

MINUTES OF THE HOUSE TAXATION COMMITTEE

The meeting was called to order by Vice-Chair Carlson at 9:05 A.M. on February 1, 2007 in Room 519-S of the Capitol.

All members were present.

Committee staff present:

Chris Courtwright, Legislative Research Department
Martha Dorsey, Legislative Research Department
Gordon Self, Office of Revisor of Statutes
Rose Marie Glatt, Committee Secretary

Conferees appearing before the committee:

Representative Pat Colloton
Representative Jeff Colyer
Robert Waller, Board of Emergency Medical Services
Dennis Snodgrass, Assistant Fire Chief, Clinton Township
Brad Smith, Fire Chief, Derby
Kevin Florey, Topeka Fire Department
Richard Cram, Department of Revenue
Doug Smith, Kansas Academy of Physician Assistants
Sky Westerlund, KS Chapter National Association of Social Workers
Whitney Damron, Kansas Psychological Association
Cara Cramer-Greve, Kansas Association for the Medically Underserved
Nikki King - Health Care Access Clinic, Lawrence
Chad Austin, Kansas Hospital Association
Kerry McCue, KS EMS Association
Cynthia Smith, Sisters of Charity Health Systems Clinic
Kevin Robertson - KS Dental Association (written only)
Terri Roberts - KS State Nurses Association (written only)
Gary Reser - KS Veterinarian Medical Association (written only)

Others attending:

See attached list.

The Vice-Chair called for bill introductions.

On behalf of Representative Colloton, Vice-Chair Carlson made the motion to introduce a bill for a sales tax exemption on postage used in bulk mailing. Representative Owens seconded the motion. The motion carried.

On behalf of Representative Sloan, Vice-Chair Carlson made the motion to introduce a bill that would allow Kansas sales tax exempt status for two non-profit 501 (c) (3) organizations: Kansas Herpetological Society and the Center for North American Herpetology. Representative Holland seconded the motion. The motion carried.

Representative Light requested a bill introduction that would authorize certain interlocal agreements which allow the sharing of revenue based on growth in assessed valuation of real and personal property. Representative Holland moved the introduction, seconded by Representative Treaster. The motion carried.

HB 2101 - Income tax credit for certain services by volunteer firefighters or volunteer EMS providers.

Chris Courtwright said **HB 2101** would provide a new tax credit, effective for tax year 2007, for a volunteer firefighter or volunteer EMS provider. The credit amount would be \$100 for a volunteer with qualified service of between two and six years, \$200 for a volunteer with qualified service of between six and 11 years, and \$300 for a volunteer of at least 11 years. The total amount of the credit is limited to \$1.0 million. He explained the difference between refundable, non-refundable and carry forwarded tax credits and the

CONTINUATION SHEET

MINUTES OF THE House Taxation Committee at 9:00 A.M. on February 1, 2007 in Room 519-S of the Capitol.

criteria for qualification.

Vice-Chair Carlson opened the public hearing.

Robert Waller, Board of Emergency Medical Services, said that Kansas, not unlike many other states, is faced with a severe shortage of EMS personnel. The ability to recruit and retain their volunteers is becoming more difficult as the number of younger Americans are not volunteering for a number of reasons. This bill would provide another piece in the recruitment tool package and he urged passage of **HB 2101** (Attachment 1).

Dennis Snodgrass, Assistant Fire Chief, explained that the number of volunteer firefighters has decreased 5-10% since 1983. The standards for a volunteer firefighter have changed dramatically, and with those changes have come higher firefighting education and certification requirements, which mean more time is demanded of the volunteer than ever; time away from work and family. He provided statistics on firefighter volunteers in Kansas (Attachment 2).

Brad Smith, Fire Chief, appeared in support of **HB 2101**. He said the bill is important because volunteerism is a strong component of a growing community, and volunteer fire departments make up over 85% of the departments in Kansas. This bill is compensation to the families that support their firefighters dedication to the job while requiring them to be away from home. He suggested six items the committee review before making any decision on the bill (Attachment 3).

Kevin Florey, Topeka Fire Department, testified on behalf of their 16,000 firefighters in Kansas, and said it is time to reflect upon the millions of dollars saved for the taxpayers of this state by the volunteer efforts of Kansas volunteers. If **HB 2101** was adopted it would grant a measure of appreciation to the men and women who risk their lives each day to protect each of us (Attachment 4).

Kerry McCue, Kansas EMS Association, appeared in support of **HB 2101**. He said the bill would be good for the smaller communities that have only 300 to 400 calls a year. He spoke of the importance of volunteerism in the smaller communities and urged passage of the bill. He suggested that Medical First Responder's be included in the bill (No written testimony).

Richard Cram, Department of Revenue, rose in opposition to **HB 2101**. He said the bills are well intended and they recognize people for providing services vital to their communities, however the Department cautions the unintended consequences of treading down the path toward giving tax credits for volunteered time. The Department is not aware of any federal tax credits based on community volunteer time and once the state establishes such a precedent, requests for similar tax credits will follow. He suggested that funding for volunteer firefighter and EMS programs could be more efficiently provided through direct appropriations to the organizations (Attachment 5).

Discussion followed clarifying portions of proponents suggestions. In response to a question regarding whether volunteer firefighters or EMS providers have a mill levy available to their organizations, Mr. Cram agreed to check and get back to the Committee.

Seeing no other conferees, the Vice-Chair Carlson closed the public hearing.

HB 2102 - Income tax credit for health care professionals who contribute time and professional expertise to community service organizations.

Vice-Chair Carlson opened the public hearing.

Doug Smith, Kansas Academy of Physician Assistants, appeared in support of **HB 2102**. He asked the Committee to consider including Physician Assistants in the list of health care professional that would be eligible for this tax credit. His testimony included a balloon amendment for that purpose (Attachment 6).

CONTINUATION SHEET

MINUTES OF THE House Taxation Committee at 9:00 A.M. on February 1, 2007 in Room 519-S of the Capitol.

Representative Jeff Colyer spoke to the Committee in support of the concept of the bill. As a physician in an emergency room he provided an overview of what is happening in emergency rooms across Kansas. He stated there is an extreme shortage of medical professionals. He suggested that recognition be given to the expenses and sacrifices made by many to keep Kansas viable. Bills such as **HB 2102** would be an important addition to public policy (No written testimony).

Sky Westerlund, KS Chapter National Association of Social Workers, said that their organization supports the bill because it recognizes people, who are professionals, working in their field, but more importantly encourages them to provide their services in the volunteer sector. She said that as broad as the list of qualified professions is they would asked for the inclusion of social workers to that list (Attachment 7).

Whitney Damron, Kansas Psychological Association, rose in support of **HB 2102**. He respectfully requested an amendment to add the term "licensed psychologist" to the bill. He offered a balloon amendment to this end. He said that at this time when our country and state are trying to deal with the ever increasing costs of health care, it will be important to find creative ways, such as **HB 2102**, to encourage health care providers who volunteer their services (Attachment 8).

Cara Cramer-Greve, Kansas Association for the Medically Underserved (KAMU), testified that the bill is a reward mechanism for those health care providers volunteering their time in such settings as primary care safety net clinics. Many of their member clinics' workforce is substantially comprised of volunteer health care providers donating their time and services. She urged the Committee to pass **HB 2102** (Attachment 9).

Nikki King, Health Care Access Clinic, testified that their clinic is experiencing volunteer fatigue and a tax credit would be an over-due show of gratitude for many years of altruism and selfless contribution to the charity component of their current health care system. She offered three suggestions, which in their opinion would strengthen the bill (Attachment 10).

Chad Austin, Kansas Hospital Association, testified that dedicated professionals travel to various communities and provide essential health care services and it would reward the efforts of those individuals as well as create an incentive for more professionals to donate their time and knowledge. He suggested that **HB 2102** should include other types of licensed health care professionals, such as physician assistants and advance registered nurse practitioners (Attachment 11).

Dan Morin, presented the testimony of Jerry Slaughter, Executive Director, Kansas Medical Society, in support of **HB 2102**. He stated that this legislation encourages health care providers to increase the amount of care they provide, and thereby improve access, to services (Attachment 12). He suggested that if the bill goes forward, he encouraged the committee to clarify some of the definitions in the bill.

