

Approved: April 7, 1994
Date Sh

MINUTES OF THE HOUSE COMMITTEE ON PUBLIC HEALTH AND WELFARE.

The meeting was called to order by Chairperson Joann Flower at 1:30 p.m. on March 22, 1994 in Room 423-S of the Capitol.

All members were present except: Rep. Swall, excused.

Committee staff present: Emalene Correll, Legislative Research Department
William Wolff, Legislative Research Department
Norman Furse, Revisor of Statutes
Sue Hill, Committee Secretary

Conferees appearing before the committee:

Others attending: See attached list

Chairperson Flower called the meeting to order drawing attention to bills up for discussion and action.

SB 410

Chair requested the Sub-Committee Chair, Rep. Wagle offer the recommendations of the Sub-Committee. Rep. Wagle offered a hand-out, balloon amendments on **SB 410**, (see Attachment No. 1). Rep. Wagle detailed amendments, and offered rationale, i.e., page 2, line 13, the board shall consist of "at least" 7 members; line 29, "four" nominees; line 31, changing the composition of the Drug Utilization Board; line 33, adding language, "SRS shall not restrict patient access to prescription-only drugs....."; renumbering and relettering sections as needed. She drew attention to a note from the revisor i.e., page 3, Sec. 3, (75-4319) needs to be replaced by current law section and the current law section amended with the new proposed language. Rep. Wagle noted, after all the input was reviewed the entire Sub-Committee worked on the amendments that appear in the balloon and were unanimous in their agreement. The Sub-Committee members are Rep. Wagle, Rep. Neufeld, Rep. Sader.

Rep. Wagle then made a motion to adopt the balloon amendment just reviewed on **SB 410**, seconded by Rep. Mayans. No discussion. Motion carried.

Rep. Wagle moved to pass **SB 410** out favorably as amended, seconded by Rep. Mayans. No discussion. Motion carried.

SB 615.

Chair drew attention to **SB 615** and requested a Sub-Committee report.

Rep. Samuelson, serving as Chair, distributed (Attachment No. 2). She thanked the other Sub-Committee members, Rep. Freeborn, Rep. Henry for their hard work. She drew attention to **SB 451** and noted this legislation, if passed with recommendations of the Sub-Committee will be called **HOUSE SUBSTITUTE FOR SB 615**. She detailed the lengthy balloon amendments, and offered rationale. It was noted new Section 1, was the action of the Joint Committee on Children and Families, related to the desired outcome for a child care policy in the state, a policy for better access to high quality, affordable child care. She drew attention to language changes, i.e., "boarding home for children under the age of 16", has been changed throughout the bill to now read, "child care facilities". Page 6, had lengthy language additions, as well as pages 9,10,11,15. She detailed these proposed changes page by page.(See Attachment No. 2.)

CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON PUBLIC HEALTH AND WELFARE, Room 423-S
Statehouse, at 1:30 p.m. on March 22, 1994.

SB 615 SB 451 continued:

Rep. Samuelson then moved to adopt the balloon amendments on **SB 451**, (now to be called **HOUSE SUBSTITUTE FOR SB 451**) Motion seconded by Rep. Henry. Discussion began. Rep. Henry requested that Rep. Samuelson explain why the Sub-Committee decided to recommend language in **SB 451**, in lieu of **SB 615**. Rep. Samuelson offered rationale, along with staff input, there were a number of policy changes in **SB 615**, i.e., registration; setting all of the categories by statute, rather than by rules and regulations, thus making them set in concrete and eliminating flexibility for changing situations; expanded authority for the agency in certain instances. It was the view of the Sub-Committee there wasn't enough time to devote to that many policy issues, and it would be better to go with the language in **SB 451** where there are a fewer policy changes.

NOTED: it was also the recommendation of the Sub-Committee that the Committee on Children and Families study these policy issues further in **SB 615** this summer and determine if some of these issues should be presented next year.

At this time Chairperson Flower thanked the Sub-Committee and staff for their hard work. She stated, it has saved a tremendous amount of time for the full Committee. It is greatly appreciated.

Chair asked if there was further discussion. It was noted by staff there were technical changes needed because of the change to a Substitute bill. He explained.

Rep. Samuelson moved to amend **HOUSE SUBSTITUTE SB 615** conceptually that would allow the revisor to amend the technical changes, i.e., to adjust the title appropriately; insert a carry-over provision for licenses; on page 8, insert language that is similar to balloon language indicated on page 15 related to fees. Motion seconded by Rep. Rutledge. No discussion. Vote taken, motion carried.

