Approved	March	17,	1983	-	
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MINUTES OF THE <u>SENATE</u>	COMMITTEE ON	PUBLIC HEALTH AND WELFARE	
The meeting was called to order	bySenator	Jan Meyers Chairperson	at
a.m./ рлик en Ма	rch 16	, 1 <u>983</u> in room <u>526-S</u>	_ of the Capitol.
All members were present excep	t:		
Senator Bogina			
Committee staff present:			

Conferees appearing before the committee:

Senator Charlie Angell
Rebecca Kupper, Kansas Hospital Association
Barbara Lohmeyer, Hospital District No. 1, Girard, Kansas
Robert Mullen, Rice County District No. 1., Lyons, Kansas
Wayne Stratton, Attorney for Kansas Hospital Association
Dan Morgan, Associated General Contractors of Kansas, Inc.
Larry W. Magill, Jr., Independent Insurance Agents of Kansas
Senator Don Montgomery
Wayne Stallard, Attorney for Community Hospital District No. 1, Pottawatomie and Jackson Counties

Others present: see attached list

Bill Wolff, Legislative Research Department

Senator Meyers called the meeting to order and asked Bill Wolff, Legislative Research Department, to explain the relationship between HB 2178 and HB 2002.

 ${\rm H\underline{B}}\ 2003$ - Political subdivisions, establishment and operation of hospitals. Re Proposal No. 9

Senator Angell testified in support of HB 2003 and stated that this bill is partly the result of legislation he introduced last year to take care of a Minneola problem, and concerns a territorial portion which lies in another county. Minneola would pay double taxes if Clark and Ford County both have hospitals. Senator Angell expressed concern about Section 23 and said that a hospital could lose a major portion of its taxing base if people by petition can withdraw, and suggested that the petition could only apply where the people would pay double taxes in two hospital districts. If they do phase-out, the hospital should have a chance to make some adjustment.

Rebecca Kupper, KHA, stated that KHA does support HB 2003, and introduced Barbara Lohmeyer, administrator of Hospital District No. 1, Girard, Kansas; Robert Mullen, administrator of Rice County District No. 1 Hospital, Lyons, Kansas; and Wayne Stratton, Attorney for the Kansas Hospital Association.

Barbara Lohmeyer testified in support of HB 2003 and distributed testimony stating that there may be problems with the bill, but they would like to see it passed this year, and in the interim they planned to meet with the district hospitals and legal staff to review the bill. (Attachment #1).

Robert Mullen testified in support of HB 2003 and distributed testimony which stated that the majority of the district hospitals are in support of the bill in its present form. The bill will be reviewed in the interim, and they will present any further concerns to the Legislature next year. (Attachment #2).

CONTINUATION SHEET

MINUTES OF THE SENATE COMMITTEE ON PUBLIC HEALTH AND WELFARE

room 526-S, Statehouse, at 10 a.mx/pxxx on March 16 , 1983

Dan Morgan, Associated General Contractors of Kansas, Inc., submitted testimony requesting that HB 2003 be amended to allow for 5% bid bond option, which has been available to contractors bidding hospital work in the past, but was omitted in this bill. Also attached was a balloon showing the proposed amendment. (Attachment #3).

Larry W. Magill, Jr., Independent Insurance Agents of Kansas, submitted testimony stating his concern over omission of the 5% bid bond option. (Attachment #4).

Senator Don Montgomery testified in support of HB 2003 and stated that he served as Vice-Chairman of the Interim Study Committee. He declared that they don't want to pass legislation not in the best form and would look at the proposed amendments, but felt that a good piece of legis-lation could be passed this year. The purpose of the Interim Committee was to make these bills uniform, and they didn't have the language at that time to address these problems.

Wayne Stallard, Attorney for Community Hospital District No. 1, Potta-watomie and Jackson Counties, submitted testimony stating their objections to HB 2002 and 2003, and also distributed copies of a balloon showing proposed amendments to HB 2002 on pages 2 and 3, and a proposed amendment to HB 2003 on page 3. (Attachment #5).

There was discussion concerning the language in the amendment proposed in HB 2003.

Wayne Stratton stated that this legislation represents something that has been the subject of hours and days of major review by many hospital administrators and attorneys. The association is committed to scheduling meetings during the summer to try and come up with a unified position. Of the 74 hospitals there are very few that seem to have objections. He said he was concerned that the problems of a minority may control the wishes of the majority. There are both county and district hospitals in the state concerned about this legislation.

