

MINUTES OF THE HOUSE COMMITTEE ON HEALTH AND HUMAN SERVICES.

The meeting was called to order by Chairperson Garry Boston at 1:30 p.m. on March 15, 2001 in Room 210 Memorial Hall

All members were present except: Representative Geraldine Flaharty, Excused
Representative Peggy Palmer, Excused

Committee staff present: Dr. Bill Wolff, Kansas Legislative Research Department
Renae Jefferies, Revisor of Statute's Office
June Evans, Secretary

Conferees appearing before the committee: Dr. Steven Haught, President, Kansas Dental Board
Terri Roberts, Executive Director, KS State Nursing Assn.

Others attending: See Attached Sheet

The Chairperson stated when we stopped yesterday we were in the middle of **SB 239 - Kansas trauma system plan**. We will continue the hearing today and Terri Roberts distributed testimony yesterday, but has new testimony today that has been passed out.

Terri Roberts, Executive Director, Kansas State Nursing Association, testified as an opponent to **SB 239**, stating she had revised her testimony. This is a very important bill as it eliminates the sunset provision regarding the Advisory Committee of Trauma. Prior to the legislation enacting this Committee two years ago, all of the professions and the institutions involved with the delivery of trauma care spent three years developing the basic framework for a trauma system for our state. The bill as proposed added a representative from each of the 6 regional trauma councils to the advisory committee and authorized the Governor to provide for terms of appointment that were staggered.

The Governor's Office recommended several major policy changes.

This bill as it was introduced in the Senate and then the House did basically three things: (1) It removed the sunset provision to make it clear that the Advisory Committee would continue (this was a statutory clarification only, it was always the intent that it continues its work). (2) It made a provision to require the Governor's office to set the terms for all those serving on the Advisory Committee. (3) It eliminated the annual reports to be made to the Health Committees of the Legislature (Attachment 1).

Staff provided a revised Comparison of **SB 239** introduced and proposed amendments (Attachment 2).

There being no questions, the Chairperson closed the hearing on **SB 239**.

The Chairperson opened the hearing on **SB 160 - Dental practices act; licensure and fees** and announced after that would turn to final action and **SB 239** would be one considered for final action. We ordinarily don't work a bill the same day we have the hearing, but have no problem with doing that as long as the committee agrees to it.

Dr. Bill Wolff gave a briefing on **SB 160** stating there needed to be a technical change on Page 3, line 36 to add a \$ before 125.

Dr. Steven Haught, President, Kansas Dental Board, testified as a proponent to **SB 160**, stating they had offered a 25% increase in fees and language deletions. In an effort to permit reentry into the hygiene profession by way of a continuing education, custom tailored university course, the dental board found an age qualification part of the definition of retirement that made reentry only possible for former hygienists 65 years of age or older. This was not the intent, and a statutory authority is needed to have retirement not age specific. The last change included is where a special permit is extended to "licensed dental

CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON HEALTH AND HUMAN SERVICES, Room 210, Memorial Hall at 1:30 p.m. on March 15, 2001.

hygienists” to provide dental screenings (Attachment 3).

Kevin J. Robertson, CAE, Executive Director, Kansas Dental Association, distributed written testimony in support of **SB 160** (Attachment 4).

The Chairperson closed the hearing on **SB 160**. The Chairperson asked if the committee had any objections to addressing **SB 214 Regulation and Licensing of Crematories** which we worked yesterday, then working **SB 186** and **SB 239**.

Representative Welshimer stated she had objection with what the law might allow the Mortuary Arts Board to only license mortuaries to perform cremation.

The Chairperson stated he was only asking if there was objection to working the bills.

Representative DeCastro moved and Representative Long seconded the accept New Section 8 requested by the Mortuary Arts Board. The motion carried (Attachment 5).

Representative Long moved and Representative Lightner seconded to accept balloon to remove on Page 2, line 43 “in this” and all of line 1 on Page 3 replace with “unless the crematory is licensed under this act”. The motion carried.

Representative Welshimer stated if this were law, whether they do it or not, it would be legal for the Board of Mortuary Arts to say only crematories that are a part of a mortuary can cremate.

Representative Kirk moved a conceptual motion and Representative Welshimer seconded an amendment that any crematory whether attached to a funeral establishment or not that meets the criteria established by the board and by statute shall be eligible to be licensed under this act.

Representative DeCastro stated she was in opposition of Representative Kirk’s motion as this Board as a professional Board to regulate themselves, we need to trust their judgement and not enter rules and regs because if we start entering rules and regs that Boards put in place am not sure that is where we want to go as legislators.

Representative Showalter asked Representative Kirk if on Page 1 line 43 and Page 2 lines 1, 2 and 3... doesn’t that address this issue?

Representative Kirk stated her only concern was to not have address connected to a mortuary. Do not want to preclude existing crematories that are not connected to a mortuary.

The Chairperson called a question on Kirk’s amendment. Yes 6 and No 7. The motion failed, back on the bill.

