Approved	4	-25	-9/	
	,	Date	she	

MINUTES OF THE HOUSE COMMITTE	E ONPUBLIC HEALTH AND WELFARE
The meeting was called to order byCarol	H. Sader at
	Chairperson
5:00 //a/m/./p.m. on March 27,	

All members were present except:

Rep. Carmody, Rep. Flower, Rep. Lynch, all excused.

Committee staff present:
Emalene Correll, Research
Bill Wolff, Research
Norman Furse, Revisor
Sue Hill, Committee Secretary

Conferees appearing before the committee:
Mary Ann Gabel, Board of Behavioral Sciences
Dr. Gerald Gentry, Osawatomie State Hospital
Wesley Crenshaw, Doctoral student, Osawatomie State Hospital
Dr. Stuart Frager, Chair of Council of Administrative Psychologists
Ellie LeCompte, Topeka State Hospital

Chairperson Sader called meeting to order at 5:10 p.m. (Room 254-E).

Chair drew attention to 1 set of minutes and she requested these be read carefully.

Rep. Wiard moved to approve Committee minutes of March 20, 1991 as presented. Motion seconded by Rep. Scott. Motion carried.

Chair requested a staff briefing on  $\underline{SB\ 55.}$  Mr. Furse gave a detailed explanation of the bill, highlighting deletions and additions. He answered questions.

Mary Ann Gabel, Executive Director of State Board of Behavioral Sciences, offered hand-out, (Attachment No. 1). She noted the Board became aware of a possible omission in existing statutes regarding the educational qualifications for registration as a masters level psychologist after an opinion from the Attorney General, (90-104 attached). She drew attention to requirements currently requiring "at least" a master's degree in clinical psychology or a master's degree in psychology Present requirements mean a person with either with specific coursework. a master's degree or a doctoral degree in clinical psychology may be eligible for registration, while a person with a doctoral degree in psychology but who has not received a master's degree in psychology is not eligible for registration. The proposed amendments contained in Sec. 1.(b) (2) of SB 55 will enable persons who graduate with doctoral degrees in psychology from programs that do not confer master's degrees or persons who possess doctoral degrees in psychology but whose masters' degrees are in areas other than psychology to register as masters level psychologists.

Dr. Gerald Gentry, Ph.D., Clinical/Child Psychologist, Osawatomie State Hospital, offered hand-out (Attachment No.2). He noted his greatest challenge has been to recruit well-trained clinicians to work in the public sector. He stated support for changes contained in  $\underline{SB~55}$  as necessary because doctoral programs in Counseling Psychology accept students with masters' of education degrees in counseling, rather than a master's degree in psychology. To date, there are three doctoral candidates on staff at Osawatomie Hospital who will have to be terminated from employment unless  $\underline{SB~55}$  becomes law. Such action would deprive the patients of their care.

### CONTINUATION SHEET

MINUTES OF THE	HOUSE	_ COMMITTEE (	ON PUBL	IC HEALTH	AND	WELFARE	
room <u>254-E</u> , Statehou	ise, at <u>5:</u>	<u>00</u> a/m/p.m. or	n	arch 27,			, 19_9

### HEARINGS CONTINUED ON SB 55.

Wesley Crenshaw, Doctoral student in Department of Counseling Psychology, University of Kansas offered hand-out (Attachment No. 3). He detailed his educational background. He noted by all accounts except one, he is qualified for registry as a Registered Master's Level Psychologist (RMLP) in Kansas. The master's degree received was a masters of education in counseling and school psychology, not a clinical degree or "generic" psychology degree. The changes proposed in (SB 55) will create a valid parity between the terminal masters and advanced doctoral candidate, i.e., one who has completed his/her comprehensive exams and may begin internship and dissertation work. He noted he felt this was the intended outcome when the original Registered Master's Level Psychologist's law was written. He urged support, noting the adoption of this legislation will ultimately provide a greater return on Kansas' investment in its mental health providers and enhance the quality of services provided.

Dr. Stuart Frager, Chairman, Council of Administrative Psychologists/ Topeka State Hospital, offered hand-out (Attachment No. 4). He noted the problem discussed in  $\underline{SB}$  55 arose from an Attorney General's Opinion No. 90-104. He stated that currently there is a psychologist on staff with a Ph.D. in Counseling Psychology from Kansas University who is still being paid as a student intern as she does not meet the requirements for her (RMLP). This also limits her practice for the hospital. Proposed changes in  $\underline{SB}$  55 would provide an opportunity to attract applicants earlier in their training before graduation providing one further avenue for hiring, and retaining Kansas students in Kansas who are qualified by degree, education and training. He answered questions.

Ellie LeCompte, psychologist at Topeka State Hospital, offered a handout (Attachment No. 5). She gave her educational background, noting she moved here from Colorado. She has learned to love Kansas and would prefer to remain here to work, but even with a Ph.D. in Counseling Psychology, she cannot work as a psychologist in Kansas per current statutes. She has been downgraded in her employment position and is earning 60% of what she should be earning. She is currently earning less money with a Ph.D. than she did with an M.A. two years ago as a psychologist at Osawatomie State Hospital. She detailed job possibilities she might pursue noting that she is hopeful SB 55 will be passed favorably so that she and others can use the skills they have worked so hard to obtain. This will keep skilled professionals in mental health fields in the state.

