

## MINUTES OF THE SENATE HEALTH CARE STRATEGIES COMMITTEE

The meeting was called to order by Chairperson Susan Wagle at 1:30 P.M. on February 26, 2008 in Room 136-N of the Capitol.

Committee members absent:

Committee staff present: Ms. Emalene Correll, Kansas Legislative Research Department  
Mrs. Terri Weber, Kansas Legislative Research Department  
Ms. Nobuko Folmsbee, Revisor of Statutes Office  
Ms. Renae Jefferies, Revisor of Statutes Office  
Ms. Margaret Cianciarulo, Committee Secretary

Conferees appearing before the committee: Dr. Mark McCune, Member, Kansas Board of Healing Arts

Other in attendance: Please see attached Guest List

**Continued hearing on Kansas Board of Healing Arts responsiveness to complaints from the public.**

Upon calling the meeting to order, the Chair introduced the Board of Directors for the Kansas Board of Healing Arts: Ms. Sue Ice, Public Member from Newton, KS; Mrs. Betty McBride, President from Columbus; Dr. M. Myron Leinwetter, DO from Rossville.; and Dr. Mark McCune, M.D. from Hanover.

The Chair then called on Dr. McCune, who wanted to thank the Committee for the opportunity to come before the Committee today as the delegated representative of the majority of members of the Kansas Board of Healing Arts (KBHA) and not at the request of the Board staff, but at the request of the Board members themselves. He offered a time line of Board meetings for a special session on 2-16-08, their meeting with Senator Wagle, and convening again on 2-22 & 2-23-08 for its regularly scheduled meeting of which 5 hours were devoted with staff regarding issues they needed to address and develop a plan of action to begin to resolve issues of public and legislative concern. He then went on to list the problems they have identified and the proposed corrective plan of action which included:

1. Communication Issues - agreed with the Committee that the Board has not done a good job communicating with complainants, but offered proposal remedies including: interview each complainant/closely related family members, regular follow-up communication, public use of Board website, enhanced Board, and Policy Statement No.07-02, that directs the Board Disciplinary Counsel to initiate an investigation on each complaint and reports received.
2. More Timely Processing of Cases - the Board is grateful for the legislative funding of 7 additional FTE's as it has been unable to adequately perform its functions due to being understaffed and underfunded due in part to legislative sweeping of Board funds. Their proposed remedies include: allocation of approved FTE positions, creation of: case management strategic committee, hearing officer panel, and second disciplinary panel. In addition they have increased Board meeting time, sanctioned guidelines, looking at re-vision of pre-hearing orders, develop a classification system, and drafted & submitted **HB2620**.
- 3..Lastly, faster processing of egregious, high-level cases using proposed remedies including the legislative revision of K.S.A. 2006 Supp. 65-2837(a) and letters of admonishment.

In summary, Dr. McCune stated that they share the Committee's concerns, hopes that this testimony makes it evident the seriousness with which the Board considers these matters, and hopes that their commitment to address and create a plan of action to resolve these concerns is transparent to this Committee and the public. A copy of his testimony and attachments, which include **HB2620** and KBHA's policy statement No.07-02, are (Attachment 1) attached.

As there were no other conferees to appear before the Committee, the Chair asked for questions which came from Senators Brungardt, Barnett, Journey, Haley, Gilstrap and Wagle including:

## CONTINUATION SHEET

MINUTES OF THE Senate Health Care Strategies Committee at 1:30 P.M. on February 26, 2008 in Room 136-N of the Capitol.

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- re: proposal A for communication issues, is this in response to the Post Audit Report No.07-02?
- re: additional proposals, are they forthcoming, are they more recent, are they because of Committee and public concerns?
- Are non-medical people well enough represented on the Board?
- for Mrs. McBride, are the health care providers hard enough on their own peers?
- re: 163 complaints in the last 3 months, is that a typical intake? Comment: Seems you could separate into fluff and serious stuff right away and assumes these are staff decisions that the Board wouldn't necessarily know about
- how many cases arise to the level of the full Board and is it typical?
- it would seem with this separation of duties with the Board and the difficulty in the number of members you really end up with 5 members in each of these sub-groups, that can't really co-mingle in reviewing these cases, that perhaps some more members could disperse the duties among more on the Board.
- re: a day and a half that would require an overnight commitment, do you feel you will have greater participation among your 15 members of the Board and have you considered 2 full days, however, for practicality many people may not come for that half day but may come because it is a full day?
- what are the terms of the Board members? And in view of the increase in case loads, have you considered taking on more retired doctors or citizens?
- were you in touch with the agency to know that this information was going to come out in the Post Audit? Did this surprise your Board members?
- did your disciplinary panel have access to the complete records, did it used to be that the full Board looked at every case, and how would articulate your role of overseeing the agency (ex. Meeting their obligations)?

As there were no further questions of the Board, the Chair thanked them for all they had done and offered them a packet regarding Dr. Geenens saying she hopes they have an opportunity to read them and also go meet with the U.S. Department of Justice, that they need to follow up and take a look at their legal department and see if their capabilities are up to what they need them to be. She also requested they take a look at the Schneider case and hear both sides of the legal story. She stated that if we look at the budgets of other states it just appears to her that there are several cases where Missouri was able to act on special situations, much quicker than Kansas and suggested the Board pull the report from Missouri regarding Dr. Geenens. A copy of the packet is ([Attachment 2](#)) attached.

### **Adjournment**

As there was no further discussion, the meeting was adjourned. The time was 2:30 p.m.

The next meeting is scheduled for March 4, 2008.