Cynthia Smith, Sisters of Charity Health Systems Clinic, stood in support of the bill. Her testimony included the written testimony of Marilyn Page, Executive Director, of the Marion Clinic, which states that the volunteer effort at Marian Clinic is phenomenal. An analysis of Marian Clinic's on-site physician services, by the county's coordinating office, Health Access, estimated the market value to be \$358,000 in 2005 (Attachment 13).

The Vice-Chair acknowledged the receipt of written testimony in support of **HB 2102** from the following: Kevin Robertson - KS Dental Association; Terri Roberts - KS State Nurses Association; and Gary Reser - KS Veterinarian Medical Association (Attachment 14).

Richard Cram, Department of Revenue, acknowledged that his testimony was the same for **HB 2101** and **HB 2102**, and he referred to his previous comments.

Seeing no other conferees, the Vice-Chair closed the public hearing.

The meeting was adjourned 10:30 a.m. The next meeting is February 2, 2007.

TAXATION COMMITTEE

DATE: FEBRUARY 1 2007

NAME	REPRESENTING
Cara M. Cramer - Corewe	KAMU
Nikki King	Health Care Access Clinic
Mike Huttles	KAMU
Barbara Gibson	KDHE
Dennis Snodgrass	Clinton Township Fire Dept.
Jim Kearney	Kanwaka Township Fire Dept
Corey Kearney	Kanwaka Township Fire Dept
Gary E. Carmode	(Gary Carmode) Kansas Professional Fire Chiefs Ass'n
Dan Romine	Kansas State Firefighters Assoc.
Kevin Flory	Kansas State Firefighters Assoc.
Brad Smith	Kansas State Assoc. of Fire Chiefs
St. Wintubel	KNASW
Patti Artzer	Bd of EMS
DAVE CROMWELL	KS BEMS
Keray McQue	KS EMS ASSO.
STAN FROWN FELTZ	31 st Dist House
Whitney Danna	KS Psychological Assn.
Dan Morin	KS Medical Society
Gary Reser	Ks. Veterinary Med. Assn.

TAXATION COMMITTEE

DATE: FEBRUARY 21, 2007

NAME	REPRESENTING
Doug Smith	Ks. Academy Physician Assistants
Larry Deardon	KFB Scott Co.
Cynthia Smith	SCL Health System
Erik SARTORIUS	City of Overland Park
Chad Austin	KS Hosp Assoc
CARMEN ALLORITT	KDOR
N/A	
Katie Zinsman	Kearney Associates



KANSAS

DENNIS ALLIN, M.D., CHAIR
ROBERT WALLER, CHIEF ADMINISTRATOR

KATHLEEN SEBELIUS, GOVERNOR

BOARD OF EMERGENCY MEDICAL SERVICES

Testimony

Date: February 1, 2007
To: House Committee on Taxation
From: Robert Waller, Chief Administrator
RE: House Bill 2101

Chairman Wilk and members of the House Taxation Committee, thank you for the opportunity to provide testimony on the House Bill 2101. My name is Robert Waller. I am the Chief Administrator for the Kansas Board of Emergency Medical Services (KSBEMS).

Kansas, not unlike many other states, is faced with a severe shortage of EMS personnel. In particular the ability to recruit and retain. Rural Kansas communities especially face these issues as the number of volunteers dwindle. A large portion of our State, rural EMS, is made up of volunteers. Volunteer attendants are the backbone of many rural EMS programs but their numbers are declining and it is especially difficult to staff day time shifts due to employment obligations. This is due to a number of factors, two being the inability of individuals to acquire time off from their full-time employer to volunteer, and an overall reduction nationwide in the number of individuals that volunteer their time and service. The current number of volunteers are getting older, and thus starting to retire from service. However, younger Americans are either not volunteering to the level that the previous generation provided, or realize that to make a career of EMS they will eventually have to move to the urban or more populated areas of the state. All of these factors, and others contribute to a shortage of certified attendants, slows ambulance response times, puts a strain, both physically and mentally, on ambulance crews and their families, and lengthens the time it takes for those in need to get assistance. Low pay and 24 hour coverage are key factors that make it difficult to hire and retain certified EMS attendants.

Currently, the number of EMS attendants in the state, as of January 20, 2007, total 10,415. Of that amount, the total number who are active attendants is 6,826. The table below provides a break down of their employment status.

<u>Employment Status</u>	<u>Number of Attendants</u>	<u>% of Total Active</u>
Volunteers	2,455	36.0
Full-Time	3,668	54.0
Part-Time	703	10.0

**HS TAXATION COMMITTEE
2-1-2007
ATTACHMENT 1**

HB 2101, along with HB 2119 the creation of a distinctive EMS license plate currently residing in House Transportation, are pieces of legislation that not only provide a financial incentive for EMS personnel, but also provide a recruitment tool for EMS services attempting to recruit additional personnel. The passage of this bill would go a long way to demonstrate support and acknowledgement from the State.

Bill Language

House Bill (HB) 2101. The bill was introduced in House Taxation. For taxable years commencing after December 31, 2006, a volunteer firefighter or volunteer EMS provider would be provided a credit against the income tax imposed by the Kansas income tax.

- An amount of \$100 per year for a volunteer firefighter or volunteer EMS provider with at least two years of qualified service but less than six years of qualified service;
- An amount of \$200 per year for a volunteer firefighter or volunteer EMS provider with at least six years of qualified service but less than 11 years of qualified service; and
- An amount of \$300 per year for a volunteer firefighter or volunteer EMS provider with at least 11 years of qualified service.

If the amount of such tax credit exceeds the taxpayer's income tax liability for the taxable year in which the tax credit is claimed, such amount which exceeds such income tax liability shall be refunded to the taxpayer. In no event shall the total amount of credits allowed under this section exceed \$1,000,000. Any attendant utilizing the provisions of the bill by engaging in "qualified service" means service as a volunteer firefighter or volunteer EMS provider of at least 120 hours of documented service for each taxable year.

Conclusion

Simply, members of the Committee, the passage of HB 2101 provides EMS personnel, rural and urban, with a level of financial recognition they deserve. The passage of the bill along with the Education Incentive Grant currently provided by KBEMS to attendants who volunteer their time for 1 to 2 years in exchange for funding to pay for their initial education course, aid in increasing the number of attendants available to EMS services. These are the folks that get up in the middle of the night to help others when they are in need, and I know I can speak for them in thanking you in advance for this timely legislation.

Thank you for allowing me to testify in support of HB 2101, and I will stand for any questions you may have.

- My name is Dennis Snodgrass. I am the Assistant Chief of the Clinton Township Fire Department in Douglas County. I will be speaking today regarding the fire service portion of this bill.
- Volunteer firefighters come from all walks of life with one common desire: to make a positive difference in the lives of the people of our communities. We are neighbors helping neighbors.
- What it takes to be a volunteer FF has changed over the years. It used to be as easy as wanting to be one that made one. Today, the standards have changed dramatically, and with those changes have come higher firefighting education and certification requirements, which mean more time is demanded of the volunteer than ever; time away from work and family.
- In addition to the time donated by firefighters on a department, firefighters can easily spend \$100 or more per year of their own money participating in a volunteer fire department.¹
- Volunteers comprise 73% of firefighters in the United States;² and 81% in the State of Kansas³.
- There are 7,819 all volunteer firefighters, and 5008 volunteers who receive a reimbursement per call in Kansas.⁴ Not all of these meet the minimum requirement of Firefighter I certification.
- The number of volunteer firefighters has decreased 5-10% since 1983.⁵ This can be attributed to an increase in call volume, an increase in training hours and training standards, expanded time needed for family and children's activities, and greater 'real job' demands. Most volunteers have at least one, if not more, full time jobs.
- 95% of the volunteers are in departments that protect a population of less than 25,000;⁶ this is certainly representative of a majority of communities in Kansas and touches a majority of your constituents.
- In 2004, a study by the Public Safety and Environmental Protection Institute at St. Joseph's University found that it would cost American taxpayers \$37.2 billion annually to replace all volunteer firefighters in the United States with career staffing.⁷
- On our Department, it is a constant struggle to find the people who are physically fit, willing to devote the time to education, certification, training and calls, and who have jobs and personal lives that will allow them to participate. Our hope is this bill, when passed into law, will allow departments across Kansas to not only retain their current membership, but also entice those who have thought of joining (but the cost in time and money is too great) to see that being a volunteer is not all give and no take. We have found that the good feelings that come with being a volunteer serving the community are not enough to maintain our ranks. The cost to Kansas for losing its volunteer firefighters is far greater than this bill, when passed to law, could ever cost the State. With this piece of legislation, you are making a small investment with a large return. We thank you for your support.