### HEARINGS CLOSED ON SB 55.

### HEARINGS BEGAN ON SB 68.

Chair noted there are no conferees on  $\underline{SB}$   $\underline{68}$ . Therefore, she requested that members pay close attention to Mr. Furse's explanation of the bill.

Norman Furse noted this is a revisor's bill in that there are times when reconciliation of sections in the statutes is necessary, and  $\underline{SB}$   $\underline{68}$  does that very thing. He gave rationale, i.e., there are times when the same sections of statutes may be in separate Houses on separate issues and it is difficult to reconcile the language changes. He then gave a detailed account of each change proposed. Mr. Furse noted also, that over the last few years an update in language is taking place, i.e., terminology id being replaced with more modern terminology.

### HEARINGS CLOSED ON SB 68.

### CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON PUBLIC HEALTH AND WELFARE, statehouse, at 5:00 a.m./p.m. on March 27, 1991

### HEARINGS BEGAN ON SB 342.

Chair requested a staff briefing on  $\underline{SB\ 342}$ . Ms. Correll gave a comprehensive explanation of the bill, detailing rationale for moving drugs from one schedule to another, and necessity for keeping in compliance with Federal regulations and Federal drug schedules.

Tom Hitchcock, Executive Secretary, Kansas Board of Pharmacy, offered hand-out (Attachment No. 6). He noted the requested changes proposed in <u>SB 342</u> will bring the statutes into conformity with the Federal Drug Enforcement Administration scheduling of controlled substances and effect changes in one statute dealing with penalties for non-compliance. He detailed changes proposed and gave rationale.

### HEARINGS CLOSED ON SB 342.

### HEARINGS BEGAN ON SB 252.

Chair requested a staff briefing on <u>SB 252.</u> Ms. Correll gave a comprehensive explanation of the bill with specifics in terminology, i.e., "boarding homes", "maternity homes". She highlighted concerns, i.e., a facility could be denied food assistance if the license isn't current. Ms. Correll answered numerous questions.

### HEARINGS BEGAN ON SB 252.

Joe Kroll, Department of Health/Environment offered hand-out (Attachment No. 7). He wanted to make it very clear that no loss in protection of children will be affected if SB 252 is enacted. The main focus is trying to protect children. Inspections will continue, licensure fees will continue, but the actual license document will not be provided on a yearly basis. He explained the current logistics and the anticipated growth of licensure of this group of facilities, noting the rationale for the bill. He noted delays in issuing licenses creates an enormous financial burden for the majority of providers who depend on funding from agencies which require documentation of a current license in order to provide reimbursement. It also presents barriers for parents who are trying to find legal child care. He answered numerous questions.

### HEARINGS CLOSED ON SB 252.

### HEARINGS BEGAN ON SB 254.

Chair requested a staff briefing on  $\underline{SB\ 254}$ . Ms. Correll explained the bill in detail and gave rationale for the request for changes proposed by the Department of Health and Environment.

Patrick L. Hays, Ph.D., Senior Laboratory Scientist, Department of Health/Environment, offered hand-out (Attachment NO. 8). He stated that the primary role of the state laboratory is to focus first on diagnostic and prevention programs in high risk behavior clients, to support local health departments' prevention and treatment programs, to provide a reference lab service which confirms initial screening results detected in private labs. He noted current statutes place the state laboratory in a competitive position with approved private labs. This is the main reason that modification in language in the statutes is being recommended. This change, if passed, will help to align public health priorities with appropriate state laboratory services. He answered numerous questions.

### HEARINGS CLOSED ON SB 254.

### CONTINUATION SHEET

MINU	UTES OF TH	E HOUS	<u>SE</u>	COMMITTEE	ON	PUBLIC	HEALTH	AND	WELFARE	,
room	_254-E, Stat	tehouse,	at <u>5:0</u> 0	/a/m/./p.m. or	n <u>Marc</u>	h 27,				19 <u>91</u>

Chair called for discussion on SB 180.

Rep. Wiard moved to report SB 180 favorably. Motion seconded by Rep. Amos. Motion carried.

Rep. Wiard will carry HB 180 on the floor of the House.

Chair asked for discussion on SB 55.

Rep. Praeger moved to report SB 55 favorably and have it placed on the Consent Calendar. Motion seconded by Rep. Amos. No discussion. Motion carried.

Chair drew attention to  $\underline{SB\ 342}$  and asked for discussion on the bill. It had been noted there was a discrepancy in wordage. Chair requested that Mr. Furse explain the changes needed. He did so, i.e., noting on page 11, line 32 after "f" it would be necessary to add the words, "Antibolic steroid." He gave rationale.

Rep. Amos made a motion to amend SB 342 by inserting on page 11, line 32 after (f), "Antibolic steroid." Motion carried.

Rep. Amos moved to pass SB 342 out favorably as amended. Motion seconded by Rep. Cribbs. No discussion. Motion carried.

Rep. Love will carry SB 342 on the House floor.

Rep. Samuelson made a motion to pass <u>SB 252</u> favorably. Motion seconded by Rep. Cribbs. No discussion <u>Motion carried</u>.

Rep. Neufeld will carry  $\underline{\mathbf{SB}\ \mathbf{252}}$  on the House floor.