Discussion continued. Concerns expressed regarding language on page 15, line 25, i.e., that a care provider would be fined or risk license suspension if the parents did not comply with inoculation requirements. A specific case was cited by Rep. Mayans. A lengthy discussion began regarding, it is not the responsibility of the care giver for the inoculations of the children, only the record keeping of inoculations. It was noted some parents do not comply with the inoculations regulations. It was noted, the care provider would be acting in an unlawful manner if they allow children in their facility if they are not vaccinated. The question was asked, do we want all these children not vaccinated out on the street. It was noted this would be a policy question for the Committee. Staff drew attention to current law, on page 15, line 21. Discussion held regarding language that would help clarify the responsibility of the caregiver, and that of the parent. It was noted, the care provider must keep records, should notify the parents of the regulations regarding inoculations, but again, the care giver is only responsible for keeping current and correct records of those inoculations. The inoculations are the responsibility of the parent. Other language possibilities were discussed.

At this time Rep. Mayans made a motion to amend **HOUSE SUBSTITUTE FOR SB 615** conceptually on page 15, line 28, after "secretary", and again similar language on page 11, line 31, by adding, "the persons maintaining the family day care home shall not be cited for a violation of this subsection if the child does not have such immunizations." Motion seconded by Rep. Scott.

Discussion continued, i.e., the question was asked if this could be better handled by rules and regulations. It was noted current language does not, should not, exempt children from being immunized before attending a family day care center. It was noted the documentation offered by Rep. Mayans indicates the care provider had been written up for lack of documentation, not lacking in responsibility for the immunization of children. It was clarified by staff, the caregiver would still be required to keep records, but could not be held in violation if the child did not have immunization shots. Therefore, it is up to the parents bringing their children to a care provider to ask to see the records to clarify that all children have been immunized and have complied with regulations, for the protection of their own children.

Question called, vote taken, motion carried.

Rep. Neufeld moved to further amend **HOUSE SUBSTITUTE FOR SB 615** by adding language "licensees involved will report to the local health departments the name and address of parent or guardian of each of those children who does not have current immunization". Motion seconded by Rep. Wells. No discussion. Vote taken, motion carried.

Rep. Samuelson moved to report **HOUSE SUBSTITUTE FOR SB 615** favorable for passage, as amended. Motion seconded by Rep. Rutledge. No discussion. Motion carried.

CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON PUBLIC HEALTH AND WELFARE, Room 423-S
Statehouse, at 1:30 p.m. on March 22, 1994.

Chair drew attention to **SB 816**.

Rep. Samuelson moved to amend **SB 816** on page 4, Sec. 6, line 22, by deleting "legislation in.....through line 25. Motion seconded by Rep. Rutledge. Discussion began, i.e., Rep. Samuelson offered rationale, i.e., often when legislation is studied during Interim, and hearings have been conducted at the very end of Interim, a bill may be presented that contains much of what has been discussed, but also perhaps some of what has not been brought out in hearings. In her view, it is best to bring a bill before a full Committee for hearings, rather than have it taken right to the House or Senate floor for a vote. When asked, staff stated, currently there is no authority to suggest any legislation be taken directly to the floor for discussion and vote. That decision would be made by the Speaker of the House or the President of the Senate. It has not been provided for by the Legislature in statute.

Vote taken, motion carried.

Rep. Wagle moved to amend **SB 816** on page 3, lines 31-33, (5) to reinsert language regarding the Consumer Sub-Committee, and to remove the "consumers" from the other Sub-Committees as indicated in the Sub-Committee composition for those of Insurance, Administrative, and Employer. Motion seconded by Rep. Mayans. Rep. Wagle offered rationale, i.e., there might be a provider/consumer conflict; the consumer would always be over-ruled since there are so few consumers assigned to the Committees.

A lengthy discussion ensued, i.e., concerns expressed regarding the Oversight Committee directs when, whether or not the Sub-Committee will meet; concerns expressed regarding how much consumer input would be accepted. Views expressed that perhaps it would be better if they still maintained a consumer on each of the listed Committees rather than have only one Committee where they would be represented to offer input. It was the view of some members, the Oversight Committee should be fair in their evaluation of the information offered by each of these separate Committees since they are responsible to the voters. It was noted these Committees are required to meet and report at the direction of the Oversight Committee. Staff noted, the Sub-Committees are not limited to a specific list or number, and staff read language in the bill as follows, "and such others as are named by the Committee".