¹. A firefighter driving to and from the station or scene during calls or training can easily burn 50 gallons of gas in their personal vehicle.

Volunteers also routinely spend their own funds in department fundraising efforts.

2. U.S. Fire Department Profile Through 2003. National Fire Protection Association, Quincy, Massachusetts, October, 2003.
3. From the Kansas State Firefighters Association website (www.KSFFA.com); Kansas Statistical Fire Service Information; 2002.
4. From Karl McNorton, Chief Deputy State Fire Marshal, Kansas State Fire Marshal's Office, January, 2007
5. U.S. Fire Department Profile Through 2003. National Fire Protection Association, Quincy, Massachusetts, October, 2003.
6. From the U.S. Fire Administration, Department of Homeland Security, website (www.USFA.dhs.gov) citing the National Fire Protection Association, U.S. Fire Department Profile Through 2005.
7. From the National Volunteer Fire Council website (www.nvfc.org); Cost Savings Study conducted by the Public Safety and Environmental Protection Institute at St. Joseph's University, 2004.

Testimony to the House Tax Committee
HB 2101
By Chief Brad Smith
Derby, KS Fire and Rescue

Thank you Mr. Chairman and members of the committee, I am here to testify in support of HB 2101.

I have been in the fire service for almost 30 years. In my career I have worked in several small rural communities, working many times along side volunteer firefighters. In 2001, I became Fire Chief for El Dorado, Kansas. This was my first experience of actually having volunteers working under me.

In 2004, I took the position as Fire Chief for the City of Derby. A growing community of 20,000 people that had been served by a volunteer force and up to that time, the largest community in Kansas served by a volunteer department. Derby has become a combination department with full time paid firefighters along with the volunteer members. The volunteers still provide the backbone of the department for major incidents.

I believe this bill is important for several reasons.

1. Volunteerism is a strong component of any growing community. It help defines who we are and how much we care about our community. Without the volunteers in any organization, we all know that very few projects would get accomplished in a timely manner.
2. Volunteer Fire Departments make up over 85% of the departments in Kansas. In many rural areas, departments would not exist without commitments of neighbors to answer calls. Without volunteer firefighters, a rancher's grassland may be consumed in flames, wheat farmers crops may be destroyed, and the local grocery or hardware store may go up in flames.
3. When a volunteer sleeps with a pager or telephone next to his bed at night, he or she has made a commitment that no matter what time of day or night, they will answer the call. However, what is often forgotten is the family of this firefighter. They also pay the price for the inconvenience of their father, mother, husband or wife taking off from Christmas dinner, family outings or just time off together. They also sacrifice along side their loved one.

Volunteer firefighters rarely receive anything more than a few dollars for each call they make or each training session they attend. In fact, in most volunteer departments that I know, any call stipend is turned into a fund to help purchase equipment or supplies for the department. The majority of volunteers do not volunteer for the pay.

I would ask that you would begin to support our volunteer firefighters as many states around us already do. I have had conversation with several firefighters and Chiefs from small communities who are pleased with this bill and its progress.

However, there are several items that I would ask that you go back and look at a little more closely:

1. Grandfather of current members. Create the stipulation for the firefighter I certification for future members who come on a department after January 01, 2008 and that they would have one year to obtain.
2. Stipulation for 120 hours of service for each year. For a active volunteer department that answers 15-20 calls a month, this may not be a problem. For a department that may answer only 5-10 calls per month, even with training hours, this would be hard to accomplish for a very small department.
3. Change wording to have only the Chief then either the Mayor, Chairman of a Fire Board or District or County Administrator to sign off whether the firefighter is a member in good standing. This would make sure that the Chief and or his assistant is not just whitewashing the requirements.
4. Need to allow for per call payment. The departments that I know, volunteers rarely receive enough to pay for their gas to drive to the fire house. Stipulate that if you are paid an hourly rate, you do not qualify for this benefit.
5. Clarify that firefighter 1 certification comes from the Kansas University. The recognized certifying agent for the training for the Kansas Fire Service.

I want to reiterate how important that I feel this bill is. It should be to recognize those firefighters who make their selves available to their communities. Please do not let this go away.

Respectfully;

Chief Brad Smith
Derby, Kansas Fire & Rescue

Testimony to the House Tax Committee
HB 2101

By Kevin Flory
Northeast Trustee
Kansas State Firefighters' Association, Inc.

Thank you Mr. Chairman and members of the committee. I am here to testify in support of HB 2101.

Since the founding of this great state, Kansans have always known that they could rely upon firefighters to answer their calls for help, but Kansas - and society - has changed a lot in its 146 year history. People are busier today. Many people live in our small towns and travel to the city to work. These are factors that affect the fire service in our state. For some of our fire departments it becomes much more difficult to recruit firefighters and then, to retain them. This is not unique to Kansas. It is happening all across America. Our association represents all 16,000 firefighters in Kansas, whether they be full time firefighters or volunteers. The Kansas fire service is always looking for ways to entice our citizens to become firefighters, to train them and then to retain them. Many states have turned to tax credits as an incentive to volunteer. Our neighbor to the north is debating such a bill in their unicameral this year. Our neighbor to the south in Oklahoma already has such a credit as do many states. It is time for Kansas to recognize the efforts of our volunteer firefighters. It is time to reflect upon the millions of dollars saved for the taxpayers of this state by the volunteer efforts of Kansas firefighters. It is time for Kansas to adopt HB 2101 to grant a measure of appreciation to the men and women who risk their lives each day to protect each of us. I urge you to support HB 2101. We do have some suggestions for change to the legislation on behalf of the 16,000 firefighters of Kansas that we represent. I am attaching a copy of those proposed changes to my testimony.

If I can answer any questions please feel free to contact me.

HOUSE BILL No. 2101
By Committee on Taxation

AN ACT concerning income taxation; relating to credits; service by certain volunteer firefighters and EMS providers.

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

Section 1. (a) For taxable years commencing after December 31, 2006, a volunteer firefighter or volunteer EMS provider shall be allowed a credit against the income tax imposed by the Kansas income tax act as follows:

(1) An amount of \$100 per year for a volunteer firefighter or volunteer EMS provider with at least two years of qualified service but less than six years of qualified service;

(2) an amount of \$200 per year for a volunteer firefighter or volunteer EMS provider with at least six years of qualified service but less than 11 years of qualified service; and

(3) an amount of \$300 per year for a volunteer firefighter or volunteer EMS provider with at least 11 years of qualified service.

(b) If the amount of such tax credit exceeds the taxpayer's income tax liability for the taxable year in which the tax credit is claimed, such amount which exceeds such income tax liability shall be refunded to the taxpayer.

(c) In no event shall the total amount of credits allowed under this section exceed \$1,000,000.