Representative Gordon moved and Representative Patterson seconded on Page 1, to delete the last sentence of (f), “such chambers shall be used exclusively for the cremation of human remains.” The motion carried.

Representative Storm moved and Representative Long seconded that New Section 6. be consistent and add “potentially hazardous implants”. The motion carried.

Representative Long moved and Representative DeCastro seconded to move **SB 214** out favorably as amended. The motion carried.

Representative Long moved and Representative Morrison seconded to amend **HB 2227** into **SB 186** and move out favorably. The motion carried.

CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON HEALTH AND HUMAN SERVICES, Room 210, Memorial Hall at 1:30 p.m. on March 15, 2001.

The Chairperson stated that **SB 118 - Pilot program for fetal alcohol syndrome** would have a hearing on Tuesday, March 20 so would like to work **SB 239** today if possible, and if not could do it March 19. What is the committee's pleasure?

The Committee agreed to work it.

Representative DeCastro moved and Representative Long seconded to move **SB 239** out favorably.

Staff stated there was a technicality as it came from the Senate and needed to change to size of the committee on Page 2, line 30 change "eight" to "twelve".

Representative DeCastro moved and Representative Long seconded a substitute motion to include the technical amendment to change "eight" to "twelve".

Representative Showalter stated the bill did not set out specifically the terms and the amendment brought forward by the Governor set this out clearly and expanded the board so will have to speak against this motion even though am in favor of the bill. Like the proposed bill but believe the bill would be better with some of the proposed amendments and would like to have time to look at them.

The Chairperson stated would suspend work as there are concerns on **SB 239** and will pick up Monday if we have a meeting.

The meeting adjourned at 3:00 p.m.



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March 15, 2001

S.B. 239 KANSAS TRAUMA SYSTEM

Chairperson Boston and members of the House Health and Human Services Committee, my name is Terri Roberts R.N. and I am here today representing the KANSAS STATE NURSES ASSOCIATION (KSNA). KSNA is the professional organization for registered nurses in the state and has been an active supporter of the work towards a comprehensive statewide trauma system.

KSNA supports the very significant provision of S.B. 239 which eliminates the sunset provision regarding the Advisory Committee of Trauma. Prior to the legislation enacting this Committee two years ago, all of the professions and the institutions involved with the delivery of trauma care spent three years developing the basic framework for a trauma system for our state. It is through the Advisory Committee that we are making progress in implementing the system for better trauma care for Kansas citizens, and we ask for your support to continue this most important work. The bill as proposed added a representative from each of the 6 regional trauma councils to the advisory committee and authorized the Governor to provide for terms of appointment that were staggered.

Yesterday you received changes recommended to this legislation from the Governor's Office. Those changes included several major policy changes being asked of this committee.

This bill as it was introduced in the Senate and then the House did basically three things:

it removed the sunset provision to make it clear that the Advisory Committee would continue (this was a statutory clarification only, it was always the intent that it continue its work) and secondly

it made a provision to require the Governor's office to set the terms for all those serving on the Advisory Committee and it

it eliminated the annual reports to be made to the Health Committees of the Legislature.

This bill was one of the five that the Senate Public Health and Welfare Committee sent over for your consideration and it passed out of the Senate Public Health and Welfare Committee on the same day the hearing was held. We believe that the issue of establishing a statewide trauma plan is one of great significance to Kansans and do not believe that adding more elements of "political considerations" are needed or warranted. The organizations involved in this process appear to be committed to moving forward and while we do not think the proposed changes will stop the forward movement, it may inhibit the momentum.

The mission of the Kansas State Nurses Association is to promote professional nursing, to provide a unified voice for nursing in Kansas and to advocate for the health and well-being of all people.

Constituent of The American Nurses Association

HC HS
3-15-01
Atech # 1

You now have in front of you a proposal from the Governor's Office that includes several significant policy changes for this advisory board, and probably most importantly the outcome that the current advisory board will be replaced through a new appointment process. As a reminder, this Advisory Board on Trauma is strictly advisory in nature, advising the Secretary of Health and Environment (already a Cabinet level Governor appointee)

The proposed changes are:

The adding of a representative from an Ambulance Service, and the addition of 2 more legislators. Currently EMS Service and Ambulance Service organizations recommend names to the Governor for one appointment, this presumably would eliminate the "competition" for the position by allowing one from each category to be appointed. There are two legislative appointees currently on the Trauma Advisory Committee Jene Vickrey (Republican appointed by the House Speaker) and Senator Chris Steinegar (Democrat appointed by the President of the Senate).

The 6 regional advisory committees will now be required to submit the names of three individuals to the Governor's Office, for appointment by the Governor. The advisory committees are still on the drawing board and it was anticipated that as they each come to fruition that they would appoint or elect a representative to be their representative to the Advisory Committee.

