a masters level psy-  
 29 chologist in Kansas at any time prior to the effective date of this act and  
 30 whose last license or registration in Kansas prior to the effective date of  
 31 this act was not suspended or revoked, upon application to the board,  
 32 payment of fees and completion of applicable continuing education  
 33 requirements, shall be licensed as a licensed clinical ~~masters level psy-~~  
 34 ~~chologist~~ by providing demonstration of competence to diagnose and treat  
 35 mental disorders through at least two of the following areas acceptable to  
 36 the board:

37 (a) Either (i) graduate coursework or (ii) passing a national, clinical  
 38 examination;

39 (b) either (i) three years of clinical practice in a community mental  
 40 health center, its contracted affiliate or a state mental hospital or (ii) three  
 41 years of clinical practice in other settings with demonstrated experience  
 42 in diagnosing or treating mental disorders; or

43 (c) attestation from one professional licensed to diagnose and treat

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1 mental disorders in independent practice or licensed to practice medicine  
2 and surgery that the applicant is competent to diagnose and treat mental  
3 disorders.

4 (3) A licensed clinical ~~masters level psychologist~~ may engage in the  
5 independent practice of masters level psychology and is authorized to  
6 diagnose and treat mental disorders specified in the edition of the diag-  
7 nostic and statistical manual of mental disorders of the American psychi-  
8 atric association designated by the board by rules and regulations.

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When a client has symptoms of a mental disorder, a licensed clinical psychotherapist shall consult with the client's primary care physician or psychiatrist to determine if there may be a medical condition or medication that may be causing or contributing to the client's symptoms of a mental disorder. A client may request in writing that such consultation be waived and such request shall be made a part of the client's record. A licensed clinical psychotherapist may continue to evaluate and treat the client until such time that the medical consultation is obtained or waived.

9 (c) (d) The board shall adopt rules and regulations establishing the  
10 criteria which an educational institution shall satisfy in meeting the  
11 requirements established under item (3) of subsection (b). The board may  
12 send a questionnaire developed by the board to any educational institu-  
13 tion for which the board does not have sufficient information to deter-  
14 mine whether the educational institution meets the requirements of item  
15 (3) of subsection (b) and rules and regulations adopted under this section.  
16 The questionnaire providing the necessary information shall be com-  
17 pleted and returned to the board in order for the educational institution  
18 to be considered for approval. The board may contract with investigative  
19 agencies, commissions or consultants to assist the board in obtaining in-  
20 formation about educational institutions. In entering such contracts the  
21 authority to approve educational institutions shall remain solely with the  
22 board.

23 Sec. 26: 28. K.S.A. 1998 Supp. 74-5365 is hereby amended to read  
24 as follows: 74-5365. (a) The application, issuance of a new license and  
25 renewal fee for licensure under this act shall be fixed by the board by  
26 rules and regulations in an amount not to exceed \$200.

27 (b) Fees paid to the board are not refundable.

28 (c) The application for renewal shall be accompanied by evidence  
29 satisfactory to the board that the applicant has completed, during the  
30 previous 24 months, the continuing education required by rules and reg-  
31 ulations of the board. As part of such continuing education, a licensed  
32 ~~masters level psychologist and a licensed clinical masters level psychologist~~  
33 shall complete not less than six continuing education hours relating to  
34 diagnosis and treatment of mental disorders and not less than three con-  
35 tinuing education hours of professional ethics.

