

MINUTES OF THE SENATE PUBLIC HEALTH AND WELFARE COMMITTEE

The meeting was called to order by Chairman Jim Barnett at 1:30 p.m. on March 19, 2009, in Room 136-N of the Capitol.

All members were present except Senator Kelsey who was excused.

Committee staff present:

Nobuko Folmsbee, Office of the Revisor of Statutes
Doug Taylor, Office of the Revisor of Statutes
Kelly Navinsky-Wenzl, Kansas Legislative Research Department
Terri Weber, Kansas Legislative Research Department
Jan Lunn, Committee Assistant

Doug Taylor, office of the revisor of statutes, briefed those attending on the following bills:

HB 2359 - Cosmetology board written renewal examination information booklet.

HB 2343 - Nurses; licensure; qualifications.

HB 2359 deals with Board of Cosmetology and license renewal by deleting a statutory requirement for the development of a written booklet. Consequently, online renewals for cosmetology practitioners would be allowed which would reduce agency expenditures approximately \$15,000.

HB 2343 would amend the qualifications for licensed practical nurses (LPNs) and registered professional nurses (RNs) in the Nurse Practice Act. The bill would delete the requirement that applicants for RN or LPN licensure be high school graduates. Recently, there has been an increase in the number of nursing school graduates who were home schooled and did not receive a high school diploma or GED. The Board of Nursing believes the high school graduation requirement is no longer needed as schools of nursing have an admission procedure which includes review of ACT or SAT scores.

Senator Barnett opened the hearing on **HB 2359**, by recognizing Mary Lou Davis, executive director Kansas Board of Cosmetology, who spoke in support of this legislation (Attachment 1) explaining potential savings that could be realized by deleting the requirement for a written booklet to be mailed to cosmetology practitioners.

There were no opponents to **HB 2359**; Senator Barnett closed the hearing on **SB 2359**.

Senator Barnett, opened the hearing on **HB 2343**. Mary Blubaugh, executive administrator for the Kansas State Board of Nursing, provided testimony (Attachment 2) supporting this legislation. She indicated the Board of Nursing no longer believes a high school diploma or equivalent is required for licensure due to admission procedures used by schools of nursing, the State Board of Nursing regulates nursing schools and surveys are conducted regularly, and 19 other states do not require high school graduation or its equivalent for licensure.

Carolyn Middendorf, representing the Kansas State Nurses Association, spoke in support of **HB 2343** (Attachment 3). Ms. Middendorf explained that since the establishment of the law, education for registered nurses has transitioned from diploma education to associate or baccalaureate college degrees. These programs are required to meet specific standards for approval by the Board of Regents and the Board of Nursing.

Senator Barnett closed the hearing on **HB 2343**.

Senator Barnett called attention to follow-up information distributed in the committee members' packets of information which includes: follow-up information related to **HB 2162** (Attachment 4), and comments related to **SB 166** which Mike Hammond, Association of Community Mental Health Centers of Kansas, Inc., requested be included (Attachment 5).

Upon a motion by Senator Kelly to favorably pass out **HB 2359** and a second by Senator Brungardt, the motion passed unanimously.

CONTINUATION SHEET

Minutes of the Senate Public Health and Welfare Committee at 1:30 p.m. on March 19, 2009, in Room 136-N of the Capitol.

Senator Wysong moved to pass out **HB 2343** for favorable consideration by the Senate; Senator Brungardt seconded the motion; the motion carried.

Senator Barnett asked those attending to consider **HB 2162 - Marriage and family therapists educational requirements and psychologists application fees**. Senator Barnett reported that in previous discussions, an amendment had been proposed and since that time, interested parties had been working collaboratively to work out differences. What has been presented to the chair for committee members' consideration is the base bill. The amendment previously discussed is not needed at the current time.

Upon a motion by Senator Schmidt to move out **HB 2162** favorably for passage, and a second by Senator Colyer, the motion passed.

Senator Barnett requested committee members turn attention to **SB 166 - Medicaid; repealing statute prohibiting prior authorization for certain mental illness** which represents another challenging issue concerning a number of interested parties dealing with the issue of mental health prescription drugs, and a broader issue of safety, particularly in children. Dr. Andy Allison was present to discuss the collaboration efforts with representatives from the Kansas Medical Society, stakeholders, and others. A compromise amendment was suggested (Attachment 6) which accomplishes the original intent of the bill. The amendment was reviewed with committee members.