The three state professional organizations KSNA, the Kansas Emergency Medical Services Association and Kansas Emergency Medical Technician Association will now submit names to the Governor for consideration and the Governor will make the appointments. These three organizations currently appoint their own representatives to the Committee. (Note: KSNA's direct appointments to the Committee were previously called into question when this Advisory Committee was created, at that time we, in this committee offered to make it consistent with the other organizations---this committee rejected that offer)

The Governor will not be required to select any of the nominees from any of the entities required to submit names for consideration. The "shall" language in current statute is being changed to only require that the list of nominees be considered by the Governor.

It is very important that this bill go to the Governor and be signed. Will he sign it without these amendments, I don't know. I do know that Governor Graves is very very reluctant to issue a veto on any bill, at least that has been his past pattern.

The supporters of S.B. 239 wanted three relatively simple items changed in this statute. As one of those supporters we ask that you vote this bill out of committee as it has been sent over by the Senate, with these three simple changes made. If you do consider the more substantive and extensive changes proposed by the Governor's Office, please consider "requiring" that they appoint from the respective lists submitted by the health care organizations.

Thank you for your support of their work to date and,
we hope that you will vote in favor of S.B. 239.

Comparison of SB 239 Introduced and Proposed Amendments

Members

Current S239	Proposed
21 members	24 members
2 Mds	Same
1 DO	Same
3 hospital reps	Same
2 RNs	Same
2 ambulance attendants	Same
1 KDHE rep	Secretary KDHE or designee
1 EMS based rep	Chair of EMS board or designee
1 ambulance service administrator	2 ambulance service administrators
6 reps, Regional Trauma Councils	Same
2 legislators	4 legislators

Appointments

Current S239	Proposed
The designated professional associations submit lists of Mds, DO, hospital reps and ambulance service administrator from which the Governor is required to appoint	Professional Associations submit lists of nominees for position but Governor not required to appoint from names on list
Two RNs appointed by their professional associations	Professional Association submits nominees but Governor not required to appoint from nominees
Two ambulance attendants appointed by their professional associations	Professional Associations submit nominees but Governor not required to appoint from nominees
KDHE rep appointed by Secretary of KDHE	Secretary of KDHE or designee
EMS rep appointed by board	Chairperson of EMS board or designee
Ambulance service administrator appointed from a list of nominees submitted by professional associations	Professional Associations submit nominees but Governor not required to appoint from nominees
Regional Trauma Council appoint six Council reps	Regional Trauma Council nominates, Governor not required to appoint from nominees
Two legislators, one appointed by Speaker and one by President	Four legislators: Chairperson and ranking minority member or designees from House Health and Human Services committee and Chairperson and ranking minority member or designee from Senate Public Health and Welfare Committee

March 15, 2001

H & HS
3-15-01
Atch #2

STATE OF KANSAS



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KANSAS DENTAL BOARD

Legislative Testimony – SB 160

Stephen R. Haught, President
March 15, 2001

As the State Board to protect the public in dental matters, we stand in support of the bill we have offered that would authorize a 25% increase in fees and language deletions. This statutory authority to increase the fees for license confirmation may be utilized in the future when on-line license renewal is a reality. The fee increase would permit a credit card/on-line user charge and also some upward change to the registration fee. There is no current plan to raise license fees.

In an effort to permit reentry into the hygiene profession by way of a continuing education, custom tailored university course, the dental board found an age qualification part of the definition of retirement that made reentry only possible for former hygienists 65 years of age or older. This was not our intent, and we need your statutory authority to have retirement not age specific. We ask for removal of the age label so we can assist the return to the profession for the hygienists who have stopped working and permitted their license to expire for a period of time. The age qualification would be applicable to the dental license holder, too.

The last change we include in this “clean-up” request focuses on the complicating details in K.S.A. 65-1456 (f) where a special permit is extended to “licensed dental hygienists” to provide dental screenings. This permit is without supervision of a specific dentist, but specific approval of the dental board. We propose eliminating the requirement that the hygienist must be an employee of the State of Kansas, or any subdivision thereof, and that the screenings must be conducted at any public institution or facility under the supervision of the governing body of such public institution or facility. In addition, each request for a permit is board evaluated but not tied to an annual renewal, rather the biennial renewal as in the regular license cycle. I feel this will be a positive step for access to care and the dental report card grade, but most importantly to directly help some person access individual care.

H + HS
3-15-01
Atch #3



KANSAS DENTAL ASSOCIATION

Date: March 15, 2001

To: House Committee on Health and Human Services

From: Kevin J. Robertson, CAE
Executive Director

Re: **SB 160 – Dental Practice Act**

Chairman Boston and members of the Committee I am Kevin Robertson, executive director of the Kansas Dental Association (KDA) which represents about 80% of Kansas' practicing dentists. I am here today to testify in support of SB 160. The KDA has no concerns with SB 160 as presented to you by the Kansas Dental Board.

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H&HS
3-15-01
Atch #4

New Sec. 8. This act shall be construed and interpreted as a comprehensive cremation statute and the provisions of this act shall take precedence over any existing conflicting Kansas laws that govern the handling and disposition of dead human bodies and human remains that do not specifically address cremation when cremation is requested.

HcHS
3-15-01
Atch # 5