Senator Francisco inquired what would happen if the bill was just held and they all got together to work out their differences and came back next January. Mr. Stratton replied that that would be another alternative, but the KHA and the Board of Directors are supporting the bill.

In answer to Senator Ehrlich's question as to whether there was actually a problem, Mr. Stratton said he couldn't answer that. He said that he was personally unaware that this bill would create a problem. It would continue what has been existing for a long time. The present bill contains the right to opt out - a way to disassociate themselves. KHA doesn't want to create problems for any hospital district.

A letter from Carlyle Kiehne, Administrator, Satanta District Hospital, stating his support for HB 2003, was distributed to committee members. $(\underline{Attachment~\#6})$.

A copy of the Response of Clay County Hospital at a hearing before the Special Committee on Hospital Laws, August 25 and 26, 1982, concerning Proposal No. 9, was distributed to committee members. (Attachment #7).

Senator Hayden moved that the minutes of March 15, 1983, be approved. Senator Vidricksen seconded the motion and it carried.

The meeting was adjourned.

SENATE

PUBLIC HEALTH AND WELFARE COMMITTEE DATE 3-16-83

(PLEASE PRINT)	ORGANIZATION
NAME AND ADDRESS Resecca Lugger	Kan. Hospital Assoc.
Bol-Muller 7	Hospital Diet #1, Lyons
Danara Tomes 11	Had with heard
Mary Hall	MAG, KHA
Roche W. Startary, Communitar Hos	n#1 Onage, Ka
Joseph Engellen, Nistrict Hosp. #1	Oraga, Kst.
Hal Palkensteen, District Hosp. #1	Ouggo, KS.
Dean Myeve "	Humen He +=
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Lonke Kufall District Hosp #1	Wheaten, Rs.
LARRY MAGILL	INDER INS. REGIOTS OF ICS.
DAN MORGAN	AGC of KS.
Jan Johnson	Budget Division
Theulie merch	
Betty Jones	Clay County Hapital
Sandy M. Ceauford Clay Conter 16	11 1 1 / 11
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SENATE

PUBLIC HEALTH AND WELFARE COMMITTEE

DATE 3-16-83

(PLEASE PRINT) NAME AND ADDRESS	ORGANIZATION
Mrs. Eldou Farris	Willestor Kausas
Halen Milla	Winchester, Kausas
MARGERY MARTIN WINCHES TER	ZKS. SR. CITIZENDOF EST
Janes & Kramer Winchester, Kol	
Elizabeth Estes	League of Women Voter's Johnson
	League of Warmen Voters



TESTIMONY OF THE KANSAS HOSPITAL ASSOCIATION BEFORE THE SENATE PUBLIC HEALTH AND WELFARE COMMITTEE March 16, 1983

Donald A. Wilson

President

House Bill 2003

Thank you, Madame Chairperson and members of the Committee. I am Barbara Lohmeyer, administrator of Hospital District No. 1, Girard, Kansas. As a member of the Board of the Kansas Hospital Association and the Subcommittee on District Hospital Laws, I would like to express our thanks to the legislative committees and staff who have worked on this bill. As you know, KHA has been actively involved in the process of reviewing and commenting upon House Bill 2003 since its original draft.

Our Subcommittee on District Hospital Laws has met on a number of occasions to discuss the bill, and we have also had a meeting of the district hospitals in this regard. At our last meeting on March 4, our subcommittee decided to support this bill in its present form. Our action was endorsed by the Executive Board of the Kansas Hospital Association last week.

We recognize that this bill will not become effective until July 1, 1984. We believe that there may still be some problems with the bill, but we would like to see it passed this year. In the interim, we plan to meet with the district hospitals and legal staff to thoroughly review the bill. All of our district hospitals have been offered the opportunity to meet during the interim. We will be back to the Legislature next year to express any further concerns we have after a careful review. We want to ensure a good bill for our district hospitals that at the same time will not create problems for the 50 county hospitals who are also members of the Association.

With this in mind, we urge you to pass House Bill 2003. Thank you for the opportunity to appear before you today.

Allenh, 1



Donald A. Wilson

President

TESTIMONY OF THE KANSAS HOSPITAL ASSOCIATION BEFORE THE SENATE PUBLIC HEALTH AND WELFARE COMMITTEE March 16, 1983

House Bill 2003

Thank you, Madame Chairperson and members of the Committee. I am Robert Mullen, administrator of the Rice County District No. 1 Hospital, Lyons, Kansas. I am a member of the Kansas Hospital Subcommittee on District Hospital Laws. I want to reiterate the fact that the majority of our district hospitals are in support of the KHA position to support House Bill 2003 in its present form. We will be reviewing the implications of this bill further during the interim and will present any further concerns to the Legislature next year.