Jerry Slaughter, Kansas Medical Society, offered comments relative to the amendment and the issue of clearly defining the responsibilities and authorities of the mental health prescription drug advisory committee (no written testimony).

Ms. Folmsbee clarified that this would be considered a substitute bill rather than an amendment to the original bill which repealed statute. What was presented for committee consideration was a bill that did not repeal current statute but added subsections (b) through (f). Ms. Folmsbee continued to brief senators on the contents of the substitute bill.

Senators inquired about the role of the Kansas Health Policy Authority in regulating or advising on the safety of other prescription medicines, the mental health prescription advisory committee, the committee membership, appointees, and terms of appointment.

Senator Barnett recognized Mike Hammond from the Association of Community Mental Health Centers of Kansas, Inc., who indicated that he could not support the recommendations being discussed because the majority of members in his organization had not had the opportunity to review and to provide feedback on the recommendation. He carefully reviewed sections of the previous amendment with the recommended substitute legislation (no written testimony).

There was no action on **SB 166 - Medicaid; repealing statute prohibiting prior authorization for certain mental illness medications**.

Senator Barnett asked committee members to consider action on **HB 2221 - Disclosure of certain child care information**. Senator Wysong moved to delete the language of **HB 2221** and to insert language of **SB 25** as passed by the Senate committee of the whole, and to pass out **HB 2221** favorably for advancement to the full Senate. Senator Schmidt seconded the motion which passed on a vote of 7 in favor and 1 against the motion.

The meeting was adjourned at 2:33pm.

KANSAS BOARD OF COSMETOLOGY

KATHLEEN SEBELIUS, GOVERNOR

Senate Committee on Public Health and Welfare
March 19, 2009

Testimony by Mary Lou Davis, Executive Director

Mr. Chairman and Members of the Committee:

On-Line Renewal

House Bill 2359 revises one provision within K.S.A. 65-1904. The Board's request for statutory revision would allow the agency to implement on-line renewals for practitioners in the cosmetology professions.

Currently, K.S.A. 65-1904 requires the Board send licensure renewal packets to cosmetology, nail technology, esthetic and electrology practitioners. The Board currently licenses over 21,000 practitioners in these professions.

Each licensure renewal packet expense is \$1.89; this is an annual expense of approximately \$20,412. Should this legislation be enacted, the Board will continue to send renewal notices to practitioners. However the cost would be reduced to \$0.48 per practitioner, thus potentially reducing the Board's annual expense to approximately \$5,184.

Both the practitioner and agency will benefit with this law revision. The practitioner who renews on-line will more timely receive their license and the Board will have a cost savings as well as more efficiency in work processes.

Please note there is no restriction in law that will negate the implementation of on-line renewals for cosmetology, tanning and body art facilities. Currently the Board licenses over 4,600 facilities. The Board does send courtesy notices for these annual renewals and will continue this practice.

Monthly expense related to practitioner renewal

900 renewal packets	Law booklets	x	.80	\$ 720		
	Envelope/label	x	.11	\$ 99		
	Renewal exams	x	.05	\$ 45		
	Postage	x	.93	\$ 837		
			\$1.89	\$ 1,701 per month	\$20,412 per year	

Monthly notice reminders with on-line renewal implementation

900 renewal notices	Envelope/label	x	.04	\$ 36		
	Renewal exam/letter	x	.10	\$ 90		
	Postage	x	.34	\$ 306		
			.48	\$ 432 per month	\$5,184 per year	

Public Health and Welfare

Date:

Attachment:

03/19/09

1

Health and Human Services Committee
March 19, 2009

Testimony in Support of Senate HB 2343

Mary Blubaugh MSN, RN
Executive Administrator

Good Afternoon Chairman Barnett and Members of the Public Health & Welfare Committee. My name is Mary Blubaugh Executive Administrator for the Kansas State Board of Nursing. I am providing testimony on behalf of the Board Members to provide support of HB 2343 which will remove a high school graduation or the equivalent as a requirement for licensure as a Registered Nurse or Licensed Practical Nurse.