(d) As used in this section:

(1) "EMS provider" means a person providing emergency medical service as an emergency medical technician with a rating of emergency medical technician or higher ATTENDANT CERTIFIED BY THE KANSAS BOARD OF EMERGENCY MEDICAL SERVICES;

(2) "firefighter" means a person serving with a fire department as a firefighter who is certified as a certified firefighter 1 or higher;

(3) "qualified service" means service as a volunteer firefighter or volunteer EMS provider of ~~at least 120~~ A SET NUMBER OF hours of documented service for each taxable year AS SET FORTH BELOW. Such service shall include, but not be limited to, fire or emergency calls, continuing education courses, training, equipment maintenance or community relations or fundraising. Persons with service with more than one volunteer fire department or emergency medical services department may count all such service to meet the requirements of this section as long as such service is without a break in such service. Documentation of such service shall be in a manner and on a form developed by the secretary of revenue that is signed by the chief and assistant chief of the fire department or emergency medical services department. Such documentation shall include the dates of such service, the number of hours each person has served in such capacity and the general category of service. AT LEAST TEN PERCENT OF THE HOURS OF DOCUMENTED SERVICE FOR A

VOLUNTEER FIREFIGHTER MUST BE FROM TRAINING OBTAINED FROM A KANSAS COMMUNITY COLLEGE, THE KANSAS FIRE AND RESCUE TRAINING INSTITUTE, THE KANSAS STATE FIREFIGHTERS ASSOCIATION OR OTHER PROVIDER APPROVED BY THE KANSAS FIRE SERVICE TRAINING COMMISSION ;

- (i) A VOLUNTEER FIREFIGHTER OR VOLUNTEER EMS PROVIDER WITH AT LEAST 60 HOURS BUT LESS THAN 120 HOURS OF DOCUMENTED SERVICE SHALL QUALIFY FOR 25% OF THE ABOVE TAX CREDIT;
 - (ii) A VOLUNTEER FIREFIGHTER OR VOLUNTEER EMS PROVIDER WITH AT LEAST 120 HOURS OF DOCUMENTED SERVICE SHALL QUALIFY FOR 50% OF THE ABOVE TAX CREDIT;
 - (iii) A VOLUNTEER FIREFIGHTER WHO HAS ATTAINED THE FIREFIGHTER ONE CERTIFICATION OR EQUIVALENCY SHALL QUALIFY FOR AN ADDITIONAL 50% OF THE ABOVE TAX CREDIT IN ADDITION TO THE PERCENTAGE OF CREDIT FOR DOCUMENTED SERVICE;
 - (iv) A VOLUNTEER EMS PROVIDER WHO IS CERTIFIED BY THE KANSAS BOARD OF EMS SHALL QUALIFY FOR AN ADDITIONAL 50% OF THE ABOVE TAX CREDIT IN ADDITION TO THE PERCENTAGE OF CREDIT FOR DOCUMENTED SERVICE, and
- (4) "volunteer" means a person who is not paid or otherwise compensated for qualified service, except that such persons may receive reimbursement of documented expenses incurred in such qualified service, tuition payments for continuing education courses, insurance payments, clothing allowance amounts and minimal monthly OR PAID ON CALL stipends to defray other costs associated with serving as an officer or a member within a volunteer fire department or emergency medical services department.
- (e) The secretary of revenue shall adopt rules and regulations regarding the filing of documents and forms that support the amount of credit claimed pursuant to this section and other matters necessary to administer the provisions of this section.

Sec. 2. This act shall take effect and be in force from and after its publication in the statute book.

Testimony to the House Taxation Committee

Richard Cram

February 1, 2007

Department Concerns with House Bills 2101 and 2102

Representative Wilk, Chair, and Members of the Committee:

House Bill 2101 provides for a refundable income tax credit for a volunteer firefighter or volunteer EMS provider. House Bill 2102 provides for a refundable income tax credit for a health care professional who donates qualified professional time to a nonprofit community service organization.

While these bills are clearly well intended and they recognize people for providing services vital to their communities, the Department cautions the unintended consequences of treading down the path toward giving tax credits for volunteered time. We are not aware of any federal tax credits based on community volunteer time. Once the State establishes such a precedent, requests for similar tax credits will follow: should scout or other youth leaders, crisis hotline counselors, schoolteacher assistants and others receive tax credits for their volunteer time? The notion that the State should compensate community volunteers with non-taxable transfer payments seems inconsistent with the idea of voluntary community service.

Each of these bills could reduce fiscal year 2008 state general fund revenues by \$1.0 million. Each credit is capped at \$1.0 million, and we assume these will be allowed on a first-come, first-serve basis, with the credit claims denied beyond that threshold. The Department will need to develop a tracking mechanism to accomplish this.

With each new tax credit, the Department incurs significant administrative expense: development of a new credit schedule; reprogram computer systems to accept and process the data from the new schedule; test and retest the system until errors are resolved. Generally, at least three months of programming resources are required. The estimated costs necessary to implement each of these bills are \$208,845 in fiscal year 2008. Our fiscal notes are attached.

Funding for volunteer firefighter and EMS programs and indigent health care could be more efficiently provided through direct appropriations to the clinics serving the indigent and the volunteer firefighter and EMS organizations.

2007 House Bill 2101b Fiscal Note

Introduced as a House Bill

Brief of Bill

House Bill 2101, as introduced, provides for a refundable income tax credit for a volunteer firefighter or volunteer EMS provider. The credit amount would be \$100 for a volunteer with qualified service of between two and six years, \$200 for a volunteer with qualified service between six and 11 years, and \$300 for a volunteer with qualified service of at least 11 years.

The total amount of the credit is limited to \$1.0 million.

The effective date of this bill is on publication in the statute book for tax years beginning after December 31, 2006.

Fiscal Impact

Passage of this bill could reduce fiscal year 2008 state general fund revenues by \$1.0 million.

The bill limits the total amount of the credit to \$1.0 million. The department assumes that once \$1.0 million in credits have been claimed the credit will no longer be allowed.

Administrative Impact

The estimated costs necessary to implement this bill are \$208,845 in fiscal year 2008. Those costs include about \$183,200, or 2,290 hours, of contract APA programming time. The estimated user testing resources necessary to implement the bill are \$25,645, or 920 hours, for testing the new programs.

Administrative Problems and Comments

Taxpayer/Customer Impact

Legal Impact

2007 House Bill 2102b Fiscal Note

Introduced as a House Bill

Brief of Bill

House Bill 2102, as introduced, provides for a refundable income tax credit for a health care professional who donates qualified professional time to a nonprofit community service organization. The credit amount would be \$50 per hour, but not more than \$3,000 per year, for qualified professional time of physicians, optometrists, ophthalmologists and dentists. For veterinarians and registered nurses, \$30 per hour, but not over \$2,000 per year, of qualified professional time. For licensed practical nurses, \$20 per hour, but not over \$2,000 per year, for qualified professional time.

The total amount of the credit is limited to \$1.0 million.

The effective date of this bill is on publication in the statute book for tax years beginning after December 31, 2006.

Fiscal Impact

Passage of this bill could reduce fiscal year 2008 state general fund revenues by \$1.0 million.

The bill limits the total amount of the credit to \$1.0 million. The department assumes that once \$1.0 million in credits have been claimed the credit will no longer be allowed.

Administrative Impact

The estimated costs necessary to implement this bill are \$208,845 in fiscal year 2008. Those costs include about \$183,200, or 2,290 hours, of contract APA programming time. The estimated user testing resources necessary to implement the bill are \$25,645, or 920 hours, for testing the new programs.

Administrative Problems and Comments

Taxpayer/Customer Impact

Legal Impact

1

Kansas Academy of Physician Assistants

Post Office Box 597 • Topeka • Kansas • 66601-0597 • 785-235-5065

TESTIMONY TO THE HOUSE TAXATION COMMITTEE ON HOUSE BILL NO. 2102

February 1, 2007

Chairman Wilk and Members of the Taxation Committee:

Thank you for the opportunity to present testimony House Bill No. 2102. I am Doug Smith and I serve as the Executive Director for the Kansas Academy of Physician Assistants (KAPA).

KAPA serves as the official representative voice for the Physician Assistants (PA) in Kansas. Our purpose is to enhance the quality of medical care of the citizens of Kansas by providing medical education to physician assistants, other health professionals, the legislature, governing bodies and to the public. In Kansas, there are more than 730 Physician Assistants licensed by the State Board of Healing Arts. The Kansas Academy of Physician Assistants membership includes 325+ licensed and practicing PAs and student members.

A Physician Assistant serves as an integral part in the practice of medicine by providing needed health care services across this state. Physician Assistants are providing many medical services and are qualified to evaluate, diagnose and treat many illnesses and conditions, as well as performing urgent lifesaving procedures. Physician Assistants also offer patient education and counseling. Without the use of Physician Assistant the accessibility to medical care can be limited, particularly in rural areas.

In many of our communities, Physician Assistants are volunteering their time to provide healthcare services in both urban and rural clinics.