Rep. Cribbs made a motion to pass SB 254 out favorably and request it be placed on the consent calendar. Motion seconded by Rep. Cozine. No discussion. Motion carried.

Chair made announcements in regard to committee agenda. Chair noted it may be necessary to have meetings ON CALL OF CHAIR.

Chair adjourned meeting at 7:00 p.m.

### HOUSE PUBLIC HEALTH AND WELFARE COMMITTEE

DATE 3-27 ADDRESS ORGANIZATION NAME Fooling 740 KHEL LSOB-Topeta Osmodomie W. Lamence US KETTIL LOUDIS Ly-Lo- Drow Topella State Hospital
CHERTINN SIDE CAMITTES
ON PHOLICATION FOR KNISTAS TOPERM Topeha ROOH

C. ROBERT BORRESEN, Ph.D., Chairman MARY ANN GABEL, Executive Director

BOARD MEMBERS: Public Members SUE BAUMAN KAREN CNEFKOW JOSEPH N. ROBB



Landon State Office Building 900 S.W. Jackson, Room 855-S Topeka, Kansas 66612-1220 913/296-3240

Psychology
C. ROBERT BORRESEN, Ph.D.
DONALD J. FORT, Ph.D.

Social Work
CLARICE HARRIS, MSW
SHARON T. RUSSELL, MSW

### BEHAVIORAL SCIENCES REGULATORY BOARD

LICENSED PROFESSIONALS: Psychologists Social Workers

REGISTERED PROFESSIONALS: Master Level Psychologists Professional Counselors

TESTIMONY BEFORE THE HOUSE PUBLIC HEALTH AND WELFARE COMMITTEE

S.B. 55

Wednesday, March 27, 1991

CHAIRPERSON SADER, VICE-CHAIRPERSON CRIBBS, AND COMMITTEE MEMBERS:

I am Mary Ann Gabel, Executive Director of the Behavioral Sciences Regulatory Board, appearing before you today on behalf of the board and in support of S.B. 55, as amended by the Senate Public Health and Welfare Committee and passed by the Senate Committee of the Whole.

The board first became aware of a possible omission in the existing statutes regarding the educational qualifications for registration as a masters level psychologist with the publication of the Attorney General's Opinion No. 90-104. A copy of the opinion is attached for your information.

The section of these statutes that establishes educational requirements for registration currently requires "at least" a master's degree in clinical psychology or "a" master's degree in psychology with specific coursework (see page 1, lines 28-40.) This means that a person with either a master's degree or a doctoral degree in clinical psychology may be eligible for registration, while a person who has a doctoral degree in psychology but who has not received a master's degree in psychology is not eligible for registration. Doctoral psychology programs exist that do not confer masters' degrees. Persons enter these programs following completion of their baccalaureate degree, complete the coursework and dissertation, and receive a doctoral degree.

The proposed statutory amendments contained in Section 1.(b)(2) of S.B. 55 enable persons who graduate with doctoral degrees in psychology from programs that do not confer masters' degrees or persons who possess doctoral degrees in psychology but whose masters' degrees are in areas other than psychology to register as masters level psychologists. Since the minimal educational requirement established by the legislature in 1987 is a master's degree in psychology, the board does not view this statutory amendment as lowering the educational standards, but rather a means of providing equity for persons who actually exceed the minimal educational requirements.

attm #1,

Thank you for allowing me an opportunity to appear before you today. I will be happy to attempt to answer any questions you may have.

Attachment

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#### STATE OF KANSAS

### OFFICE OF THE ATTORNEY GENERAL

2ND FLOOR, KANSAS JUDICIAL CENTER, TOPEKA 66612-1597

ROBERT T. STEPHAN ATTORNEY GENERAL

September 7, 1990

MAIN PHONE: (913) 296-2215 CONSUMER PROTECTION: 296-3751 TELECOPIER: 296-6296

ATTORNEY GENERAL OPINION NO. 90- 104

Mary Ann Gabel Executive Director Behavioral Sciences Regulatory Board Landon State Office Bldg., 855-S Topeka, Kansas 66612

Re:

State Boards, Commissions and Authorities -Regulation of Psychologists -- Registration of
Masters Level Psychologists; Qualifications for
Registration

Synopsis:

To be registered as a master's level psychologist, an applicant must first obtain a master's degree in psychology as specified by statute. A person engaged in a doctoral psychology program which does not also confer a master's degree, and who completes all course requirements except the dissertation, may not be registered as a master's level psychologist unless the applicant has met the educational requirements through a separate master's program. Cited herein: K.S.A. 1989 Supp. 74-5363, as amended by L. 1990, ch. 286, § 6.

Dear Ms. Gabel:

On behalf of the behavioral sciences regulatory board, you have requested our opinion concerning educational requirements for registration as a master's level psychologist (RMLP). Specifically, you ask whether a person engaged in a doctoral psychology program which does not confer a master's degree,

PHred 3-27-91 attn:3 and who completes all course requirements but not the dissertation may be registered under the RMLP act.

Persons desiring registration under the RMLP act must meet the requirements of K.S.A. 1989 Supp. 74-5363, as amended by L. 1990, ch. 286, § 6. Subsection (b)(2) was not amended by the 1990 law, and states that the applicant must have

"received at least a master's degree in clinical psychology . . . or . . . a master's degree in psychology and during such graduate program completed a minimum of 12 semester hours or its equivalent in psychological foundation courses . . . and 24 semester hours or its equivalent in professional care courses . . . " K.S.A. 1989 Supp. 74-5363(b)(2), as amended by L. 1990, ch. 286, § 6.

