Approved:	3-28-01	
	Date	

MINUTES OF THE SENATE PUBLIC HEALTH AND WELFARE.

The meeting was called to order by Chairperson Senator Susan Wagle at 1:30 p.m. on February 6, 2001 in Room 231-N of the Capitol.

All members were present except:

Committee staff present:

Ms. Emalene Correll, Legislative Research Department

Ms. Renae Jefferies, Revisor of Statutes Ms. Lisa Montgomery, Revisor of Statutes Ms. Margaret Cianciarulo, Committee Secretary

Conferees appearing before the committee:

Others attending:

See Attached Guest List

Legislative Overview on Bills

Chairperson Wagle opened the meeting announcing that the Legislative Research Staff would brief the Committee on credentialing issues. Ms. Emalene Correll introduced Kansas Statutes 65-5001, Chapter 65, Public Health, Article 50, credentialing. There was nothing offered in writing except three handouts, copies of which are (Attachments #1 and 2,) attached hereto and incorporated into the Minutes by reference. A third handout is filed in Chairperson Wagle's office.

In reference to Attachment #1, she mentioned that the Secretary appoints the Technical Committee who submits their findings after holding a viewing meeting, an analysis meeting, and holds public hearings, to the KDHE Secretary.

Ms Correll stated an enormous amount of consumers have moved to alternative providers that have not yet been recognized. The bad thing is that people are not telling their primary physician that they are using these alternative methods. The traditional providers now need to ask their patients. (Ex. Is the patient taking any medication not prescribed by their primary?)

Regarding <u>SB 122</u>, Ms. Correll stated that consumers have a right to choose. Acupuncture is recognized, but it is too early to see if these methods are valid.

Ms. Correll stood for questions. Senators Barnett, Steineger, Praeger, and Wagle asked questions ranging from the soybean discussion in the Utility Committee, third party payment to a story on out patient surgery that was relayed by Ms. Correll.

Adjournment

As there was no further discussion, the Chairperson thanked Ms. Correll for her review. The meeting was adjourned at 2:23 p.m.

The next meeting is scheduled for February 7, 2001

SENATE PUBLIC HEALTH AND WELFARE COMMITTEE

GUEST LIST

DATE: Juellay, Sebruary 6

NAME	REPRESENTING
Mike Burgess	Kearney Law Office
Mike Burgess	Burgess & Associates
Marla Rhoden	KD1+E
Todd Henderson	KPhA
CINDA CROUPHER	
Hath Damron	AMTA-Hansas
Soft Bonner	DoB
Seth Bridge	Sen. Brungerde
Julio Land	How & West
Shere &	KCA
Harry Buening	Sd of Healing Arts.
Michelles Leterson	PPAG
Roberca Carizle	Sen Jamet
1 an Bell	KHA





INK Home > Government > Legislative > Kansas Statutes > Kansas Statute No. 65-5001

65-5001

Chapter 65.—PUBLIC HEALTH Article 50.—CREDENTIALING

65-5001. Credentialing health care personnel; definitions. As used in this act unless the context requires otherwise, the following words and phrases shall have the meanings respectively ascribed to them herein:

- (a) "Credentialing" or "credentialed" means the formal recognition of professional or technical competence through the process of registration, licensure or other statutory regulation.
- (b) "Certification" means the process by which a nongovernmental agency or association or the federal government grants recognition to an individual who has met certain predetermined qualifications specified by the nongovernmental agency or association or the federal government.
- (c) "Registration" means the process by which the state identifies and lists on an official roster those persons who meet predetermined qualifications and who will be the only persons permitted to use a designated title.
- (d) "Licensure" means a method of regulation by which the state grants permission to persons who meet predetermined qualifications to engage in an occupation or profession, and that to engage in such occupation or profession without a license is unlawful.
- (e) "Health care personnel" means those persons whose principal functions, customarily performed for remuneration, are to render services, directly or indirectly, to individuals for the purpose of:
 - (1) Preventing physical, mental or emotional illness;
 - (2) detecting, diagnosing and treating illness;
 - (3) facilitating recovery from illness; or
- (4) providing rehabilitative or continuing care following illness; and who are qualified by training, education or experience to do so.
 - (f) "Provider of health care" means an individual:
- (1) Who is a direct provider of health care (including but not limited to a person licensed to practice medicine and surgery, licensed dentist, registered professional nurse, licensed practical nurse, licensed podiatrist, or physician's assistant) in that the individual's primary current activity is the provision of health care to individuals or the administration of facilities or institutions (including medical care facilities, long-term care facilities, outpatient facilities, and health maintenance organizations) in which such care is provided and, when required by state law, the individual has received professional training in the provision of such care or in such administration and is licensed or certified for such provision or administration;
- (2) who holds a fiduciary position with, or has a fiduciary interest in, any entity described in subsection (f)(3)(B) or subsection (f)(3)(D) other than an entity described in either such subsection which is also an entity described in section 501(c)(3) of the internal revenue code of 1954, as amended and supplemented, and which does not have as its primary purpose the delivery of health care, the conduct of research, the conduct of instruction for health professionals or the production of drugs or articles described in subsection (f)(3)(C);

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- (3) who receives, either directly or through a spouse, more than 1/5 of such person's gross annual income from any one or combination of the following:
 - (A) Fees or other compensation for research into or instruction in the provision of health care;
 - (B) entities engaged in the provision of health care or in such research or instruction;
- (C) producing or supplying drugs or other articles for individuals or entities for use in the provision of or in research into or instruction in the provision of health care; or
 - (D) entities engaged in producing drugs or such other articles;
 - (4) who is a member of the immediate family of an individual described in subsection (f)(1), (f)(2) or (f)(3); or
- (5) who is engaged in issuing any policy or contract of individual or group health insurance or hospital or medical service benefits. An individual shall not be considered a provider of health care solely because the individual is a member of the governing board of an entity described in subsection (f)(3)(B) or subsection (f)(3)(D).
 - (g) "Consumer of health care" means an individual who is not a provider of health care.
 - (h) "Secretary" means the secretary of health and environment.

History: L. 1980, ch. 181, § 1; L. 1986, ch. 246, § 1; L. 1987, ch. 232, § 2; L. 1988, ch. 246, § 22; July 1.

Staff stated the 1977 interim committee on the credentialing of health care providers found that:

"decisions regarding mandatory licensing, the accreditation of educational programs, and the certification of professionals by professional organizations can effect the delivery of health care if they result in impeding the geographic movement of health manpower, if they result in loss of career mobility, if they result in requiring formal training that is longer than really needed, or if they result in further fragmentation of health careers. Such decisions aslo impact on the cost of health care."

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