The Kansas Academy of Physician Assistants appears today in support of House Bill No 2102 and would like for you to consider including Physician Assistants in the list of health care professional eligible for this tax credit.

We ask for your favorable action on this request as you consider House Bill No. 2102.

Thank you for your time today and consideration.

Douglas E. Smith
Executive Director
Kansas Academy of Physician Assistants

**HS TAXATION COMMITTEE
2-1-2007
ATTACHMENT 6**

6-2

HOUSE BILL No. 2102

By Committee on Taxation

1-18

9 AN ACT concerning income taxation; relating to credits; contributions
10 of professional time by certain health care professionals.

11

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

13 Section 1. (a) For taxable years commencing after December 31,
14 2006, a health care professional who donates qualified professional time
15 to a nonprofit community service organization shall be allowed a credit
16 against the income tax imposed by the Kansas income tax act as follows:

17 (1) For physicians, optometrists, ophthalmologists and dentists, an
18 amount equal to \$50 per hour of such qualified professional time, except
19 that such amount shall not exceed \$3,000 per taxable year per taxpayer;

20 (2) for veterinarians and registered nurses, an amount equal to \$30
21 per hour of such qualified professional time, except that such amount
22 shall not exceed \$2,000 per taxable year per taxpayer; and

23 (3) for licensed practical nurses, an amount equal to \$20 per hour of
24 such qualified professional time, except that such amount shall not exceed
25 \$2,000 per taxable year per taxpayer.

26 (b) If the amount of such tax credit exceeds the taxpayer's income
27 tax liability for the taxable year in which the tax credit is claimed, such
28 amount which exceeds such income tax liability shall be refunded to the
29 taxpayer.

30 (c) In no event shall the total amount of credits allowed under this
31 section exceed \$1,000,000.

32 (d) As used in this section:

33 (1) "Health care professional" means physicians, optometrists, oph-
34 thalmologists, dentists, registered nurses, licensed practical nurses and
35 veterinarians; and , licensed physician assistants

36 (2) "qualified professional time" means the contribution of profes-
37 sional time and expertise by a health care professional by providing free
38 or significantly reduced cost care for indigent patients and companion
39 animals pursuant to an agreement with a nonprofit community service
40 organization. For each taxable year, only hours which exceed 30 hours of
41 qualified professional time which are contributed by a health care pro-
42 fessional are eligible for the tax credit provided by this section.

43 (d) A nonprofit community service organization which has received

Taxation**February 1, 2007****House Bill 2102****Concerning income taxation; relating to credits; contributions of professional time***Sky Westerlund, LMSW**Executive Director, Kansas Chapter, National Association of Social Workers (KNASW)*

KNASW is the professional association working on behalf of the profession and practice of social work in Kansas. Social workers have been licensed to practice at three levels of expertise since 1976. These are the baccalaureate (LBSW), the master (LMSW), and the clinical social worker (LCSW). There are over 5500 social workers practicing and serving thousands of persons in Kansas every day. Social work is a broad and inclusive profession which allows social workers to provide services and care in a wide variety of settings, such as child welfare, juvenile justice, private practice, military bases, hospitals, hospices, disaster events, domestic violence, aged care, substance abuse, community mental health centers, schools, public health organizations, community programs and many more.

HB 2102 is a positive bill that can help encourage licensed health care professionals to volunteer their time, expertise, and skills in the non-profit sector.

The list of qualified professions is broad but has one omission—that of social workers. Social workers should be added into this legislation. Such an addition would recognize the valuable work that social workers do, such as mental health care and other support service work. Including them in this legislation would likely encourage social workers to contribute their time as well.

Thank you for your consideration.

Email correction: sky@knasw.com

Website correction: www.knasw.org

**HS TAXATION COMMITTEE
2-1-2007
ATTACHMENT 7**



K P A

KANSAS PSYCHOLOGICAL ASSOCIATION

TESTIMONY

**TO: The Honorable Kenny Wilk, Chair
And Members Of The
House Taxation Committee**

**FROM: Whitney Damron
On Behalf Of The
Kansas Psychological Association**

**RE: HB 2102 – An Act concerning income taxation; relating to credits;
contributions of professional time.**

DATE: February 1, 2007

Good morning Chairman Wilk and Members of the House Taxation Committee. I am Whitney Damron and I appear before you today on behalf of the Kansas Psychological Association in support of HB 2102.

The Kansas Psychological Association represents the doctorate-level psychologists in our state.

We appreciate the effort Representative Sloan has made to introduce this issue to the Kansas Legislature and believe there is the opportunity to expand health care services to Kansans in a very cost-effective manner through this legislation.

Access to effective mental health services is just as important as access to physical health services and oftentimes they are interrelated as noted by the *U.S. Surgeon General's Report on Mental Health* (1999) and the *President's New Freedom Commission on Mental Health* (2003).

For that reason, we would respectfully request an amendment to HB 2102 on lines 17 and 34 by adding the term, "licensed psychologist".

According to the Behavioral Sciences Regulatory Board website, there are 685 psychologists with an active license in our state.

On behalf of the Kansas Psychological Association, I thank you for your consideration of HB 2102 and our request for amendment.

**HS TAXATION COMMITTEE
2-1-2007**

PO Box 3326 Lawrence, KS 66046 (785) 851- ATTACHMENT 8

HOUSE BILL No. 2102

By Committee on Taxation

1-18

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8-2



Kansas Association
for the
Medically Underserved
The State Primary Care Association

1129 S Kansas Ave., Suite B Topeka, KS 66612 785-233-8483 Fax 785-233-8403 www.kspca.org

Testimony on:
House Bill No. 2102

Presented to:
House Taxation Committee

By:
Cara Cramer-Greve, JD, MHSA
Health Policy Analyst
Kansas Association for the Medically Underserved

February 1, 2007

For additional information contact:

KAMU
1129 S. Kansas Ave., Suite B
Topeka, KS 66612
(785) 233-8483

House Taxation Committee
February 1, 2007

Good afternoon, Mr. Chairman and Members of the Committee. I am Cara Cramer Greve, the Health Policy Analyst for the Kansas Association for the Medically Underserved (KAMU). Thank you for the opportunity to appear before you today to share our support for House Bill No. 2102.

KAMU is an association of primary care safety net clinics across Kansas whose mission is to assure access to comprehensive health care for underserved populations, regardless of their ability to pay. Our members differ in funding sources and organizational structure, for example some are faith-based while others are federally funded. All of our member clinics share important values such as a spirit of community and a belief that people deserve access to high quality health care. KAMU's vision is to grow and strengthen these clinics so that all Kansans will have a primary health care "home." This home is a place where people receive comprehensive primary, dental and behavioral health care. In addition, this primary health care home is defined by sustained relationships. Clients of these clinics receive care from people who know them. Together, they create a partnership for healthy lifestyles.

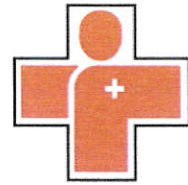
Momentum has been building in recent years in terms of strengthening and expanding the primary care safety net. The number of clinic users increased over 5% from 2004 to 2005, raising the total number of patients to nearly 127,000. Medical, mental health and oral health services have been expanded to 30 Kansas counties. Extended hours and new points to access service have also been added for the benefit of patients, such as Marian Clinic in Topeka extending dental service hours by an additional 20 hours each week. Increased operating support to continue this path of strengthening primary care safety net clinics was not included in the Governor's budget for the upcoming fiscal year. The requested funds were to be used to increase operating support and further develop workforce programs. HB2102 addresses the overall need to focus on workforce related initiatives, which effectively create a base of qualified health professionals for both rural and urban areas.

Many of our member clinics' workforce is substantially comprised of volunteer health care providers donating their time and services. Safety net clinics provide care regardless of ability to pay, which presents many challenges. In order to expand their capacity for care, many clinics partner with other local health organizations and concerned citizens who volunteer time and services. Incentives to increase volunteerism on the part of health care professionals, as well as rewards for those already donating time, represents a beneficial step toward solidifying the volunteer base that is vital to the operation of many Kansas safety net clinics. Recruiting tools are another important aspect of workforce development for organizations facing extreme challenges in terms of sustaining access to care for underserved populations.