Based upon the grammatical construction of the statute, the phrase "or its equivalent" refers the number of hours of course work and not to the academic degree conferred or the type of courses required. C.f., Fox v. Board of Regents of State of N.Y., 527 N.Y.S.2d 652, 653 (A.D. 3 Dept. 1988). Thus, a master's degree must have been conferred on the applicant prior to registration as an RMLP.

In conclusion, it is our opinion that a person engaged in a doctoral psychology program which does not also confer a master's degree, and who completes all course requirements except the dissertation, may not be registered as a master's level psychologist unless the applicant has met the educational requirements through a separate master's program.

Very truly yours,

ROBERT T. STEPHAN

ATTORNEY GENERAL OF KANSAS

Mark W. Stafford

Assistant Attorney General

RTS:JLM:MWS:bas

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# Testimony House Public Health and Welfare Committee March 27, 1991

### Senate Bill 55

Madam Chair and distinguished members of the committee, "Good morning". My name is Gerald Gentry. I am a native Kansan who was fortunate to receive all ten years of his psychology training in our great state!

I have been Chief Psychologist at Osawatomie State Hospital for almost a dozen years. My greatest challenge has been to recruit well-trained clinicians to work in the public sector. The best decision I have made in this regard was to begin hiring in 1983 two - four doctoral psychology candidates from The University of Kansas and The University of Missouri -- Kansas City each year to work as part-time staff psychologists at Osawatomie. They loved the work, went back to campus and told other students, and soon I was getting job inquiries from new graduates who had worked (or their friend had worked) part-time at Osawatomie as a doctoral candidate.

I support the changes contained in Senate Bill 55. They are necessary, in part, because doctoral programs in Counseling Psychology (including both KU and UMKC) often accept students with master's of education (M.Ed.) degrees in Counseling, rather than a master's degree in psychology. However, prior to being elevated to "candidate" status, these psychology doctoral students complete all of the course requirements for RMLP registration, as well as many additional courses. In fact, the only difference between these individuals and those presently eligible for RMLP status is the title of their master's degree.

Today, we have three doctoral candidates on staff at Osawatomie who will have to be terminated from employment unless Senate Bill 55 becomes law. Such action would deprive our patients of excellent care, and lose the state three clinicians just as they are nearing completion of a decade of psychology study! Since both the KU and UMKC Counseling Psychology doctoral programs are fully accredited by the American Psychological Association and their graduates are licensable in Kansas, it is logical and appropriate that their doctoral candidates be eligible for registration.

Thank you for your time and consideration.

Gerald K. Gentry, Ph.D. Clinical and Child Psychologist

PH&W 3-27-91 attmos 2 The KU Counseling Psychology doctoral program supplements my masters by providing more psychological coursework, more training in psychotherapy, and more academically supervised practicum than any terminal masters program in the State of Kansas. This is evidenced by the fact that I will be eligible for Kansas licensure as a graduate of this program, but not for registry. The changes proposed by this Bill will create a valid parity between the terminal masters and the advanced doctoral candidate (i.e. one who has completed his/her comprehensive exams and may begin internship and dissertation work).

Without these changes, I and many of my fellow counseling psychologists-in-training will be in a rather paradoxical situation. After profiting extensively from the educational opportunities available in Kansas, we will be forced to leave the state in order to work in our chosen professions. I cannot believe this was the intended outcome when the original RMLP law was written. Yet leaving the law as its stands amounts to a large State investment in mental health (via funding for the Ph.D program in Counseling Psychology) and a barrier to realizing a full benefit from that investment (by preventing our advanced candidates and graduates from practicing as RMLPs).

In summary, I urge the committee to recommend passage of this bill to permit doctoral candidates to be employed as RMLPs. This revision will ultimately provide a greater return on Kansas' investment in its mental health providers and enhance the quality of services provided.

I thank you for your time.

9H+10 3-27-91 attint 3-2

# Testimony Senate Public Health and Welfare Committee Wednesday, March 27, 1991

### Bill to amend RMLP registry

Mr. Chairman and members of the committee. My name is Wes Crenshaw. I am a third year doctoral student in the Department of Counseling Psychology at the University of Kansas. I am speaking in support of this bill. The bill proposes a revision which will allow graduates of our program to obtain the two years supervised experience necessary for licensure in the state; and advanced doctoral candidates to be employed as masters level psychologists prior to their internship.

I am a product of Kansas Education. After receiving my BA from Southwestern College in Winfield I received a masters degree from Wichita State University in 1988. It has always been my goal to practice in Kansas, and to that end I applied to only one doctoral program, the department of Counseling Psychology at KU. At the end of this semester I will have completed many more than the 12 hours of graduate work in the psychological foundations specified in the present statute, and I will have completed many more than the required 24 hours of professional core courses. In fact, I will have nearly 100 graduate hours in progression toward my Ph.D. I will have completed courses in the history of psychology, psychology of learing and perception, statistics, psychotherapy, testing, personality theory and psychopathology, research methods in psychology, social psychology, and the biological bases of psychology. Each of these courses is specifically designed to support my licensure application in Kansas following my post-doctoral supervision. Additionally, I have already completed four practicums and two extra "field experiences," totaling approximately 750 supervised practicum hours.