Again, thank you for the opportunity to express our position to your committee.

1263 Topeka Avenue • P.O. Box 2308 • Topeka, Kansas 66601 • (913) 233-7436 _

Atch. 2



Associated General Contractors of Kansas, Inc.

200 WEST 33rd • TOPEKA, KANSAS 66611 • TELEPHONE 913-266-4015

March 8, 1983

Senator Jan Meyers State Capital Building Room 128-S Topeka, Kansas 66612 __ OFFICERS __

Charles E. Koehn, Sr. President

> Earl W. Johnson Vice President

Ferol P. Gehring, II Treasurer

Thomas E. Slattery
Executive Vice President

Dear Senator Meyers:

I would like to draw your attention to an oversight in House Bill No. 2003. In Sec. 15 (page 12, lines 425-429) dealing with competitive bidding for hospital construction projects it says "Each bidder shall accompany the bid with a certified check for 5% thereof ...". Missing is the customary option of allowing a 5% bid bond in lieu of a certified check for 5% of a contractor's base bid.

To require a certified check without an option for a bid bond will disuade many contractors from bidding such work. Certified checks may be held for up to 30 days after a project is let for bid. On a \$1 million project \$50,000 of a contractor's resources could be tied up for a full 30 days without receiving interest. On a \$5 million job \$250,000 could be tied up without receiving interest for 30 days. As you can see the larger the project, the bigger the problem and the fewer the number of contractors who would be willing or able to bid such work. Generally, low bids tend to be higher where the field of bidders on a project is small. Requiring certified checks as the sole guaranty that a contractor will undertake to perform a contract will limit the field of bidders on hospital projects and increase their cost.

It is customary to allow the option of either submitting a bid bond or a certified check for state-funded projects, including hospitals. Bid bonds provide the same guaranty as certified checks without tying up a contractor's working capital. Before a surety will bond a contractor it will have investigated the contractor sufficiently so as to be convinced that it can safely issue a bid bond on a given project. The bid bond states that the contractor will enter into a contract if one is offered, and that he will furnish whatever additional bonds are specifically required.

For these reasons AGC of Kansas hopes that H.B. 2003 can be amended to allow for the 5% bid bond option which has been available to contractors bidding hospital work in the past. If you would like for me to assist in proposing such an amendment I would be happy to do so. Thank you.

Ban Morgan

Assistant Executive Director

DM/v

Encl:

_ DIRECTORS

GAIL LEE HOWARD PAUL BILL WHETZEL STARKS VINCENT, Subcontractor DICK CURRIE. Supplier

National Directors ROBERT J. BOHL MILT POLLITT

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plans and specifications, together with an estimate of the cost thereof, under oath, with the secretary of the board. No contract shall be awarded at a price in excess of such estimated costs. After considering and approving the plans and specifications prepared and filed, the board shall advertise for three consecutive weeks, in a newspaper of general circulation in the taxing district of the hospital, for sealed proposals for the doing of such work, in accordance with the plans and specifications therefor, and such contract shall be let to the lowest responsible bidder, the board reserving the right to reject any or all bids. Each bidder shall accompany the bid with, a certified check for 5% thereof payable to the treasurer of the board, as a guaranty that if the contract is awarded to such bidder, such bidder will enter into a contract with the board to perform the same; and if such bidder fails to enter into such contract when awarded, the amount deposited shall be and become the property of the hospital, as liquidated damages, and shall be paid into the operation and maintenance fund of the hospital. The board may require the contractor to give to it a bond guaranteeing the faithful performance of the contract.

Sec. 16. (a) The board may determine and fix an annual tax to be levied for the purpose of operating, equipping, maintaining and improving the hospital. Subject to the provisions of subsection (b), such tax shall not exceed two mills or the amount authorized to be levied in the year 1982, whichever is the greater amount. The board shall determine the amount necessary to be raised by the levy and shall determine that portion thereof to be assessed against and levied by each political subdivision within the taxing district of the hospital and shall certify, annually, such amount to the clerk of each such political subdivision in sufficient time for the same to be made a part of the budget of each such political subdivision, but in no event later than August 1. The governing body of each such political subdivision shall make the same a part of its regular budget, which shall be certified to the county clerk of the county in which it is located as provided by law. The tax so collected shall be paid by the county treasurer to the treasurer of the board. Such tax levy shall be in addition to all other tax levies authorized or limited by law and shall not be

Senator Meyers -An amendment Something like this Should work.

a bid bond for 5% thereof issued by a surety company authorized to do business in the state of Kansas or





Independent Insurance Agents of Kansas

February 16, 1983

The Honorable Jan Meyers Chairperson, Public Health & Welfare State Capitol Topeka, Kansas 66612

Dear Senator Meyers:

I appreciate the time you took to discuss HB 2003 with me the other day. As mentioned, we have a concern with the language on lines 425-433 which requires the Hospital Board to require certified checks equal to 5% of the contract bid on hospital construction.