HB2102 is a reward mechanism for those health care providers volunteering their time in such settings as primary care safety net clinics. KAMU, on behalf of member clinics utilizing volunteer services, supports this effort to reward health care professionals for contributing to the care of our most vulnerable Kansans.

I appreciate the opportunity to voice our support and would be happy to answer any questions.

**Committee on Taxation
Health Care Access Clinic Testimony for HB2102
February 1, 2007**



Health Care Access Clinic
Healthcare for the Uninsured since 1988

Good morning, Mr. Chairman and honorable committee members. I am Nikki King, the Executive Director of the Health Care Access Clinic, an indigent clinic serving the uninsured, low-income of Douglas County. Thank you for the opportunity to share our support for HB2102.

On behalf of our 18 year old agency, its constituents, and volunteers, I wish to make three points of support for HB2102.

1. A tax credit for current volunteering medical professionals would be an over-due show of gratitude for many years of altruism and selfless contribution to the charity component of our current health care system.
2. A tax credit for medical professionals who volunteer for indigent clinics could be the needed motivator to engage many young professionals learning how challenging it is to run a profitable practice as well as balance family life, let alone volunteer in the free time they do have.
3. A tax credit for medical professionals who volunteer for indigent clinics will strengthen the in-kind support vital to making a significant contribution to the mission of providing health care to the uninsured in our communities. Supplementation by medical professionals increase the capacity of the limited-resource clinics and add to the quality and stability of the agency – desired qualities of such organizations whose existence are needed in the current health care system.

Suggestions:

1. We would suggest following definitions in existing language from the Charitable Health Care Provider Program, an extension of Kansas Tort Claims Act coverage to volunteering medical professionals serving the underserved (administered by the Kansas Department of Health and Environment). Likewise, we suggest using this already existing vehicle for reporting purposes to minimize burden to the clinics and the professionals.
2. We ask that an equitable benefit exist for volunteering professionals despite the venue of delivery (i.e. our office or theirs).
3. From a practical standpoint, we feel those serving a minimum of two hours per month (24 hours per year) are worthy of the tax credit.

With increased reliance on local support to provide health care to the growing number of uninsured in our communities, this type of benefit to perpetuate and increase volunteerism would be greatly appreciated.

1920 Moodie Road
Lawrence, Kansas 66046



Thomas L. Bell
President

TO: House Committee on Taxation

FROM: Chad Austin
Vice President, Government Relations

SUBJECT: House Bill 2102

DATE: February 1, 2007

The Kansas Hospital Association appreciates the opportunity to provide testimony in support of House Bill 2102. This proposed legislation would allow health care professionals to receive state income tax credits for donating qualified professional time to a nonprofit community service organization.

In communities across the state, health care professionals spend countless hours of personal time reaching out to the most vulnerable Kansans who are unable to access the traditional health care system. These dedicated professionals travel to various communities and organizations to provide essential health care services. House Bill 2102 would reward the efforts of these individuals, as well as create an incentive for more health care professionals to donate their time and knowledge.

Further, KHA would suggest that the committee consider expanding House Bill 2102 to include other types of licensed health care professionals, such as physician assistants and advance registered nurse practitioners.

Thank you for your consideration of these comments.

**HS TAXATION COMMITTEE
2-1-2007
ATTACHMENT 11**

Kansas Hospital Association

215 SE 8th Ave. • P.O. Box 2308 • Topeka, KS • 66601 • 785/233-7436 • Fax: 785/233-7437



*Presented
by
Dan Morin*

To: House Taxation Committee

From: Jerry Slaughter
Executive Director

Subject: HB 2102; concerning income tax credits for professional services

Date: February 1, 2007

The Kansas Medical Society appreciates the opportunity to appear today on HB 2102, which would provide income tax credits to physicians and other health professionals for providing certain professional services to nonprofit community service organizations. Under the terms of the bill, health care providers would receive state income tax credits for services provided in excess of 30 hours annually.

We certainly support the thrust of this legislation – encouraging health care professionals to provide care to individuals at community indigent health care clinics. To the extent that this legislation would further that goal, we are supportive. However, while we are conceptually supportive, the bill needs some additional clarification, and also some work on the definitions. First, the bill apparently limits the total credits allowed to \$1 million annually. It does not say how that would be administered. Presumably, a health care provider could provide services which he or she assumes will result in a tax credit, only to find upon filing their taxes that the \$1 million limit had been reached and no other credits would be authorized. That seems a bit unfair, and unworkable.

Additionally, if the committee elects to work the bill, we would encourage you to clarify some definitions. Since all ophthalmologists are physicians, you should strike the reference to ophthalmologists. To be consistent with existing Kansas law, you probably ought to clarify that “physician” means “a person licensed to practice medicine and surgery.” We would also encourage you to define a “nonprofit community service organization.” Without some specific definition of what institutions are included, it could create confusion about whether donated services would qualify for the tax credit.

KMS has always encouraged its member physicians to provide charitable or significantly reduced cost care to indigent and vulnerable populations as a way of improving access to care for those individuals and families. If this legislation encourages health care providers to increase the amount of such care they provide, and thereby improve access, we support it. Thank you for the opportunity to offer these comments.

**HS TAXATION COMMITTEE
2-1-2007
ATTACHMENT 12**



Written Testimony on House Bill 2102

*Income tax credit for health care professionals who contribute
time and professional expertise to community service organizations*

Sisters of Charity of Leavenworth Health System operates three safety net clinics and a dental clinic in the state of Kansas: Marian Clinic and Marian Clinic Dental in Topeka, Duchesne Clinic in Kansas City, and Saint Vincent Clinic in Leavenworth. SCL Health System supports HB 2102, with clarifying language.

Incentives to increase the number of hours of volunteer time donated by health care providers would contribute to the needed expansion of safety net health clinics in Kansas. Attached is information about volunteer health care provider services utilized at the Kansas clinics of the SCL Health System.

Our clinics serve an important role by providing access -- and a medical home -- to those who do not have insurance and are not qualified for Medicaid or Medicare. Without safety net clinics, many of our patients would not receive care, would go to the emergency room for care, or would end up in the emergency room because their health condition was neglected. Unnecessary use of the emergency room is a significant contributor to rising health care costs, and safety net clinics serve an important role in controlling those costs and improving the health of Kansans.

When a volunteer health care provider is needed at our clinics, recruitment is often done by word of mouth. Incentives to increase the number of hours that volunteer health care providers contribute to safety net clinics would help the clinics expand services or extend their hours. There is particular need in Kansas for increasing the volunteer hours contributed by dentists.

We share the concern that HB 2102 needs to be amended to clarify that the tax deduction offered in H 2102 is not be considered compensation for purposes of the Charitable Health Care Act, which provides some protection from liability for volunteer health care providers. We also ask that the legislature explore whether a tax deduction would interfere with any federal protections for volunteers. Pending resolution of those issues, we urge your vote in favor of HB 2102.

*Respectfully submitted,
Cynthia Smith
SCLHS Advocacy Counsel*

HS TAXATION COMMITTEE
2-1-2007
ATTACHMENT 13

STATEMENT FROM MARILYN PAGE, EXECUTIVE DIRECTOR

Does my doctor volunteer?” Marian Clinic staff members hear this question frequently from supporters. This interest from the community affirms the important role volunteers play in bridging the gap between illness and healthier lives for the uninsured.