The current statute requires graduation from a high school accredited by the appropriate legal accrediting agency or the equivalent of a high school education, as determined by the state department of education for licensure in Kansas as a Registered Nurse or Licensed Practical Nurse. Over the last couple of years there has been an increase in the number of graduates from nursing school who were home schooled and have not received a high school graduation or GED. Since the Department of Education does not accredit home schools, the statute requires the equivalent as determined by the Department of Education, which is a GED. Last year we had several home schooled applicants for licensure who had not graduated from an accredited high school or did not have a GED. The Board of Nursing worked with the Department of Education to assist these applicants to meet the requirement for licensure. The Department of Education issued letters that stated that they believed that any student had the equivalent of a high school education if they had graduated from a school of nursing with a bachelor or associate degree or had successfully completed a licensed practical nurse school, and that school is accredited by national certification agency.

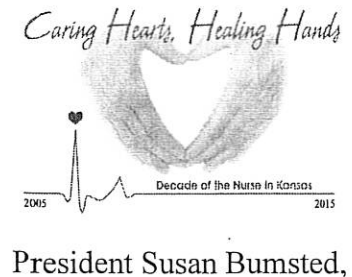
The board of nursing has reviewed the statute and discussed the issue at length. They believe that a high school graduation or the equivalent is no longer needed as a requirement for licensure due to:

1. Schools of nursing have an admission procedure which includes review ACT or SAT scores, entrance exams which assess math, writing, reading, and conduct interviews.
2. The Board of Nursing regulates nursing schools and surveys are conducted on regular bases.
3. A review on the National Council of States Boards of Nursing "2007 Member Board Profile" reveals that there are 19 states that do not require a high school graduation or its equivalent for licensure.

We ask for favorable action on this legislation. Thank you for your time and consideration and I will stand for questions.



1109 SW Topeka Blvd
Topeka, Kansas 66612-1602
(785) 233-8638 • Fax (785) 233-5222
www.nursingworld.org/snas/ks
ksna@ksna.net



Testimony Before the
Public Health and Welfare Committee
HB 2343: Nurse Licensure Requirements

Chairman Barnett and Committee Members:

My name is Carolyn Middendorf and I represent the Kansas State Nurses Association (KSNA). KSNA is supportive of HB 2343 which would remove from the Nurse Practice Act the language requiring a high school education or its equivalent as a licensure requirement for registered nurses and licensed practical nurses.

With an increase in the number of home schooled students there has been a resultant increase in the number of nursing students who have successfully completed two or four years of a college education, but do not have a basic high school diploma or GED recognized by the Department of Education. Recent graduates have been faced with not meeting this requirement for licensure, and even though they were subsequently allowed to test and become licensed, it created confusion for the students and nursing programs, and a delay in completion of their application.

Since the establishment of the law, education for Registered Nurses has transitioned from hospital based diploma education to associate or baccalaureate college degrees. These programs are required to meet specific standards to be approved by the Board of Regents, the Board of Nursing and most are accredited by national organizations. Programs educating Licensed Practical Nurses meet similar standards. KSNA believes that students meeting the admission requirements for these programs and successfully completing the program of study have shown the scholastic ability that the high school graduation requirement was originally meant to demonstrate.

KSNA asks you to favorably pass HB 2343 out of committee. Thank you.

Public Health and Welfare

Date:

Attachment:

03/19/09

3

February 13, 2009

Joint Committee on Administrative Rules and Regulations

To the committee:

Thank you for the opportunity to submit written testimony regarding K.A.R. 102-2-6. I am head of the Department of Sociology, Anthropology, and Social Work at Kansas State University and cannot be with you today because of budget meetings.

Although I appreciate the intent of the rules and regulation change put forth by BSRB to protect both social work education and programs in Kansas, I am concerned that it will have the opposite effect. My greatest concern is section (3) (b). It states "at least 50% of the required program coursework be completed in residence at the institution from which the degree is granted....." Our undergraduate major in social work requires 124 hours for graduation. This rule means that 62 of those hours must be taken in residence for a graduate to be eligible for licensure. We have many transfer students who come with more than 62 hours of credit including community college students. We also have students who have taken a bulk of their required hours through distance education. It appears that both of these groups would not be eligible to practice social work in Kansas if this rule takes effect.