Normal industry practice, including state work, is to accept either a 5% bid bond or a 5% certified check at the contractor's discretion. Contractors generally use bid bonds because they do not want to tie up working capital and there generally is no charge for them.

We would welcome the opportunity to testify before your committee when testimony on this bill is heard. In the meantime, if you have any questions, please let me know.

Sincerely,

Larry W. Magill, Jr. Executive Manager

akw

YOUR Independent Insurance AGENT
SERVES YOU FIRST

Larry W. Magill, Jr., cpcu, clu, Executive Manager 917 Topeka Avenue, Topeka, Kansas 66612 Tel. 913/232-0561

Atch. 4

Honorable Members of the Senate Public Health and Welfare Committee:

- 1. Double Taxation--The overlooked feature of the proposed hospital code.
 - a. Present law protects taxpayers from double taxation for hospital purposes within most operating hospital districts by statutes prohibiting their territory from being in more than one hospital district. See K.S.A. 80-2156, 80-2179, and 80-21,102. In some instances an exemption from county hospital tax is provided, K.S.A. 80-2112.
 - b. Unless amended HB 2002 would allow any county to form a county hospital over an existing hospital district and tax territory within that county for a county hospital even though the taxpayers of the district already have established, paid for and maintain a hospital of their choice.
 - c. Unless amended HB 2003 allows a new hospital district to form over another existing hospital district to cause no end of confusion and double taxation.
 - d. For our taxpayers like Earl Cordell who appeared here yesterday this is an immediate threat.
- 2. Two Simple Amendments--Attached hereto.
 - a. Amend HB 2002:

First check with the electors within the bounds of an existing hospital district within the county to see if they wish to be in a county hospital. If they do not, then district laws can be followed for forming a tax base for the new hospital.

b. Amend HB 2003:

Let the electors of the district hosptial decide whether they wish to be included in any new hospital district.

3. Consistency.

No overlapping of districts, or double taxation for the same purpose is allowed in other state districts--school, fire, water, watershed and others--then why authorize it for hospitals.

- 4. Uniformity.
 - a. Uniformity of hospital services is controlled by hospital operation laws and regulation, and not whether it be a county, district, or city hospital.
 - b. Adoption of the proposed amendment to HB 2002 will not affect uniform application of the proposed hospital code to county hospitals. It is only a question as to which procedure—either county or district—will be followed for establishing a new hospital where district hospitals are already operating and maintaining hospitals. If county procedure be used the new uniform county code will govern operation under Chapter 19. If it be a district procedure the new uniform district code will be followed as set out in Chapter 80.
- 5. Bill of Rights for District Hospitals.

Without adoption of the proposed two simple amendments to the hospital code, the district hospital is shunned into a secondary position although it is performing the same function of the county hospital.

Wayne/M. Stallard, Attorney for Community
Hospital District No. 1, Pottawatomie and

Jackson Counties, Kansas.

Atch. 5

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ance with the provisions of this act and any existing hospital board shall be deemed to be the board for purposes of this act unless and until a new board is appointed or elected as provided in this act.

(b) This act shall not affect any judicial proceeding pending or any contract, tax levy, bond issuance or other legal obligation existing on the effective date of this act.

New Sec. 3. Any county nay establish a hospital in the following manner:

The commission may, and upon being presented with a petition signed by not less than 5% of the qualified electors of the county requesting the establishment and maintenance of a hospital shall, adopt a resolution authorizing the issuance of general obligation bonds for the purpose of constructing, purchasing, leasing or otherwise acquiring a hospital building or buildings, equipping the same, and acquiring the necessary site or sites therefor, or for any or all such purposes and for the purpose of paying a portion of the principal and interest on bonds issued under the authority of K.S.A. 12-1774, and amendments thereof. Prior to the issuance of such bonds, the question of issuing the same shall be submitted to a vote of the qualified electors of the county at a regular county primary or county general election or, if no regular county election is to be held within six months from the date of adoption of the resolution, at a special election called for the purpose of submitting such question, and no bonds shall be issued until a majority of the qualified electors voting on the question at such election vote in favor of the issuance of such bonds. The election shall be held at the usual places in such county for electing county officers and the vote shall be canvassed in the same manner as that for county officers. Such question shall not be submitted to the electors of the county at any election more than once in any one year. All general obligation bonds authorized by this section shall be issued, registered and sold in the manner provided by article 1 of chapter 10 of the Kansas Statutes Annotated, and acts amendatory thereof and supplemental thereto, and shall bear interest at a rate not to exceed the maximum rate prescribed by K.S.A. 10-1009, and