By all accounts, I am qualified for registry as an RMLP in Kansas. By all accounts, but one...the masters degree I received at WSU was a Masters of Education in Counseling and School Psychology, not a clinical degree or a "generic" psychology degree. I intentionally chose this masters program because it offered an excellent counselor training model. Alone, this program did not, and should not, qualify me for RMLP status. However, this masters degree, combined with the extensive post-masters training and supervision I have received, places me in a very favorable position when compared to persons possessing only a terminal masters.

PH+W) 3-27-91 attm#3

## Testimony House Public Health and Welfare Committee March 27, 1991

### Senate Bill 55

Mr. Chairman, members of the House Public Health and Welfare Committee, I am Stuart M. Frager, Chair of the Council of Administrative Psychologists of the Department of Social and The problem addressed by SB 55 arose from Rehabilitative Services. Attorney General's Opinion No. 90-104 (attached) clarifying Kansas statutes covering the Registered Masters Level Psychologist Act. The specific issue is that a Masters degree in Psychology is a requirement for RMLP registration, even if a student enrolled in a Doctoral program has taken all of the required coursework and has passed their final exams, or even has a Ph.D. without a Masters Currently I have a psychologist on my staff with a Ph.D. dearee. in Counseling Psychology from the University of Kansas who is still being paid as a student intern as she does not currently meet the requirements for her RMLP. This, of course, also limits her practice for the hospital.

The Council of Administrative Psychologists is requesting that the House Public Health and Welfare Committee concur with the changes proposed in Senate Bill 55. These changes were the result of input requested from a wide array of interested parties (see attached) who worked together to develop the language changes now in the Specifically the wording "at least a masters degree in psychology" (p.1, line 32) addresses the problem of those holding doctoral degrees without a masters degree. The wording "and during such master's or post masters coursework" (p.1, lines 33 & 34) clarifies when the required coursework is to be completed during the applicants post-graduate education. The section dealing with doctoral students who have completed the required coursework and passed their final examinations would allow for registration, and subsequent hiring, of applicants, many of whom are from Kansas, after completing their coursework and training. The market for psychologists in the Midwest has become increasingly more competitive. This change would provide an opportunity to attract applicants earlier in their training before graduation providing one further avenue for hiring, and also for retaining Kansas students in Kansas, who are qualified by degree, education and training.

Lastly, the change, (p.3, lines 16 & 17) Sec. 3. "This act shall take effect and be in force from and after its publication in the <a href="Kansas Register">Kansas Register</a>. ", would benefit staff who are currently in limbo due to the problems this bill is meant to address from suffering several months delay. Thank you for your consideration.

PH+W 3-27-91 attm.#4

Testimony House Public Health and Welfare Committee January 30, 1991

Senate Bill 55

Stuart M. Frager, Ph.D.
Chair, Council of
Administrative Psychologists
Psychology Department
Topeka State Hospital
2700 West 6th
Topeka, Kansas 66606
Telephone: (913) 296-4413

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### STATE OF KANSAS

### OFFICE OF THE ATTORNEY GENERAL

2ND FLOOR, KANSAS JUDICIAL CENTER, TOPEKA 66612-1597

ROBERT T. STEPHAN ATTORNEY GENERAL

September 7, 1990

MAIN PHONE: (913) 296-2215 CONSUMER PROTECTION: 296-3751 TELECOPIER: 296-6296

ATTORNEY GENERAL OPINION NO. 90- 104

Mary Ann Gabel Executive Director Behavioral Sciences Regulatory Board Landon State Office Bldg., 855-S Topeka, Kansas 66612



Re:

State Boards, Commissions and Authorities --Regulation of Psychologists -- Registration of Masters Level Psychologists; Qualifications for

Registration

Synopsis:

To be registered as a master's level psychologist, an applicant must first obtain a master's degree in psychology as specified by statute. A person engaged in a doctoral psychology program which does not also confer a master's degree, and who completes all course requirements except the dissertation, may not be registered as a master's level psychologist unless the applicant has met the educational requirements through a separate master's program. Cited herein: K.S.A. 1989 Supp. 74-5363, as amended by L. 1990, ch. 286, \$ 6.

Dear Ms. Gabel:

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and who completes all course requirements but not the dissertation may be registered under the RMLP act.

Persons desiring registration under the RMLP act must meet the requirements of K.S.A. 1989 Supp. 74-5363, as amended by L. 1990, ch. 286, § 6. Subsection (b) (2) was not amended by the 1990 law, and states that the applicant must have

"received at least a master's degree in clinical psychology . . . or . . . a master's degree in psychology and during such graduate program completed a minimum of 12 semester hours or its equivalent in psychological foundation courses . . . and 24 semester hours or its equivalent in professional care courses . . . " K.S.A. 1989 Supp. 74-5363(b)(2), as amended by L. 1990, ch. 286, § 6.

Based upon the grammatical construction of the statute, the phrase "or its equivalent" refers the number of hours of course work and not to the academic degree conferred or the type of courses required. C.f., Fox v. Board of Regents of State of N.Y., 527 N.Y.S.2d 652, 653 (A.D. 3 Dept. 1988). Thus, a master's degree must have been conferred on the applicant prior to registration as an RMLP.