Defining the method of educational delivery as in (C) (2) "in residence" students ... "means that the student is present at the physical location of the institution for the purpose of completing coursework during which the student and one or more core faculty members are in face-to-face contact" is problematic. Paragraph (B) defines a core faculty member as "an individual whose primary professional employment is at the institution in which the program is housed" and paragraph (3) defines primary professional employment as "a minimum of 20 hours per week of instruction, research, any other service to the institution in the course of employment, and the related administrative work." So, this rule specifies the educational delivery method and who can provide the instruction. This is overly prescriptive for programs that are accredited by the Council on Social Work Education. The notion that students can learn only by face-to-face delivery is a bit behind the times. Approximately 80% of K-State students take online courses, many of whom do so while in residence.

Public Health and Welfare

Date:

Attachment:

03/19/09

4

Will students who take online classes be eligible for licensure? Will we have to create some sort of reporting mechanism that keeps track of what courses are online and what courses are face-to-face? It seems to me to be an unnecessary expenditure given our current budget situation.

Finally, the residency requirement greatly limits the opportunity for social work programs in Kansas to develop quality distance education courses. This is a great disservice to those areas of the state that do not have easy access to social work programs, but have great need for social workers. The University of Kansas is in the first year of a \$2.5 million, five year federal grant designed to expand the child welfare workforce. I have the opportunity to be a part of the grant advisory committee with both public and private child welfare agency representatives from across the state. Those from the more rural areas of the state are begging for social work education to be available to their employees in a way they can maintain their employment. We must find the means to meet this need without requiring excessive travel or relocation. We all know that resources are limited. Distance education offers an alternative to meet this need, which will strengthen the workforce. Why, at this critical time, would BSRB promulgate a rule that limits social work educators' ability to provide a social work education to every Kansan who wants one?

Although I appreciate their diligence in maintaining high standards for social work education, I urge you to encourage BSRB to rethink this rule and seek input from all social work programs in the state.

Thank you,

Betsy Cauble

A. Elizabeth Cauble, PhD, LMSW
Head, Dept. of Sociology, Anthropology, and Social Work
Kansas State University



**Joint Committee on Administrative Rules and Regulations
Testimony on BSRB Proposed Regulations Regarding KAR 102-2-6
February 13, 2009**

Topeka Office

3712 SW Burlingame Circle
Suite A
Topeka, KS 66609
785/271-1200
785/271-6200 (Permanency Fax)
785/266-3428 (CPA Fax)

Corporate Office

21350 West 153rd Street
Olathe, KS 66061-5413
913/322-4900
www.kvc.org

Chairman Holmes and honorable members of the Committee, I am Kyle Kessler, Vice-President for Administration and Governmental Affairs at KVC Behavioral HealthCare. We appreciate the opportunity to provide testimony regarding the possible adoption of regulations by the Behavioral Sciences Regulatory Board (BSRB) that would affect distance learning programs in the field of social work that are currently being offered. Currently, there are four masters-level social work programs in Kansas that are located in the cities of Wichita, Topeka, and Lawrence. These are all excellent programs that have produced some of the brightest minds who are engaged in helping some of the most vulnerable citizens of Kansas.

KVC Behavioral HealthCare, Inc. (KVC) is a private, not-for-profit organization providing medical and behavioral healthcare, social services and education to children and families. KVC provides a wide array of behavioral healthcare services that include inpatient and outpatient mental health services as well as foster care case management. As a provider of the aforementioned services, KVC is a good judge of the necessary qualifications to accomplish effective treatment for consumers. A quality education is essential to the provision of these services.

The regulations being proposed by the BSRB are the direct result of the application and admission of Kansans to the Masters in Social Work Program at the Florida State University School of Social Work. The online program through FSU is accredited by the Council on Social Work Education (CSWE), which is the nationally recognized accrediting body for social work education. Two accounts from KVC employees and licensed bachelors level social workers who are currently participating in this program are as follows:

KVC Case Manager and FSU MSW student, Rachel Malchose, provides the following input and account regarding the FSU MSW Program.