, except a county having within its boundaries any territory of a hospital district operating and maintaining a hospital under chapter 80 of the Kansas Statutes Annotated,

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amendments thereof, and none of the debt limitations provided by law shall apply to bonds issued under this section.

New Sec. 4. (a) (1) The governing body of any city which is operating and maintaining a city hospital, upon the recommendation of the hospital board, or (2) the board of any hospital district which is operating and maintaining a district hospital may donate, transfer and convey the hospital, together with all real and personal property used in connection with the operation of the hospital to the county in which the hospital is located, to be owned, managed, operated and maintained as a county hospital. The question of donating, transferring and conveying any such hospital property to a county for county hospital purposes, shall first be submitted to a vote of the qualified electors of the city at a regular city election or at an annual meeting of the qualified electors of the hospital district, whichever is applicable, or the governing body of the city or the board of the hospital district may call a special election for the purpose of submitting such question to the qualified electors. Any such election called by the governing body of a city shall be noticed and governed in all respects and the results declared in accordance with the provisions of K.S.A. 10-120, and amendments thereof. Any such special election called by the board of a hospital district shall be noticed in accordance with the provisions of K.S.A. 10-120, and amendments thereof, and the election returns shall be made to the secretary of the board and canvassed by the board.

(b) Whenever the governing body of any city or the board of any hospital district, having been authorized to do so by a majority vote of the qualified electors of such city or hospital district, whichever is applicable, voting upon the proposition as provided by subsection (a), shall present to the commission an offer to donate, transfer and convey to the county the hospital property and facilities operated and maintained by such city or hospital district, whichever is applicable, to be owned, managed, maintained and operated as a county hospital, the commission shall submit to the qualified electors of the county at the next general election to be held in the county, or if no general election is to be held within six months from the date of presentation of

In a county having within its boundaries territory of an existing hospital district operating and maintaining a hospital under chapter 80 of the Kansas Statutes Annotated, the provisions of this section for establishing and maintaining a county hospital may be followed if a majority of the qualified electors who reside within the bounds of the existing hospital district within the county seeking the county hospital first vote at an election to be included in the county hospital should it be established within a period of two years from the date of such election. Such election shall be held in conformity with article 26 of chapter 25 of the Kansas Statutes Annotated and acts amendatory of the provisions thereof and supplemental thereto.

HOUSE BILL NO. 2002 be further amended:

By amending the county home rule statute 19-10la to exclude from home rule:

(13) Counties having within their boundaries any territory of a hospital district operating under the provisions of chapter 80 of the Kansas Statutes Annotated may not exempt from or effect changes in any statute prescribing the procedure for the establishment of hospitals and health related facilities.

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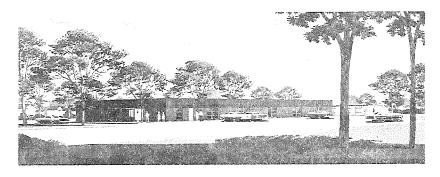
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the county in which such political subdivisions, or the greater portion of the area thereof, are located, of a petition setting forth the boundaries of the proposed hospital district and requesting the formation of such hospital district signed by not less than 51% of the persons who will become qualified electors of the proposed district upon its establishment and who reside within the limits of each political subdivision proposing to join in the establishment of the hospital district, the sufficiency of such petitions to be determined by an enumeration taken and verified for this purpose by some person who will become a qualified elector of the proposed district, it shall be the duty of the board of county commissioners, at its next regular meeting, to examine the petition. If the board of county commissioners finds that the petition is regular and in due form as is provided in this section, such board shall enter an order in its proceedings establishing the hospital district. If any political subdivision within the area of the proposed district owns and is operating a hospital at the time the petitions are filed, the petitions shall be accompanied by a copy of a resolution adopted by the governing body of the political subdivision within such district which owns the hospital, which resolution shall state that the political subdivision agrees to convey the hospital together with all the hospital equipment and the tract of land upon which the hospital is located to and for the use of the proposed hospital district. The governing body of the political subdivision is hereby authorized and directed to adopt such a resolution and to make such conveyance.

