

MINUTES OF THE HOUSE HEALTH AND HUMAN SERVICES COMMITTEE

The meeting was called to order by Chairman Brenda Landwehr at 1:30 P.M. on March 1 in Room 526-S of the Capitol.

All members were present.

Committee staff present:

Norman Furse, Revisor's Office
Melissa Calderwood, Legislative Research
Mary Galligan, Legislative Research
Patti Magathan, Committee Assistant

Conferees appearing before the committee:

Senator Vicki Schmidt
Debra L. Billingsley, KS State Board of Pharmacy
Julie Hein, representing Kansas Pharmacy Coalition
Dan Morin, Kansas Medical Society
Larry Buening, Board of Healing Arts
Cindy Lash, Legislative Post Audit
Mack Smith, KS State Board of Mortuary Arts

Others Attending:

See Attached List.

Floor was opened to hear **SB63 - Limitations on filling prescriptions** and **SB62 - Restrictions on prescribing, ordering, dispensing, administering, selling, supplying or giving certain amphetamine or sympathomietic amine controlled substances**.

Testimony on **SB62 - Restrictions on prescribing, ordering, dispensing, administering, selling, supplying or giving certain amphetamine or sympathomietic amine controlled substances**.

Testifying as a proponent of **SB 62**, Senator **Vicki Schmidt** informed the committee that current law requires that prescribers indicate on a prescription in their own handwriting the purpose (or diagnosis) for the amphetamine or sympathomietic amine prescribed. Kansas is the only state that requires a diagnosis in prescriber's handwriting. This bill also eliminates a future problem since the professions of medicine and pharmacy are progressing to more electronic communications where a handwritten note cannot be accommodated. (Attachment 1)

Debra Billingsley of the Kansas State Board of Pharmacy testified as a proponent of **SB 62**, saying that the Board of Pharmacy supports this bill which will eliminate the hardship and inconvenience placed on patients under current law. She informed the committee that they promote electronic prescribing as a means of preventing medication errors, and that electronic prescriptions do not support handwritten signatures. (Attachment 2)

Lawrence T. Buening, Jr., Executive Director of the Kansas Board of Healing Arts, said that the Board supports the proposed changes to K.S.A. 65-2837a which deletes the requirements that prescriptions for amphetamines and sympathomemetic amines be in the physician's own handwriting and contain the purpose for which the drug was being prescribed. The Board has received letters from a number of physicians expressing concerns about the current statutory language and provided a sample letter for illustration. (Attachment 3 & 4)

Proponent **Julie Hein**, representing the Kansas Pharmacy Coalition explained that it is difficult in some situations for the pharmacist to obtain a hand written diagnosis from a physician for certain medications. **SB 62** eliminates the need for a physician to hand write the diagnosis code on prescriptions for amphetamines before the prescription can be filled. This will help make the delivery of certain medications easier and less cumbersome for patients and pharmacists alike. (Attachment 5)

CONTINUATION SHEET

MINUTES OF THE House Health and Human Services Committee at 1:30 P.M. on March 1 in Room 526-S of the Capitol.

Dan Morin, representing Kansas Medical Society, testified in support of **SB 62** saying that Kansas is the only state with such a requirement. This is an area of concern for out-of-state practitioners who are unaware of a requirement unique to Kansas. (Attachment 6)

Testimony on **SB63 - Limitations on filling prescriptions**

A proponent of **SB 63**, Senator **Vicki Schmidt** said that this bill places into statutes what currently occurs in the everyday practice of pharmacy. Often prescribers will indicate that a prescription may be refilled p.r.n. This is a Latin term, “pro re nata” which is an abbreviation for “when necessary.”) To a practicing pharmacist, the term p.r.n. means the prescription may be refilled for a period of time of one year from the date the prescription was issued. The purpose of this change is to at least require contact between the pharmacist and prescriber once a year on a p.r.n. refill, and bring the statutes in line with the current practice. (Attachment 7)

Proponent **Debra Billingsley**, Executive Director of the Kansas State Board of Pharmacy said that **SB 63** amends K.S.A. 65-1637 and clarifies with specificity the refill limitations for non-controlled prescription drugs. This is a health and safety issue so that a patient will return to the practitioner for further review of their medical condition. Current language has always been confusing to most pharmacy practitioners, and is thus hard to regulate. (Attachment 8)

Julie Hein, representing the Kansas Pharmacy Coalition explained that **SB 63** clarifies an annual renewal requirement for p.r.n. prescriptions. The purpose of this change is to require contact between the pharmacist and prescriber on an annual basis on a p.r.n. refill. This is already the standard of care in pharmacy practice. (Attachment 9)

Proponent **Dan Morin**, representing the Kansas Medical Society said that this bill would help ensure that the therapy reflects the patient’s current medical status and would bring statute in to line with current practice. (Attachment 10)

Written testimony was provided by Chip Whellen for the Association of Osteopathic Medicine. (Attachment 11)

Chair Landwehr closed hearings on **SB 62** and **SB 63**. She then asked the committee if there were objections to working **SB 63**. There were none.