Question called. Vote taken, motion carried.

Rep. Sader drew attention to a balloon amendment on **SB 816**, see (Attachment No.3). She detailed proposed amendments and offered rationale. Rep. Sader then moved to amend **SB 816** in the title so that it would be clear this legislation is "relating to health care for Kansans"; to change the composition of the Committee to 12 members and insert the bracketed language indicated on page 2 of the balloon, which is in fact the composition of the Committee for Joint Health Care Decisions for the 90's. She explained, this would eliminate the partisan nature of the composition of the Committee. Further to amend on page 2, to delete the phrase on line 6, "whether or not present and voting". Further to amend on page 3, line 7, after "appropriate", strike language through line 33. She noted the final amendment proposed on page 4, Sec. 6 had been proposed by Rep. Samuelson and already adopted by the Committee. Motion seconded by Rep. Henry.

Discussion began. Concerns expressed regarding the composition of the Committee. It was noted, page 4, line 27, Sec. 8 that 46-1901 is repealed, (Joint Committee on Health Care Decisions for the 90's). Concerns expressed increasing the membership of Committee to 12; concerns expressed that this legislation may not pass through the Senate this late if amended drastically in Committee; some members requested Rep. Sader's amendments be dealt with separately. Rep. Sader stated, she had no problem with items being addressed separately.

Rep. Wells made a Substitute motion to amend **SB 816** on page 2, line 6, to delete after "committee", "whether or not present and voting". Motion seconded by Rep. Mayans. No discussion. Vote taken. Motion carried.

Rep. Neufeld moved to report **SB 816** out favorably as amended, seconded by Rep. Wells.

Discussion ensued, i.e., a Constitutional question has been raised about separation of powers.

CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON PUBLIC HEALTH AND WELFARE, Room 423-S
Statehouse, at 1:30 p.m. on March 22, 1994.

SB 816 continued:

Rep. Wagle made a Substitute motion to amend **SB 816** on page 1, line 43, after "committee" insert a (.) and delete "and", as well as deletion of language on page 2, lines 1-2. Motion seconded by Rep. Samuelson. Discussion ensued, i.e., it was noted the Constitutional question on separation of powers was because the members of the Committee would be directing the appointees of the Governor, or her cabinet, constituting a division of power. Other alternative language was suggested, i.e., to change "shall" to "may."

Vote taken . Motion carried.

At this point, Rep. Sader requested the two provisions proposed by her earlier and indicated in the balloon amendment on **SB 816**, (Attachment No. 3), be addressed separately so that it is clear to her and others these amendments were either accepted or rejected by a vote. Rep. Sader moved to amend **SB 816** page 1, line 11, so the title reflects what it actually is, a health care piece that reads, "relating to health care for Kansans". Motion seconded by Rep. Henry.

Discussion ensued. Vote taken, motion carried.

Rep. Sader then moved to amend **SB 816** on page 1, line 34, after "composed of", to delete language through line 43, and continued on page 2, delete lines 1-2, then to insert the balloon language provided relating to the composition of the Committee. Motion seconded by Rep. Goodwin.

At this time Rep. Neufeld made a Substitute Motion to pass **SB 816** out favorably for passage as amended, seconded by Rep. Wells.

Discussion ensued. Vote taken, Chair in doubt. A show of hands indicated 9 in favor, 8 against, motion carries.

Recorded as **NO votes** were Rep. Sader, Rep. Goodwin, Rep. Van Fleet, Rep. Henry, Rep. Rutledge, Rep. Nichols, Rep. Bruns, Rep. Weiland. Rep. Goodwin.

Chair drew attention to fiscal note on **SB 816**, recorded this date as (Attachment No. 4)

Chair drew attention to **SB 759**.

Rep. Sader moved to amend **SB 759** by incorporating into it, **HB 3080**, which will now be called **HOUSE SUBSTITUTE FOR SB 759**, motion seconded by Rep. Wagle. Discussion began. Rep. Wagle then stated, **HB 3080** is a House Appropriations position on moving managed care system into the Department of SRS. This has been studied for a very long time. This is a bi-partisan position of the part of the House Appropriations Committee. Hearings have been held on **SB 749**, however, there are a lot of policy issues unresolved. **HB 3080** had extensive hearings in the Appropriations Committee. No further discussion.

Vote taken, motion carried.