"I am currently in my second semester of this two year program. So far the program has been a great experience. I really couldn't imagine going to school any other way. It has been extremely convenient with having a family, working full-time and going to school part-time. I feel that this program has the exact same expectations/requirements as any other program would have and it's fully accredited. In all of the classes, the instructors have outlined what is expected each week and when major assignments are due. We have been required to complete weekly chapters readings, listen to audio power point presentations, watch videos that pertain to certain chapters, participate in weekly discussion boards, complete group presentations, complete debate papers, complete power point presentations, weekly quizzes, exams, etc. I feel that the instructors have provided a wide range of materials to enhance learning. I feel that this program has already taught me so much, especially in regards to my current job, and I still have 4 semesters to go."



A second student and KVC Case Manager, Susan Henry, provides the following input and account regarding the FSU MSW Program.

“I am currently in my second semester in the Master's of Social Work program through Florida State University. I have gained a great deal of knowledge through the classes I have taken thus far. We're required to have weekly interaction with our classmates through the discussion boards set up by the instructors. We are held accountable for our course work by being required to submit weekly posts on our text or articles we're assigned each week. I feel it is a credible program. We gain the same knowledge through weekly readings, written assignments, weekly quizzes and term papers you would in any other program without the face to face interaction. The part-time online set up of the classes has been a great benefit to me personally since I work full-time and have two small children.”

In conclusion, KVC is opposed to these proposed regulations which limit educational opportunities and actually would implement stricter standards for educational programs than are required nationally. In fields such as child welfare and mental health treatment, a shortage of social workers already exists. The children and families of Kansas deserve the most well educated workforce, and KVC believes that additional educational opportunities are a step in this direction. This concludes my testimony. I would be happy to stand for questions.

**FORT HAYS STATE UNIVERSITY
SOCIAL WORK PROGRAM
REQUIRED BSW CURRICULUM**

FALL**SPRING**Freshman

ENG 101	English Composition I	3 hrs.	ENG 102	English Composition II	3 hrs.
COMM 100	Fundamentals of Oral Communication	3 hrs.	HHP 200	Personal Wellness	3 hrs.
*SOC 140	Intro. to Sociology	3 hrs.	*PSY 100	General Psychology	3 hrs.
MIS 101	Introduction to Computer Information Syst.	3 hrs.	*POLS 101	American Government	3 hrs.
Mathematics	General Education requirement	<u>3 hrs.</u>	International Studies	General Education Requirement	<u>3 hrs.</u>
		15 hrs.			15 hrs.

Sophomore

*BIOL 100	Human Biology	3 hrs.	*MATH 250	Elements of Statistics	3 hrs.
*BIOL 102	Lab Experiences in Biology	1 hrs.	*MLNG 226	Beginning Spanish II	5 hrs.
SOCW 260	Intro. to Social Work	3 hrs.	*ENG 303	Technical and Professional Writing	3 hrs.
*MLNG 225	Beginning Spanish I	5 hrs.	*IDS 350	Multiculturalism in the U.S.	3 hrs.
International Studies	General Education requirement	3 hrs.	Math/Natural Science	Gen. Education Elective	<u>3 hrs.</u>
IDS 300	Economic Ideas & Current Issues	<u>3 hrs.</u>			17 hrs.
		18 hrs.			

Junior

SOC 362	Methods of Social Research	3 hrs.	SOCW 322	HBSE II	3 hrs.
SOCW 320	HBSE I	3 hrs.	SOCW 310	Social Welfare Policy & Services I	3 hrs.
SOCW 380	Generalist Practice: Intro. to Practice	3 hrs.	SOCW 381	Generalist Practice: The Helping Relationship	3 hrs.
*IDS 400	Bioethics	3 hrs.	SOCW 382	Generalist Practice: Group Systems	3 hrs.
Social Work Elective		<u>3 hrs.</u>	Elective		<u>3 hrs.</u>
		15 hrs.			15 hrs.

Senior

SOCW 461	Generalist Practice: Family Systems	3 hrs.	SOCW 467	Social Work Professional Seminar	3 hrs.
SOCW 462	Generalist Practice: Organizational & Community Systems	3 hrs.	SOCW 468	Field Practicum	<u>12 hrs.</u>
SOCW 410	Social Welfare Policy & Services II	3 hrs.			15 hrs.
SOCW 420	HBSE III	3 hrs.			
SOCW 463	Introduction to the Practicum	2 hrs.			
IDS 333	Exploration in the Humanities Elective	<u>1 hr.</u>			
		15 hrs.			