In conclusion, it is our opinion that a person engaged in a doctoral psychology program which does not also confer a master's degree, and who completes all course requirements except the dissertation, may not be registered as a master's level psychologist unless the applicant has met the educational requirements through a separate master's program.

Very truly yours,

ROBERT T. STEPHAN

ATTORNEY GENERAL OF KANSAS

Mark W. Stafford

Assistant Attorney General

RTS:JLM:MWS:bas

2-27-91 atmy-4 Response to the proposed changes to statutes regulating registration level psychologists was requested from the following:

Acting Chief Psychologist Winfield State Hospital P.O. Box 548 Winfield, Kansas 67156

Charlie Befort, Ph.D. Chief Psychologist Larned State Hospital R.R.#3, Box 89 Larned, Kansas 67550

Denis J. Carville, Ph.D.
Kansas Association of Professional Psychologists
The Corinth Group
4000 Somerset Drive, Suite C
Prairie Village, Kansas 66208

Thomas T. Coolidge, M.D. Superintendent Topeka State Hospital 2700 W. Sixth Street Topeka, Kansas 66606-1898

Gary J. Daniels, Ph.D. Superintendent Parsons State Hospital & Training Center 2601 Gabriel Parsons, Kansas 67357

Linda DeCoursey Executive Director Kansas Psychological Association 400 S.W. Croix Topeka, Kansas 66611

Lois Dixon, Ph.D. Chief Psychologist Kansas Neurological Institute 3107 West 21st Street Topeka, Kansas 66604

27-91 attm -5

Gary Forbach, Ph.D., Chairman Psychology Department Washburn University Topeka, Kansas 66621

Gerald Gentry, Ph.D. Chief Psychologist Osawatomie State Hospital Osawatomie, Kansas 66064

Francis Gerner, Ph.D. Chief Psychologist Reception & Diagnostic Center 3401 East Sixth Topeka, Kansas 66607

George Goetz, M.D. Superintendent Larned State Hospital R.R.#3, Box 89 Larned, Kansas 67550

Rita Goss, Ph.D. Chair, Legislative Committee Kansas Association of Professional Psychologists Lyndon and Mahoney 1650 Georgetown, Suite 160 Wichita, Kansas 67218

Harvey Hillin, Ph.D. (SRS Liaison to Council of Administrative Psychologists) MH/RS, 5th Floor Docking State Office Building Topeka, Kansas 66612

James W. Lichtenberg, Ph.D. Co-Training Director Department of Counseling Psychology University of Kansas Lawrence, Kansas 66045

> 27-9/ attm

Carrol Mills, Ph.D. Chief Psychologist Youth Center at Topeka 1440 N.W. 25th Street Topeka, Kansas 66608

John Randolph, Ph.D.
President, Association of Community Mental Health Centers
Mental Health Center of East Central Kansas
1000 Lincoln
Emporia, Kansas 66801

David Rodeheffer, Ph.D. KPA Legislative Committee 909 S.W. 10th Topeka, Kansas 66604

Tom Runge, M.S. (RMLP Advisory Committee to BSRB) High Plains Mental Health Center 208 East 7th Street Hays, Kansas 67601

Richard Snyder, Ph.D.
Director, Clinical Psychology Program
Psychology Department
University of Kansas
Lawrence, Kansas 66045

Carol Spotts, Ph.D.
Rainbow Mental Health Facility
2205 West 36th Street
Box 3208
Kansas City, Kansas 66103

Norma Stephens Superintendent Osawatomie State Hospital Osawatomie, Kansas 66064

> PH=W 3-27-91 Attm.4-9

George Vranekovic, Ph.D. Chief Psychologist Parsons State Hospital & Training Center 2601 Gabriel Parsons, Kansas 67357

Joseph Weaver, Ph.D.
(President, Kansas Psychological Association)
Children's Rehabilitation Unit
University of Kansas Medical Center
39th & Rainbow Boulevard
Kansas City, Kansas 66103

2-27-91 attm 4-8

### Testimony Senate Public Health and Welfare Committee March 27, 1991

### Senate Bill 55

My name is Ellie Le Compte. I came to Kansas from Colorado in 1983 with a Masters in Counseling from the University of Colorado to begin work on a doctorate in Counseling Psychology at the University of Kansas. During my stay, I came to love this state. As much as I would like to stay, I cannot work as a psychologist in Kansas, even with a Ph.D. in Counseling Psychology. Not the way the statutes are written now.

I accepted a job at Osawatomie State Hospital in 1987. position gave me experience I needed as well as time and support to complete my dissertation. With current laws, I would not have been qualified for this position. This fall, I was told that I needed an R.M.L.P. At the time I thought that this would not present any problems. How wrong I was! Over a period of six weeks or so, I learned that I was not eligible for this certification because my My employer downgraded my Masters degree was in Counseling. position to that of a Psychology Trainee. I am earning 60% of what many others make, some of whom do not have doctorates at all. is ironic that even with a Ph.D. in Counseling Psychology from the University of Kansas and a year-long internship in clinical psychology at Topeka State Hospital, I am unqualified for many jobs requiring only a Masters degree in the state of Kansas. earning less money now with a Ph.D. than I was with an M.A. two years ago while a Psychologist I at Osawatomie State Hospital.