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36 Sec. 27: 29. K.S.A. 1998 Supp. 74-5369 is hereby amended to read  
37 as follows: 74-5369. An application for licensure under K.S.A. 74-5361 to  
38 74-5371, inclusive, and amendments thereto, may be denied or a license  
39 granted under this act may be suspended, limited, revoked or not re-  
40 newed by the board upon proof that the applicant or licensed masters  
41 level psychologist licensee:

42 (a) Has been convicted of a felony involving moral turpitude;

43 (b) has been found guilty of fraud or deceit in connection with the

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1 rendering of professional services or in establishing such person's quali-  
2 fications under this act;

3 (c) has aided or abetted a person not licensed as a psychologist, li-  
4 censed under this act or an uncertified assistant, to hold oneself out as a  
5 psychologist in this state;

6 (d) has been guilty of unprofessional conduct as defined by rules and  
7 regulations of the board;

8 (e) has been guilty of neglect or wrongful duties in the performance  
9 of duties; or

10 (f) has had a registration, license or certificate as a masters level psy-  
11 chologist revoked, suspended or limited, or has had other disciplinary  
12 action taken, or an application for a registration, license or certificate  
13 denied, by the proper regulatory authority of another state, territory, Dis-  
14 trict of Columbia or another country, a certified copy of the record of the  
15 action of the other jurisdiction being conclusive evidence thereof.

16 Administrative proceedings under K.S.A. 74-5361 to 74-5371, inclu-  
17 sive, and amendments thereto shall be conducted in accordance with the  
18 Kansas administrative procedure act. Judicial review and civil enforce-  
19 ment of agency actions under K.S.A. 74-5361 to 74-5371, inclusive, and  
20 amendments thereto shall be in accordance with the act for judicial review  
21 and civil enforcement of agency actions.

22 Sec. 28: 30. K.S.A. 1998 Supp. 74-5371 is hereby amended to read  
23 as follows: 74-5371. (a) No person shall engage in the practice of masters  
24 level psychology or represent oneself as a licensed masters level psychol-  
25 ogist or use the abbreviation LMLP or use any word, letter, signs, figures  
26 or devices to indicate that such person using the same is a licensed masters  
27 level psychologist unless such person holds a valid license as a licensed  
28 masters level psychologist.

29 (b) No person shall engage in the practice of ~~clinical~~ masters level  
30 psychology or represent oneself as a licensed clinical ~~masters level psy-~~  
31 ~~chologist~~ or use the abbreviation ~~LMLP~~ or use any word, letter, signs,  
32 figures or devices to indicate that such person using the same is a licensed  
33 clinical ~~masters level psychologist~~ unless such person holds a valid license  
34 as a licensed clinical ~~masters level psychologist~~.

35 (b) (c) A violation of this section is a class C misdemeanor.

36 Sec. 29: 31. K.S.A. 1998 Supp. 74-5372 is hereby amended to read  
37 as follows: 74-5372. (a) The confidential relations and communications  
38 between a licensed masters level psychologist and such psychologist's cli-  
39 ent are placed on the same basis as provided by law for those between  
40 an attorney and an attorney's client.

41 (b) The confidential relations and communications between a licensed  
42 clinical ~~masters level psychologist~~ and such ~~psychologist's~~ client are placed  
43 on the same basis as provided by law for those between an attorney and

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1 *an attorney's client.*

2 (c) Nothing in this section or in this act shall be construed to  
 3 prohibit any licensed masters level psychologist or licensed clinical  
 4 ~~masters level psychologist~~ from testifying in court hearings concerning  
 5 matters of adult abuse, adoption, child abuse, child neglect,  
 6 or other matters pertaining to the welfare of children or  
 7 from seeking collaboration or consultation with professional col-  
 8 leagues or administrative superiors, or both, on behalf of the  
 9 client.

10 Sec. 30: 32. K.S.A. 65-5805, 65-6302, 65-6308, 65-6313, 65-6315,  
 11 74-5302 and, 74-5318 and 74-5323 and K.S.A. 1998 Supp. 65-5802, 65-  
 12 5803, 65-5804, 65-5806, 65-5808, 65-5809, 65-5810, 65-5812, 65-6306,  
 13 65-6319, 65-6402, 65-6403, 65-6404, 65-6407, 65-6410, 65-6411, 74-  
 14 5361, 74-5362, 74-5363, 74-5365, 74-5369, 74-5371 and 74-5372 are  
 15 hereby repealed.

16 Sec. 31: 33. This act shall take effect and be in force from and after  
 17 January July 1, 2000, and its publication in the statute book.

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