TOTAL CREDIT HOURS**125 hrs.**

* Cognates: Required Non-Social Work Courses

^ *ECFI 202 Principles of Econ: Macro is allowed in place of IDS 300 for students transferring to FHSU from junior colleges and other colleges or universities.

Students must carry 15-16 hours for 7 semesters and 18 hours for 1 semester in order to reach in 4 years the 125 hours required to graduate. Fewer hours per semester can be taken if students attend summer school sessions.

**FORT HAYS STATE UNIVERSITY
SOCIAL WORK CORE COURSES**

*SOCW 260	INTRODUCTION TO SOCIAL WORK.....	3 hrs.
SOCW 320	HUMAN BEHAVIOR AND THE SOCIAL ENVIRONMENT I.....	3 hrs.
SOCW 322	HUMAN BEHAVIOR AND THE SOCIAL ENVIRONMENT II.....	3 hrs.
SOCW 420	HUMAN BEHAVIOR AND THE SOCIAL ENVIRONMENT III.....	3 hrs.
*SOC 362	METHODS OF SOCIAL RESEARCH.....	3 hrs.
SOCW 310	SOCIAL WELFARE POLICY AND SERVICES I.....	3 hrs.
SOCW 410	SOCIAL WELFARE POLICY AND SERVICES II.....	3 hrs.
SOCW 380	GENERALIST PRACTICE: INTRODUCTION TO PRACTICE.....	3 hrs.
SOCW 381	GENERALIST PRACTICE: THE HELPING RELATIONSHIP.....	3 hrs.
SOCW 382	GENERALIST PRACTICE: GROUP SYSTEMS.....	3 hrs.
SOCW 461	GENERALIST PRACTICE: FAMILY SYSTEMS.....	3 hrs.
SOCW 462	GENERALIST PRACTICE: ORGANIZATIONAL AND COMMUNITY SYSTEMS.....	3 hrs.
SOCW 463	INTRODUCTION TO THE PRACTICUM.....	2 hrs.
SOCW 467	SOCIAL WORK PROFESSIONAL SEMINAR.....	3 hrs.
SOCW 468	FIELD PRACTICUM.....	<u>12 hrs.</u>
		<u>53 hrs.</u>

- * SOC 362 Methods of Social Research is available online through the Virtual College.
- * SOC 260 Introduction to Social Work is available online through the Virtual College.

SOCIAL WORK PROGRAM
LIBERAL ARTS COGNATES
NON-SOCIAL WORK REQUIRED COURSES

BIOL 100	HUMAN BIOLOGY	3
BIOL 102	LABORATORY EXPERIENCES IN BIOLOGY	1
POLS 101	AMERICAN GOVERNMENT	3
PSY 100	GENERAL PSYCHOLOGY	3
SOC 140	INTRODUCTION TO SOCIOLOGY	3
ENG 303	TECHNICAL AND PROFESSIONAL WRITING	3
MATH 250	ELEMENTS OF STATISTICS	3
MLNG 225	BEGINNING SPANISH I	5
MLNG 226	BEGINNING SPANISH II	5
*IDS 300	ECONOMIC IDEAS AND CURRENT ISSUES	3
IDS 350	MULTICULTURALISM IN THE U.S.	3
IDS 400	BIOETHICS	<u>3</u>
TOTAL		38

* ECFI 202 Principles of Econ: Macro is allowed in place of IDS 300 for students transferring to FHSU from junior colleges and other colleges or universities.