Although I looked into other positions in the state, I must have an R.M.L.P to work as a psychologist at a mental health center. Although I could work as an Unlicensed Assistant in private practice, I would receive no benefits and would not be guaranteed a specific number of hours of work. I could take a position as a case manager or a counselor, but then I would not be accumulating required hours toward licensure as a psychologist. I feel caught between the devil and the deep blue sea; nothing looks very promising. I consider selling my house and leaving, all because of a few words in the statutes.

I sincerely hope that you will make the following change in Senate Bill 55 at lines 40-42, "...or has been granted 'candidate' status (i.e. completed comprehensive examinations) in a doctoral program in psychology consistent with state universities of Kansas and during such graduate program completed a minimum..." Without this change, many people like me will not have the opportunity to work in state hospitals or mental health centers for all the years between completing coursework until licensure. You will surely lose us all to another state. PHAND 3-27-91 attm+5

Thank you for your time.

## Kansas State Board of Pharmacy

LANDON STATE OFFICE BUILDING 900 JACKSON AVENUE, ROOM 513 TOPEKA, KANSAS 66612-1220 PHONE (913) 296-4056

STATE OF KANSAS



SB 342 TESTIMONY
HOUSE PUBLIC HEALTH
AND WELFARE COMMITTEE
MARCH 27, 1991

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MADAM CHAIRMAN, MEMBERS OF THE COMMITTEE, MY NAME IS TOM HITCHCOCK AND I SERVE AS THE EXECUTIVE SECRETARY OF THE BOARD OF PHARMACY. I APPEAR BEFORE YOU TODAY ON BEHALF OF THE BOARD IN SUPPORT OF SB 342.

THIS BILL WILL UPDATE THE KANSAS CONTROLLED SUBSTANCES ACT WHICH CONTAINS THE FIVE DIFFERENT SCHEDULES FOR DRUGS LISTED IN THE ACT. THE REQUESTED CHANGES WILL BRING THE KANSAS STATUTES INTO CONFORMITY WITH THE FEDERAL DRUG ENFORCEMENT ADMINISTRATION (DEA) SCHEDULING OF CONTROLLED SUBSTANCES AND EFFECT CHANGES IN ONE STATUTE WHICH DEALS WITH PENALTIES.

THE CHANGES INCLUDE: 1) MOVING TWO DRUGS WITHIN THE SAME SCHEDULE TO BETTER DESCRIBE THEIR PHARMACOLOGICAL ACTIVITIES FROM STIMULANT TO HALLUCINOGENIC CATAGORY; 2) THE ADDITION OF ELEVEN DRUGS IN FOUR DIFFERENT SCHEDULES (PAGE 5, LINE 30; PAGE 6, LINES 14, 19 AND 22; PAGE 7, LINE 35; PAGE 14, LINES 25, 27, 28 AND 30; PAGE 16, LINES 22 AND 23) AS WERE ADDED BY DEA; 3) THE CHANGE OF THE CHEMICAL DESCRIPTION OF ONE DRUG; AND 4) CORRECTION OF A FOUR DIGIT CODE NUMBER ON ONE DRUG WHICH WAS OUR ERROR AND DID NOT MATCH THE NUMBER UTILIZED BY DEA.

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IT IS ALSO NECESSARY TO MOVE THE ANABOLIC STEROIDS FROM SCHEDULE IV (PAGE 15, LINES 7 - 22) TO SCHEDULE III (PAGE 11, LINE 32 TO PAGE 12, LINE 31). THERE IS ALSO A CHANGE IN DEFINITION, PRODUCT LISTING AND SOME EXPLANATORY RELATED SECTIONS WHICH WILL CONFORM WITH DEA REGULATION. WHEN ANABOLIC STEROIDS WERE ADDED TO THE KANSAS CONTROLLED SUBSTANCE ACT, THEY WERE PLACED IN SCHEDULE IV AND NOW DEA HAS INCLUDED THEM IN SCHEDULE III. IT IS A VIOLATION OF FEDERAL LAW FOR ANY STATE TO LIST ANY PRODUCT IN A LESSER SCHEDULE THAN IS LISTED BY DEA.

THE FINAL TWO CHANGES REQUESTED BY THE BOARD ARE ON PAGE 16, LINES 41 - 42 AND PAGE 17, LINES 21 - 22 WHICH IS NECESSARY BECAUSE OF THE MOVING OF ANABOLIC STEROIDS FROM ONE STATUTE TO ANOTHER. THE REMAINDER OF THE CHANGES IN SECTION 6 ARE ALREADY LAW AND WERE MOVED BY REVISOR OF STATUTES BECAUSE THIS BILL WOULD REPEAL THE OTHER STATUTE.

THE BOARD OF PHARMACY RESPECTFULLY REQUESTS THE FAVORABLE PASSAGE OUT OF COMMITTEE OF SB 342.

THANK YOU.

PHVED 3-27-91 attm6-2



Stanley C. Grant, Ph.D., Acting Secretary

### State of Kansas

Joan Finney, Governor

### Department of Health and Environment Division of Health

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# Testimony Presented to the House Public Health and Welfare Committee

on

Senate Bill 252

### Background

Article 5 of Chapter 65 of the Kansas Statutes Annotated pertain to the definition and regulation of maternity hospitals or homes, and homes for children. K.S.A. 65-501 et seq was first enacted in 1919 and authorizes the Kansas Department of Health and Environment to regulate these facilities and agencies.