Sec. 4. Upon the establishment of a hospital district, the board of county commissioners shall cause a notice to be published, once each week for two consecutive weeks, in a newspaper of general circulation in the hospital district stating that a meeting of the qualified electors of such hospital district will be held at the time and place fixed in the notice for the purpose of electing five persons as the first board for such district. The last publication of such notice shall be made not more than six days prior to the date fixed for the holding of the meeting. The cost of such publication shall be borne equally by the political subdivi-

(c) Territory included within the boundaries of an existing hospital district operating and maintaining a hospital shall not be included in a newly formed hospital district as provided herein, unless a majority of the qualified electors of the existing hospital district vote at an election to be included in such new hospital district. Such election shall be held in conformity with article 26 of chapter 25 of the Kansas Statutes Annotated and acts amendatory of the provisions thereof or supplemental thereto.



Satanta District Hospital and Long-Term Care

"Total Community Health Services (316) 649-2761

Carlyle Kiehne, Administrator

March 11, 1983

Senator Jan Meier Kansas State House Room 128 South Topeka, Kansas 66612

Dear Madam Chairman:

This letter is to acknowledge the support of H.B. 2003 passed by the House of Representatives. As KHA Chairman of the sub-committee on District Hospitals laws, I've spent considerable time with both the legislative study committee as well as the District Hospitals, as recently as March 4th in a telephone conference call in which it was agreed to support the H.B. 2003.

There are a few problems that we would like to work with you as a study group in the summer and fall of 1983.

We appreciate all the concerns and efforts that have gone into making this a good, working bill.

Sincerely,

CarlyleKiehne

Administrator

cc: Rebecca Kupper

ALLA. L

Hearing Before
SPECIAL COMMITTEE ON HOSPITAL LAWS
(Kansas Legislature Interim Committee)

PROPOSAL NO. 9

August 25 and 26, 1982

Representative LLOYD POLSON, Chairman

Room 531 · ·

Appearance by BOARD OF TRUSTEES, County Hospital, Clay County, Kansas

Composed of:

NOLAN J. PATTERSON, Chairman

CLARENCE F. BERGMEIER, Secretary

DONALD OETINGER

JAMES PEDERSON

RUTH BROWNE

JON J. ROBISON, Chief Executive Officer

CLAY COUNTY HOSPITAL, 617 Liberty Street, Clay Center, Kansas 67432

Phone: (913) 632-2144

WAYNE W. RYAN, of Ryan and Ryan, P.A., Counsel 509 Court Street, Clay Center, Kansas 67432

Legal Counsel for Clay County Hospital Phone: (913) 632-5666

RYAN AND RYAN, P.A.
ATTORNEYS AT LAW
509 COURT STREET
CLAY CENTER, KS. 67432

Reb. 7

IN AND BEFORE THE SPECIAL COMMITTEE ON HOSPITAL LAWS, AN INTERIM COMMITTEE OF THE KANSAS LEGISLATURE

(Preparatory to the 1983 Legislative Session)

RESPONSE OF THE COUNTY HOSPITAL OF CLAY COUNTY, KANSAS, PURSUANT TO AN INVITATION BY THE SPECIAL COMMITTEE ON HOSPITAL LAWS

Because of the present legal status of the Clay County Hospital, and the manner of its creation, it was concluded the Special Committee should be given the benefit of brief background of its birthing.

Historical records reveal Clay County had four (4) hospitals prior to the establishment of a COUNTY HOSPITAL. The first three (3) were renovated residences in the City of Clay Center (the County Seat), same serving a period from 1903 to 1926. In 1926, there was erected a modern structure hospital referred to at that time as "a fireproof building."

All said structures were City Hospitals, the City of Clay Center being the tax base for support.

The new CITY HOSPITAL furnished exceedingly fine service and became the health care PROVIDER for the entire County and some surrounding territory. The territory of use continued to expand along with remarkable improvement in its service, and as expected, the cost of serving more people and providing more sophisticated service increased considerably.

In due time, a flawed relationship between the *County Seat Folks* and the *Rural Folks* began to develop, sort of a creeping, insidious atmosphere became noticeable in the community, it might be defined:

Why should the charges for hospital services be the same to "Country Folks" when it was the "Town Folks" who built the City Hospital, and whose property was subject to being taxed for its support?

As a result of the bad taste this atmosphere left in the community mouths, a few of the solid-thinking residents (both City and Country), concluded the community needed a COUNTY HOSPITAL. It was further concluded legal authority would be necessary to properly meet the needs for the establishment of a COUNTY HOSPITAL.