The following cognates are available through the Virtual College:

BIOL 100 Human Biology
 POLS 101 American Government
 PSY 100 General Psychology
 SOC 140 Introduction to Sociology
 MATH 250 Elements of Statistics
 MLNG 225 Beginning Spanish I
 MLNG 226 Beginning Spanish II
 IDS 300 Economic Ideas and Current Issues
 IDS 350 Multiculturalism in the U.S.
 IDS 400 Bioethics

RECOMMENDED ELECTIVE COURSES

1. SOCIOLOGY OF THE FAMILY IN AMERICA
2. DEATH AND DYING
3. SOCIAL INEQUALITY
4. INTRODUCTION TO ETHICS
5. PRINCIPLES OF CULTURE
6. ABNORMAL PSYCHOLOGY
7. SOCIAL PSYCHOLOGY
8. HUMAN HEREDITY
9. HUMANS & THE ENVIRONMENT
10. SOCIOLOGY OF SEX ROLES
11. SOCIOLOGY OF AGING
12. MEDICAL SOCIOLOGY
13. MEDICAL TERMINOLOGY
14. NON PROFIT ORGANIZATIONS
15. GRANT PROPOSAL DEVELOPMENT
16. INTERNSHIP & GRANTWRITING

RECOMMENDED SOCIAL WORK ELECTIVE COURSES

1. TOPICS IN SOCIAL WORK: SOCIAL WORK AND THE LAW
2. SPIRITUALITY AND AGING: THE EMPOWERING RELATIONSHIP
3. WORKSHOP IN SOCIAL WORK
4. INDEPENDENT STUDY IN SOCIAL WORK
5. INTERNSHIP IN SOCIAL WORK

RECOMMENDED CERTIFICATE PROGRAMS

- | | |
|-----------------------|-----------------------------|
| 1. ETHNIC STUDIES | 5. COMMUNITY DEVELOPMENT |
| 2. LEADERSHIP STUDIES | 6. WOMEN AND GENDER STUDIES |
| 3. LIFE ISSUES | 7. JUSTICE STUDIES |
| 4. GRANT WRITING | 8. ADDICTIONS |




Association of Community Mental Health Centers of Kansas, Inc.

720 SW Jackson, Suite 203, Topeka, KS 66603
Telephone (785) 234-4773 Fax (785) 234-3189
Web Site: www.acmhck.org

Michael J. Hammond
Executive Director

March 19, 2009

Memorandum To: Senate Public Health and Welfare Committee
From: Michael J. Hammond, Executive Director 
RE: Status of Substitute for SB 166

As you contemplate action on Substitute for Senate Bill 166, I wish to express concern on behalf of my member organizations as to recent revisions made to original compromise language contained in Substitute for Senate Bill 166. We accept the original compromise language, but at this time we cannot accept the revised compromise language, due to time constraints in securing feedback from our member organizations and Medical Directors.

As you know, mental health stakeholders, with the Association of Community Mental Health Centers of Kansas, Inc., taking the lead, advocated against provisions of Senate Bill 166. We agreed to sit down with the Kansas Health Policy Authority (KHPA) to discuss opportunities for substitute language which would give KHPA some flexibility to address safety issues around mental health medications prescribed to children and adolescents who are Medicaid eligible. After much hard work, we were able to reach agreement on compromise language, which was presented to this Committee. However, the Kansas Medical Society asked for an opportunity to also offer input into the compromise language, after it was struck and submitted as Substitute for Senate Bill 166.

The input from the Kansas Medical Society was recently received by KHPA and was subsequently shared with mental health stakeholders who have been at the table and involved in developing the compromise language. A meeting was held on Monday, March 16, 2009, to review and discuss those suggested changes. Changes that have been made to the compromise language do remove language that was previously agreed to by the mental health stakeholders and KHPA. Only one of the three mental health stakeholder groups finds the revisions acceptable at this time. This Association cannot accept those changes without its member organizations and respective Medical Directors having a chance to review them and determine if the revised substitute language substantially changes their previous endorsement of the original compromise language. I would like to note that NAMI Kansas recognizes the importance of awaiting feedback from CMHC Medical Directors prior to accepting the revised language. Because of the changes made as a result of this late meeting on Monday of this week, and my inability to secure timely feedback from my member organizations and respective Medical Directors, the Association cannot accept the revised substitute language at this time. We do, however, accept the terms of the original compromise language.

If the Committee chooses to act favorably on Substitute for Senate Bill 166, we would ask that you act favorably on the original compromise language. If the Committee chooses to act favorably on the revised compromise language, we hope the Committee understands that the Association may need to seek amendments on the Senate floor to address any concerns that may arise after our member organizations and Medical Directors have ample time to review and consider the revisions that have been made.

Thank you for considering this input.