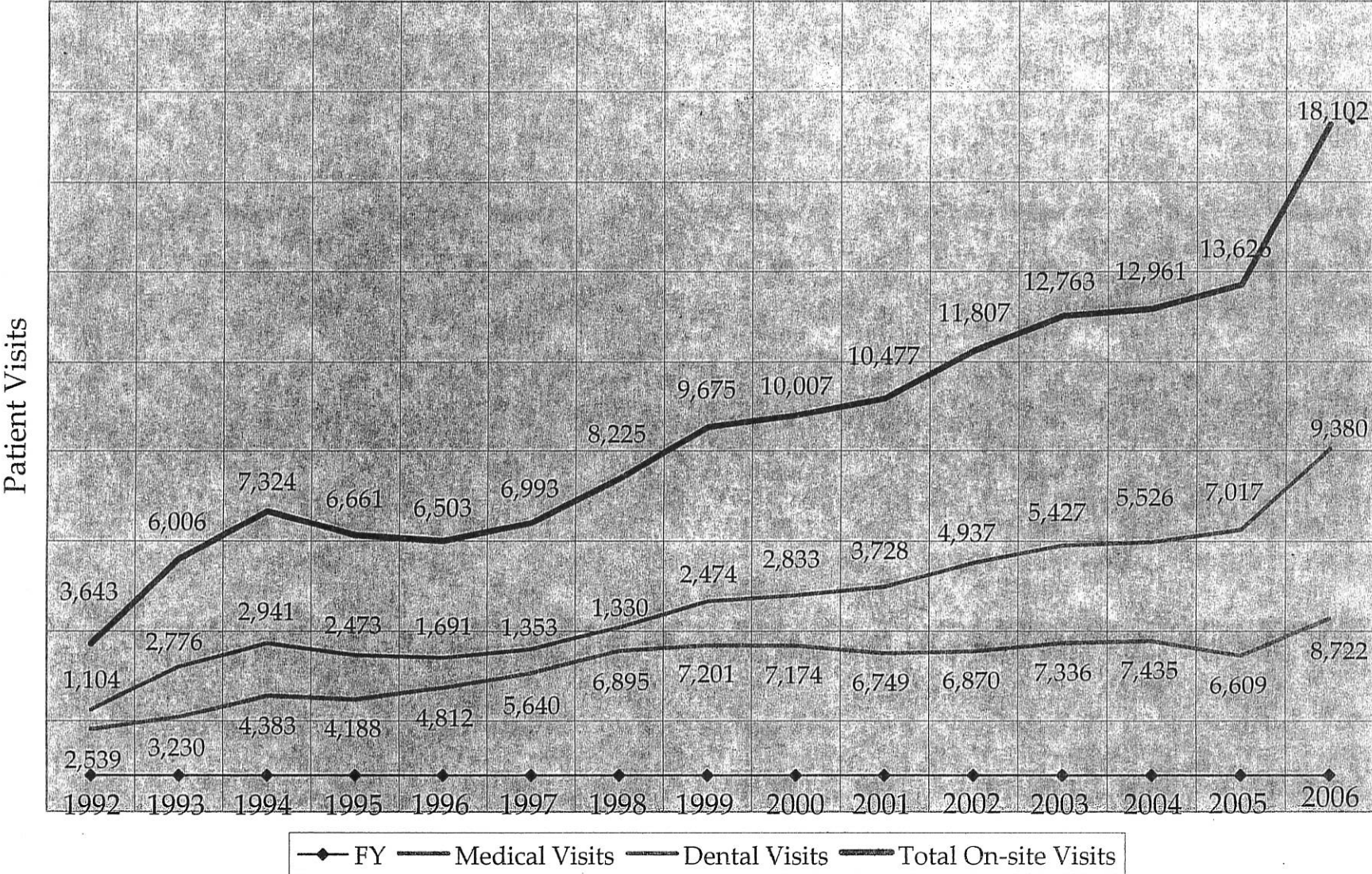
Marian Clinic is an affiliate of the Sisters of Charity of Leavenworth Health System. From its beginnings in 1988, Marian Clinic services for the uninsured have been rooted in physician volunteerism. The Clinic’s first director, Patricia Hurley, recruited an extraordinary cadre of volunteers to share her concern for the health care poor. At her retirement in 1997, she said that “To some people, this [human resource] is the most valuable asset. The Clinic has given volunteers a model opportunity in which to work [and] to show their compassion.”

Topeka area health care professionals carried the tradition forward, keeping their commitments and recruiting their peers. Today the volunteer effort at Marian Clinic is phenomenal. Over 230 health care professionals giving of their time and skill to those in need are a real tribute to the Topeka community. I do not know of such an extensive network of care for the medically underserved anywhere else.

Some 70 doctors, nurses and health care providers volunteer on-site to see and treat patients. An analysis of Marian Clinic’s on-site physician services by the county’s coordinating office, HealthAccess, estimated the market value to be \$358,000 in 2005.

Beyond the on-site volunteers, we maintain a referral network of over 150 physician specialists who provide consultations, treatment, even surgery, at no charge to Clinic patients. In 2006 this group accepted 1400 charity care referrals with an estimated market value of \$350,000. The radiologists, anesthesiologists, pathologists and other hospital staff also donate their services. This remarkable collaboration within the medical community allows us to offer nearly seamless care for even complicated patients.

Marian Clinic Service History





Caritas Clinics, Inc.

Saint Vincent Clinic • 818 N. 7th Street • Leavenworth, KS 66048
Phone: 913-651-8860 Fax: 913-682-4409

Duchesne Clinic • 636 Tauromee • Kansas City, KS 66101-3042
Phone: 913-321-2626 Fax: 913-321-2651

29 January 2007

Re: House Bill No. 2102

Caritas Clinics, Inc., (Duchesne Clinic in Wyandotte County and Saint Vincent Clinic in Leavenworth County) fully supports House Bill No. 2102. As primary health care clinics serving individuals who are without insurance and live at or below 150 percent of the Federal Poverty Guidelines, volunteer medical providers are an integral part of the medical care that we provide. Last year alone, 36 medical volunteers provided over 2,300 hours of service on-site at the clinics. This equated to \$151,889 in donated medical care that was provided on-site. This does not account for the time that physicians donated is seeing patients at their own offices.

This bill would be of significant benefit to the clinics. While the clinics operate with mostly staff mid-level providers (nurse practitioners and physicians assistants), the clinics are always in the process of recruiting and retaining volunteer medical providers. This bill would allow us to provide an additional incentive to volunteering at the clinics.

Amy Falk
Executive Director



OUR MISSION

We will, in the spirit of the Sisters of Charity, reveal God's healing love by improving the health of the individuals and communities we serve, especially those who are poor or vulnerable.

OUR VISION

SCLHS will realize its Mission through the unyielding pursuit of clinical excellence, strategic growth, and health care for all.

HEALTH POLICY PLATFORM

Access to health care for all must be vigorously and thoughtfully pursued through meaningful reform in the way health care is delivered and paid for in this country.

PRIORITY ADVOCACY ISSUES

FUNDING: Funding and Reimbursement policy should promote quality, continuity of care, fairness, and access for all.

TECHNOLOGY: Progress in the development of health information technology requires government action to support participation and investment, and to promote standardization to make technology as useful as possible.

TAX POLICY: Existing tax-exempt policy should be maintained for charitable health care organizations that demonstrate community benefit.

WORKFORCE: Ongoing efforts to identify, educate and develop the health care workforce are key to providing for current and future needs of the population.

PRESERVATION OF THE SAFETY NET: Community hospitals need the support of the government to prohibit physician self-referral to limited service facilities detrimental to the health needs of the community.

SHARED RESPONSIBILITY: Health care policy should promote shared responsibility for health and wellness.