The cooperation of Clay County's representation in the Kansas Legislature would not only be needed, but required. The ground work was commenced in the 1945 Session -- (at that time, the Legislature met regularly every two (2) years). Progress was made, work continued through the 1951 Session. A final draft of a bill was completed, but it was too late to be introduced and have a chance for passage, so it was carried over and introduced at the 1953 Session.

The bill which was introduced was tailored to meet the Clay County situation, but was drafted so as to have general application, thus affording a defense to claimed - "Special Legislation" -- it has withstood the test several times.

The original legislation consisted of three (3) sections in Chapter 114, Laws 1953, which were enacted and became effective upon publication, said original sections are now:

K.S.A. 19-1888

K.S.A. 19-1889

K.S.A. 19-1890

The above sections constitute the base creation for the CLAY COUNTY HOSPITAL being:

"A POLITICAL SUB-DIVISION,"

"A MUNICIPAL CORPORATION,"

"A POLITICAL ENTITY,"

and its uniqueness when compared to the other County Hospitals is, "Its Board of Trustees are Elected."

Clay County's continued efforts to develop health care facilities and create a health care provider complex (said Clay County Hospital continuing to be the prime mover), it has been necessary to obtain additional legal authority to implement and enable such continued growth by legislative action, the results being the enactment of the following:

K.S.A. 19-1890a (1965)

K.S.A. 19-1890b (1965 - 1967)

K.S.A. 19-1890c (1967 - 1970)

K.S.A. 19-1890d (1967)

K.S.A. 19-1898 (1963)

the culmination of obtaining such legal authority has resulted in the development and creation of health care providers complex, consisting of:

A) A Modern 55-bed Hospital, well staffed and managed, with plans under way for major expansion.

ATTACHED: PLAT I Existing Lay Out Plan
PLAT II Proposed Expansion Plan.

- B) A Medical Arts Building (1968), a facility to accommodate up to six (6) doctors. This is a rental facility, presently housing five (5) doctors, approx. cost \$93,500.00, none of which was tax money.
- C) A New 96-bed Nursing Home (MEDICALODGES, Coffeyville, Kansas) facility, financed by industrial revenue funds, approx. \$1,200,000.00.
- D) New Modern Pharmacy, situated upon a site leased from the County Hospital.

RYAN AND RYAN, P.A.
ATTORNEYS AT LAW
509 COURT STREET
CLAY CENTER, KS. 67492

(913)632-5666

E) The Old City Hospital building, presently housing the Clay County Historical Museum.

NOTE I: All above structures and facilities are within a 600-ft. radius of the CLAY COUNTY HOSPITAL.

NOTE II: All the COUNTY HOSPITAL facilities are wholly debt-free.

NOTE III: 1982-1983 Adopted Budget for the Clay County Hospital is: \$2,842,280.00