K.S.A. 65-514(a) defines the terms of the license and K.S.A. 65-505(a) sets the fee structure.

The proposed bill amends K.S.A. 65-504(a) to authorize the issuance of a license which will remain in effect until withdrawn or revoked. Yearly inspections to determine regulation compliance will still be required by the secretary's designated agents. K.S.A. 65-505(a) is also amended to authorize an annual license fee. Prior to this amendment the annual fee was tied to the application and application to renew the license. The yearly fee will remain the same. None of the above amendments have been introduced in a previous legislative session.

### Description of the Issues

With over 11,000 facilities to regulate, the child care regulatory program is growing faster than the current number of staff can manage in a timely fashion. The child care regulatory program has experienced a 70% growth in 9 years with no increase in staff to operate the program.

This amendment is being proposed to accommodate the continued growth of the program, to eliminate delays in issuing licenses and to alleviate regulatory barriers to funding agencies, placement agencies and parents by enhancing internal efficiencies and reducing paperwork.

3-27-91

Roger Carlson, Ph.D., Director of the Kansas Health and Environmental Laboratory (913) 296-1619 Delays in issuing licenses creates an enormous financial burden for the majority of providers who depend on funding from agencies which require documentation of a <u>current</u> license in order to provide reimbursement. It also presents barriers for parents who are trying to find legal child care.

Examples of funding agencies impacted are as follows:

SRS requires that facilities hold a current license or registration certificate in order to initiate or continue a contract to pay for day care for low income families; and residential care and family foster care for children in need of care and juvenile offenders.

DOE requires that day care facilities and residential facilities have a current license or certificate in order to initiate or continue an agreement to provide food reimbursement to these facilities.

Day Care Referral Agencies can only refer parents to facilities who hold a current license or certificate.

Child Placing Agencies can only place children under 16 years of age for foster care in facilities holding a current license.

Other states require proof of a current license in order to initiate and continue payments for residential care.

Insurance companies require proof of a current license in order to initiate and continue payments for residential treatment.

Other states and foreign countries require proof of a current license in order to work with a child placing agency facilitating adoptions.

### Problems/Benefits for KDHE

At the end of Calendar year 1990 there were 6,972 <u>licensed</u> facilities. If 80% renew the license than this proposed amendment would eliminate the need to print 5,577 licenses. Tasks related to pulling files, printing, copying and mailing licenses as well as telephone inquiries will be reduced. Cost for postage for mailing 5,577 files would also not be incurred.

However the growth of the entire child care regulatory program, projected at 1,588 files a year, and the resultant increase in demands for supplies, forms, regulation books, etc. to meet the growth, combined with the increasing postal rates will quickly offset any possible budgetary relief experienced by not mailing yearly licenses. Many tasks will not be eliminated by this proposal such as requesting, receiving and tracking compliance, requesting and tracking the yearly inspections, receiving the fees, notifying other agencies of licensing status, initiating enforcement procedures, issuing initial licenses, closures, regulation revisions, providing training and other regulatory functions.

It is hoped that the proposed legislation will reduce unnecessary tasks so that staff can meet program objectives in a timely and expedient manner. Savings will be in the areas of program efficiency, program accountability, and productivity for KDHE as well as impacted agencies.

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### Department's Position

KDHE respectfully requests SB 252 be favorably passed out of Committee.

Testimony

Presented by:

Joseph F. Kroll, Director

Bureau of Adult and Child Care

Kansas Department of Health and Environment

Wednesday, March 27, 1991

9xxel 3-27-9/ attm#7-3



### State of Kansas

Joan Finney, Governor

Department of Health and Environment Kansas Health and Environmental Laboratory

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Testimony presented to

House Public Health and Welfare Committee

by

The Kansas Department of Health and Environment

Senate Bill 254

Successful control of syphilis and other sexually transmitted diseases in Kansas is dependent upon closely coordinated efforts in health education, patient care, and clinical laboratory support. K.S.A. 65-153f does help to assure the uniform quality of prenatal laboratory tests for the prevention of congenital syphilis. Although prevention of the devastating effects of congenital syphilis warrants continuation of the prenatal screening requirement, from a statewide perspective, prenatal clients are generally at lower risk for syphilis than many other client groups. Thus, 16,000 routine prenatal syphilis serology tests now performed by the state laboratory each year would be more appropriately performed in approved private laboratories.

The primary role for the state public health laboratory is to focus first on diagnostic and prevention programs in high risk behavior clients, to support local health department prevention and treatment programs, and to provide reference laboratory services which confirm initial screening results detected in private clinical laboratories. However, the present wording of K.S.A. 65-153f places the state public health laboratory in a competitive position with approved private laboratories performing routine screening tests on low-risk clients. It is for this reason that a modification in the wording of this statute is recommended.

The state public health laboratory is publicly funded and thus has major obligation to ensure that laboratory services provided with public funds are consistent with public health priorities. This statutory change will help to align public health priorities with appropriate state laboratory services.

Testimony presented by: Patrick L. Hays, Ph.D.

Senior Public Health Laboratory Scientist Kansas Health and Environmental Laboratory

March 27, 1991