ABOUT SCLHS

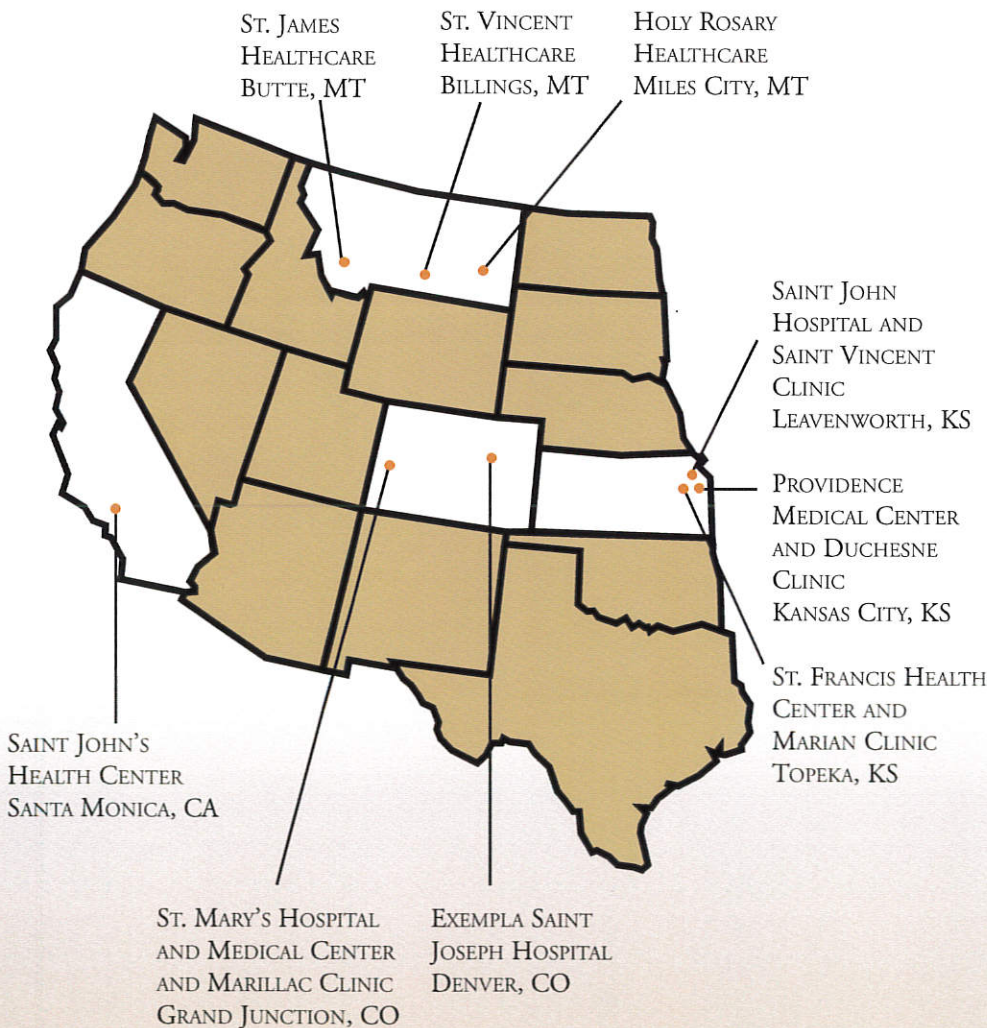
The Sisters of Charity of Leavenworth Health System (SCLHS) is a Catholic not-for-profit health system, composed of nine hospitals and four stand alone clinics in California, Colorado, Kansas and

Montana. SCLHS is sponsored by the Sisters of Charity of Leavenworth.

SCLHS encompasses nearly 11,000 employees and 2,500 licensed beds, in communities stretching across the western United States. Our staff are highly

trained professionals dedicated to a culture that serves both the patient and the healer. The quality of our leadership, our unyielding pursuit of excellence and dedication to the communities we serve define us as a system.

WHERE WE SERVE



MISSION

We will, in the spirit of the Sisters of Charity, reveal God's healing love by improving the health of the individuals and communities we serve, especially those who are poor or vulnerable.

CORE VALUES

Excellence

We offer excellent and compassionate care.

Respect

We recognize the sacred worth and dignity of each person.

Response to Need

The health care we offer is based on community need, with a special concern for the poor.

Stewardship

We are mindful that we hold our resources in trust.

Wholeness

We value the health of the whole person—spiritual, psycho-social, emotional and physical.

VISION

SCLHS will realize its Mission through the unyielding pursuit of clinical excellence, strategic growth, and health care for all.



KANSAS DENTAL ASSOCIATION

Date: February 1, 2007

To: House Committee on Taxation

From: Kevin J. Robertson, CAE
Executive Director

RE: Testimony Supporting HB 2102

I apologize for being unable to join you in person this morning as the Kansas Dental Association (KDA) is in the midst of setting up our sixth Kansas Mission of Mercy free dental clinic which opens tomorrow at the Kansas Expocentre. Thank you for the opportunity to provide you these comments on behalf of KDA, which represents approximately 80% of Kansas' 1,200 licensed dentists. My testimony is in support of HB 2102 which provides favorable tax incentives for dentists and other healthcare professionals who provide more than 30 hours/year of free and reduced fee services through a nonprofit community service organization.

Each year Kansas dentists provide untold hours of charity care to underserved populations across Kansas. The KDA tracked about 2,000 hours of donated service by dentists in 2006 through KDA sponsored and organized projects alone. This free dental care helped 2,200 Kansans and totaled \$1.2 million as a result of the KDA's Children's Dental Health Month sealant programs, Give Kids a Smile free care program and the Kansas Mission of Mercy free dental clinic.

In addition to the KDA's own efforts to assist dentally underserved persons, many dentists volunteer their time at community health centers, local health departments and other low income clinics. Many of these clinics rely heavily on area dentists volunteering their professional time to treat a significant number of patients. Some clinics are more successful than others in recruiting dentists to donate their time. As efforts continue to increase and expand the number of "safety net" dental clinics throughout Kansas, HB 2102 would provide an excellent incentive that the KDA believes would encourage more dentists to provide volunteer hours at community health centers and treat additional patients.

The KDA would request that the Committee establish a definition for "nonprofit community service organization" to better clarify the setting in which dentists could donate their time to qualify for the tax credit.

Thank you for the opportunity to present the KDA's comments to you today.

**HS TAXATION COMMITTEE
2-1-2007
ATTACHMENT 14**



1208 SW TYLER
TOPEKA, KANSAS 66612-1735
785.233.8638 • FAX 785.233.5222
www.nursingworld.org/snas/ks
ksna@ksna.net



ELLEN CARSON, PH.D., A.R.N.P., B.C.
PRESIDENT

THE VOICE AND VISION OF NURSING IN KANSAS

TERRI ROBERTS, J.D., R.N.
EXECUTIVE DIRECTOR

For More Information Contact:
Terri Roberts J.D., R.N.
785.233.8638 troberts@ksna.net

H.B. 2102 Income Tax Credit for Health Professionals Who Contribute Time and Professional Expertise to Community Service Organizations

January 31, 2007
Taxation Committee

THE KANSAS STATE NURSES ASSOCIATION supports HB 2102 and the concept of recognizing in a tangible way, the volunteer efforts of the more than 600 RN's and ARNP's that volunteer in the Charitable Health Care Provider Program (KSA 40-3401 and 65-4921). Many of the safety-net clinics rely heavily on volunteer RN and ARNP staff support. Thank you for your consideration and support.



KANSAS VETERINARY MEDICAL ASSOCIATION

816 SW Tyler, Suite 200, Topeka, KS 66612-1635 ■ (785) 233-4141 ■ FAX: (785) 233-2534

Testimony
House Taxation Committee
9:00 a.m. Thursday, February 1

My name is Gary Reser and I am executive vice president of the Kansas Veterinary Medical Association (KVMA). The KVMA represents the Kansas veterinary profession and is composed of over 600 members in Kansas and almost 400 members in all other states.

The KVMA supports H. B. 2102 and respectfully requests that you vote "yes" for passage.

H. B. 2102 provides a Kansas income tax credit for veterinarians at the rate of \$30 per hour, after an initial 30 hours a year, for each hour donated to a non profit community service organization.

The credit shall not exceed \$2000 per taxable year per veterinarian.

It is safe to say that the hundreds of Kansas veterinarians, who contribute thousands of hours each year to various community service organizations dealing with the care and treatment of companion animals, would be appreciative of the assistance provided to them by H. B. 2102.

H. B. 2102 might very well cause veterinarians who already generously and unselfishly donate their time and expertise to community service organizations to participate even more and provide incentive to some veterinarians who do not take part in such activities at this time.

Volunteering at local humane shelters, providing free vaccinations, donating veterinary diagnostic and surgical duties, and offering spay/neuter services for low income families and feral cat caretakers are only scratching the surface on the types of contributions made for the public good by veterinarians all over Kansas.

One veterinarian told me yesterday that she was amazed when she learned from her accountant that there was not already a tax credit for the hundreds of hours she has spent volunteering her time. It did not, however, prevent her from continuing her service organization duties.

Another veterinarian told me the community service organization he serves on a volunteer basis always tells him that, of course, he can receive a tax credit for his work. He knows he really can't, but continues to assist them as always.

Once again, please vote "yes" on H. B. 2102.

Thank you!

Gary Reser
Kansas Veterinary Medical Association