Representative Hill motioned to pass SB 63 favorably and to put on the consent calendar. Motion seconded by Representative Storm. Motion carried.

Chair Landwehr then asked the committee if there were objections to working **SB 62**. There were none. Representative Hill made a motion to pass SB 62 favorably and to put on the consent calendar. Motion seconded by Representative Tietze. Motion carried.

Chair Landwehr then opened the floor to hear **SB72 - Concerning mortuary arts, defining funeral director; grounds for revocation, denial, suspension or conditioning of licenses.**

Mack Smith, executive secretary of the Kansas State Board of Mortuary Arts spoke as a proponent of **SB 72**. He said that the bill was introduced in the Senate at the Board’s request and is a result of the annual review of statutes and regulations done by the Mortuary Arts Boards and staff. The intent is to update and better define language and definitions in K.S.A. 65-1713 and K.S.A. 65-1751. (Attachment 12)

Chair Landwehr closed hearings on **SB 72** and asked the committee if there were objections to working the bill. There were none.

Representative Storm moved to amend line 22 to cross out “burial or disposal” and replace with “disposition”. Motion seconded by Representative Morrison. Representative Storm made a motion to pass SB 72 favorably as amended. Motion seconded by Representative Morrison. Motion Carried.

CONTINUATION SHEET

MINUTES OF THE House Health and Human Services Committee at 1:30 P.M. on March 1 in Room 526-S of the Capitol.

Chair Landwehr opened the floor to work **SB 81 - Fingerprinting and criminal history background checks required by the board of healing arts.**

Lawrence T. Buening, Jr., Executive Director of the Kansas Board of Healing Arts, testified as a proponent saying that this bill authorizes the State Board of Healing Arts to require certain individuals to be fingerprinted and submit to a national criminal history record check for the purpose of determining initial qualifications and suitability to obtain a license. He documented the authority to implement this bill based upon Public Law 92-544. In addition, he added that the Federation of State medical Boards recommended in 1998 that medical boards conduct criminal background checks on physicians applying for licenses. This policy was reaffirmed in 2001. The Board established a committee in December 2004 to study the issue. The committee recommended and the Board adopted a resolution to request introduction of a bill to allow these checks. The bill was introduced in the 2006 session but did not receive a hearing. Reintroduction of this bill was recommended by the Legislative Division of Post Audit in their October 2006 review of the Board.. This bill is another way to uphold the professionalism of the health care professions and to better ensure patient safety. (Attachment 13)

Written testimony was provided in support of **SB 81** by the Kansas Association of Osteopathic Medicine. (Attachment 14)

Cindy Lash, Audit Manager with the Legislative Division of Post Audit provided neutral testimony and affirmed that a recommendation to reintroduce a bill in the 2007 Session that would require applicants to be fingerprinted was made in the 2006 review of the Board. (Attachment 15) This recommendation was made for several reasons:

- Federation of State Medical Boards includes this procedure in their “recommended practices”.
- State law allows the Board to obtain criminal background checks but does not give the Board the authority to collect fingerprints. Fingerprints are required for the FBI to conduct a national background search.
- Past criminal activity is one of the behaviors the Board attempts to identify in its application process. Currently they rely on the applicants to self-report.
- Doctors are not immune from brushes with the law.
- As auditors, we think it is always better to verify information, if feasible.

Dan Morin, representing the Kansas Medical Society said that the Society does not oppose giving the Board the authority to require that applicants for licensure submit fingerprints and be subject to a criminal background check. He said that if you are going to require this that certain professions shouldn't be singled out. The state should consider expanding fingerprinting and background checks for applicants for any kind of license that is issued by the state, but they believe that it would be expensive to mandate. (Attachment 16)

Vice-Chair Mast closed the hearing on **SB 81**. She then asked the committee to consider committee minutes for January 22, 24, 25, 30, 31, and February 1 and 5 for approval. Copies of the minutes were included in their packets. Motion made to approve minutes by Representative Morrison and seconded by Representative Trimmer. Motion carried.

Meeting was adjourned. Next meeting will be March 5 at 1:30 P.M.