Tax Levy -- .192 mills

SUMMATION

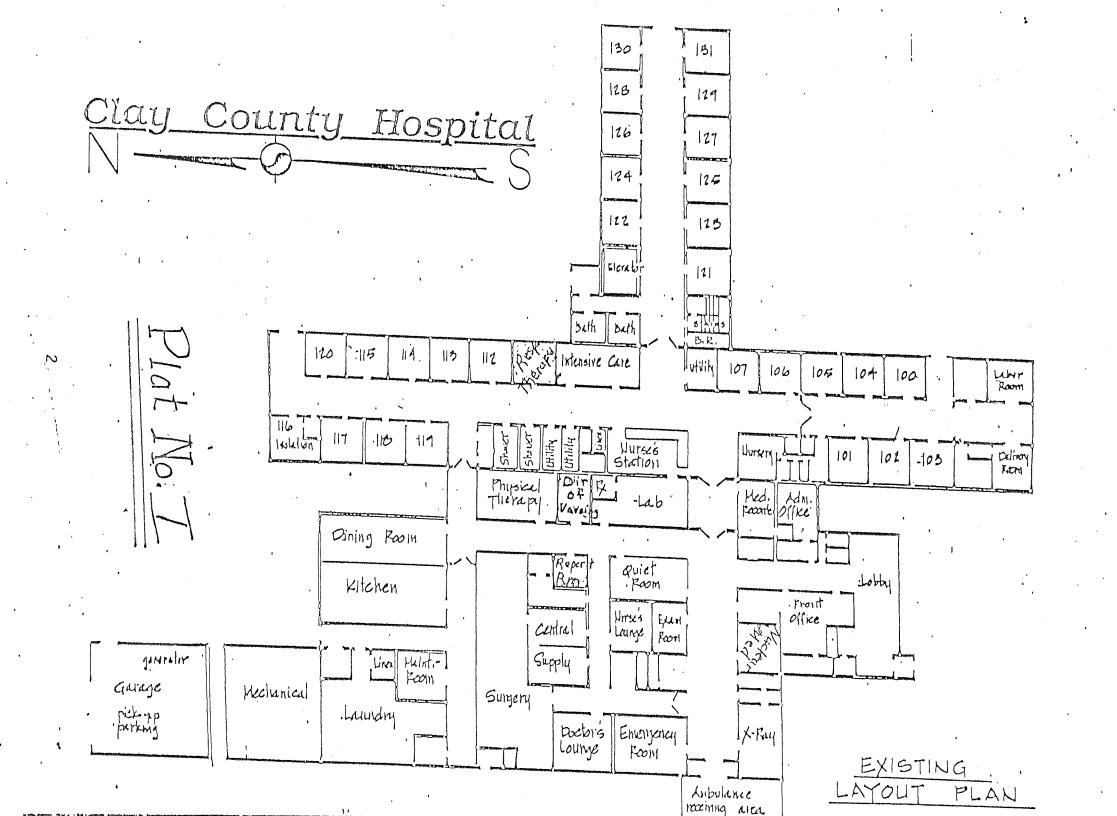
- A) The COUNTY COMMISSIONERS of Clay County, Kansas join with the CLAY COUNTY HOSPITAL in asking that said proposed legislation affecting County Hospitals provide for Clay County to be excepted from the bill. (Commissioners' letter attached.)
- B) The members of the ACTIVE MEDICAL STAFF of said CLAY COUNTY HOSPITAL in asking Clay County be excepted from the bill. (Doctors' letter attached.)
- C) On account of the premises, the Board of Trustees of the COUNTY HOSPITAL OF CLAY COUNTY, KANSAS ask and urge the Committee to make provision to the effect:

That the CLAY COUNTY HOSPITAL be excepted from all legislation wherein its present legal structure and operation be changed.

Dated this 26th day of August, 1982.

Respectfully Submitted,

NOLAN J. PATTERSON, Chairman Board of Trustees of the County Hospital, Clay County, Kansas



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Dist. 1. Alfred Johnson, Morganville

OFFICE OF COUNTY COMMISSIONERS CLAY COUNTY CLAY CENTER, KANSAS

August 23, 1982

SPECIAL COMMITTEE ON HOSPITAL LAWS Legislature of State of Kansas Representative LLOYD POLSON, Chairman Statehouse Topeka, Kansas 66612

In re: Proposal No. 9 - Hospital Laws

Dear Mr. Chairman:

In regard to the above Proposal, this is to advise you and your Committee we have this day completed a meeting with the Board of Trustees of the County Hospital of Clay County, Kansas, wherein the "draft bill" sent us by the Legislative Research Department was thoroughly discussed and considered.

We are advised the Hospital Board plans to appear before your Committee Thursday, August 26, 1982, its primary purpose being —— "to retain its present structure as a political entity with an elected board" —— and to solicit the Committee's support that the "final draft" of said bill to be presented to the Legislature include provisions for Clay County Hospital to retain its present legal structure.

It is the undersigned Commissioners' desire, and we do join with the Clay County Hospital Trustees in seeking retention of the Hospital's present entity structure, and we respectfully request provision therefor be made a part of the Committee's recommendation to the Kansas Legislature.

. _____

SHIRLET MACKENDER

County Clerk

Yours very truly,

ALFRED JOHNSON, Chairman

fould H

VERNON WENDELKEN

County Commissioners

The Clay County Hospital

617 liberty,

clay center, kansas 67432

phone 632-2144

August 24, 1982

Lloyd Polson, Chairman Special Committee on Hospital Laws State of Kansas Interim Committee Topeka, Kansas 66601

Dear Mr. Polson:

We, the undersigned physicians, represent the Active Medical Staff of the Clay County Hospital at Clay Center, Kansas.

It has been brought to our attention and thoroughly discussed at a special Medical Staff Meeting May 18, 1982, the intent of the proposed House Bill on reorganizing all County Hospitals under one statute.

As the Board of Trustees feel this would be detrimental to our organization, please consider this letter as opposed to any action that would alter the current legal structure of the Clay County Hospital at Clay Center, Kansas.

If we can be of any assistance to your or your committee, please contact us at the above phone number and address.

Sincerely,

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R.C. Carleton, m. A

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