Public Health and Welfare
Date:
Attachment:

03/19/09
5

2009

Substitute for SENATE BILL NO. 166

By Committee on Public Health and Welfare

AN ACT creating a mental health prescription drug advisory committee; relating to medication for medicaid and SCHIP recipients; amending K.S.A. 2008 Supp. 39-7,121b and repealing the existing section.

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

Section 1. K.S.A. 2008 Supp. 39-7,121b is hereby amended to read as follows: 39-7,121b. (a) No requirements for prior authorization, preferred drug lists or other restrictions on medications used to treat mental illnesses such as schizophrenia, depression or bipolar disorder may be imposed on medicaid or state children's health insurance (SCHIP) recipients, except as provided in subsection (b). Medications that will be available under the state medicaid plan without restriction for persons with mental illnesses, except as provided in subsection (b), shall include atypical antipsychotic medications, conventional antipsychotic medications and other medications used for the treatment of mental illnesses.

(b) (1) The Kansas health policy authority may establish a mental health prescription drug advisory committee. The committee shall advise the Kansas health policy authority regarding the safe and cost-effective administration of mental health pharmacy benefits for the mediKan program. The committee shall also make recommendations regarding the safe administration of mental health prescription drug benefits for adolescents and children in the medicaid and SCHIP programs. The committee may recommend pharmacy claim edits, including the use of prior authorization

Public Health and Welfare

Date:

Attachment:

03/19/09

6

pursuant to K.S.A. 39-7,120, and amendments thereto, for the purpose of promoting patient safety within such programs. The Kansas health policy authority may implement the recommendations of the committee.

(2) The membership of the committee shall consist of 15 members appointed by the board of the Kansas health policy authority, including at least three licensed psychiatrists, two licensed physicians in the primary care specialties of family practice, pediatrics and internal medicine, one physician with an expertise in psychiatry practicing in an academic medical setting, one advanced registered nurse practitioner with a psychiatric specialization, two pharmacists, one social worker with mental health specialization, and four members of the public, two of which must be mental health consumers or family members of such persons. Preferred membership is to include those with experience serving child and adolescent medicaid enrollees, experience in a public mental health setting, and experience in the treatment of severe and persistent mental illness. Other qualifications may include knowledge and demonstrated leadership in the fields of psychology, social work, primary care medicine, advance practice nursing, pharmacy, and psychiatry for both child and adult.

(3) The appointments to the committee shall be for terms of three years. Members may be reappointed. The committee shall elect a chairperson from among the members who shall serve a one year term. The chairperson may serve consecutive terms. All

actions of the committee shall be upon the affirmative majority vote of the committee and the vote of each member present when action was taken shall be recorded by roll call vote.

(4) The committee shall hold public meetings prior to making recommendations to the medicaid drug utilization review board. A detailed agenda of the committee meetings shall be posted on the Kansas health policy authority website at least seven days prior to the meeting date. Any interested party shall be granted the opportunity for comment. Following the consideration of all presented information, the committee shall make their recommendations available to the public by posting on the Kansas health policy authority website 14 days prior to forwarding them on to the medicaid DUR, which includes a description of the recommendations being made and the evidence used to reach those recommendations.

(5) The committee may recommend and the Kansas health policy authority may provide education to prescribers to promote prescribing practices which are consistent with improving care and patient safety. Based on the recommendations of the committee the Kansas health policy authority may implement a program of peer to peer education with prescribers for the intended purpose of improving care and decreasing risks associated with inappropriate prescribing.

(c) The committee shall make recommendations to the Kansas health policy authority to ensure the safe and cost-effective administration of mental health pharmacy benefits for the mediKan

population, however, only the recommendations intended to promote patient safety may be implemented on prescriptions written or ordered prior to the effective date of the committee's recommendations.

(d) Program savings derived from recommendations by the committee shall be reinvested into medicaid.

(e) The committee shall review the impact on patients affected by the applications of the provisions and administrative programs and procedures developed under this section at least annually and present findings and recommendations in accordance to the provisions outlined in this section.

(f) The Kansas health policy authority shall implement an automated prior authorization system prior to implementing the provisions of this section.

Sec. 2. K.S.A. 2008 Supp. 39-7,121b is hereby repealed.

Sec. 3. This act shall take effect and be in force from and after its publication in the statute book.