Rep. Wagle moved to amend further **HOUSE SUBSTITUTE FOR SB 759** on page 2, line 13, the composition of the Committee shall comprise of 1/3 of persons who are acute care providers, experienced in managed care. She detailed rationale. Motion seconded by Rep. Morrison. Discussion ensued, i.e., the number of Committee members; concerns relating to Committee members were to receive compensation, so some members stated there should be a set number for the Committee, perhaps not to exceed 15 members. Vote taken, motion carried.

Rep. Scott moved to amend **HOUSE SUBSTITUTE FOR SB 759** by amending language on page 2, line 9, "not to exceed 15 members", seconded by Rep. Sader. Discussion continued. It was noted, a Conference Committee would be appointed later and questions on whether or not the Senate had discussed the number of members on the Committee could be learned at that time.

Question called. Vote taken, motion carried.

Representative Freeborn recorded as **NO vote**.

CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON PUBLIC HEALTH AND WELFARE, Room 423-S
Statehouse, at 1:30 p.m. on March 22, 1994.

Rep. Wagle moved to pass **HOUSE SUBSTITUTE FOR SB 759** out favorably as amended, seconded by Rep. Rutledge. No discussion. Motion carried.

Chair drew attention to **SB 520**.

Rep. Wagle as Chair of the Sub-Committee on **SB 520** offered a balloon amendment (see Attachment No. 5). She offered a comprehensive explanation proposed changes, and noted this issue has long been studied by the Joint Committee on Health Care Decisions for the 90's. This is a recommendation from that Committee. When this legislation went to the Senate, those recommendations were stricken, and replaced with language that allowed local school boards to do what they wanted to in the way of health assessment of school pupils. The House Sub-Committee on **SB 520**, offers the recommendations to replace the language of the Joint Committee recommendation, plus other amendments that will make this a stronger bill. She offered rationale, and detailed amendments, i.e., add new section (8) on page 1; delete "dental health" on line 31; line 42, add "or by a person acting under the direction of a physician". Page 2, line 25, reinsert "assessment"; on page 3, lines 12 and 29 to insert "and clinics".

Rep. Wagle then moved to amend **SB 520** in this manner as described in the balloon, with the bill now to be called **HOUSE SUBSTITUTE FOR SB 520**. Motion seconded by Rep. Rutledge.

Staff members explained that a substitute bill is not a new bill. It is viewed as an amendment, a continuation of an existing bill.

Vote taken. Motion carried.

Rep. Wells then moved to amend **HOUSE SUBSTITUTE FOR SB 520** on page 1, line 22, "licensee means, a person who is licensed under the healing arts act". Motion seconded by Rep. Nichols.

Discussion began. It was the belief of some members, with the amendment proposed, it is the intention this would allow chiropractors to offer the health assessments. Concerns were expressed, i.e., if this amendment were to pass, the entire bill might be lost on the Senate side. Some members stated the role of a chiropractor is as important in offering an assessment of a student as is that of physicians or nurses. Some view it as wrong to exclude the chiropractors from doing a health history, a physical examination, hearing, vision, nutrition adequacy tests. Some stated, this group of providers has had 4 years of education, and most do these examinations for much less money than the physicians. Some view the amendments as originally recommended by the Joint Committee on Health Care Decisions initially as the best way to go.

Vote taken, Chair in doubt. Show of hands indicated a tie. Chair voted in favor, motion carried.

Rep. Wagle moved to pass **SUBSTITUTE FOR SB 520** out of committee favorably as amended, seconded by Rutledge. No discussion. Motion carried.

Chair requested members to focus quickly on **SB 310**.

Rep. O'Connor moved report **SB 310** out favorably for passage, seconded by Rep. Rutledge. No discussion.

Vote taken. Motion carried.

Rep. O'Connor agreed to carry **SB 310** for debate in the House.

Chair adjourned the meeting at 3:31 p.m.

The next meeting is scheduled for March 23, 1994.

VISITOR REGISTER

HOUSE PUBLIC HEALTH AND WELFARE COMMITTEE

DATE March 22, 1994

NAME	ORGANIZATION	ADDRESS
Tammi RobbAS	KSNA	Topeka
Stew Whitton	EDS	Topeka
Aeresa Newino	EOS	Dallas
Michelle Peterson	Ks. Int. Consulting	Topeka
W. GROSZ	KC	Shawnee Mem Med Ctr
Rich Githrie	Health Midwest	KC
KETH R LANDIS	CHRISTIAN SCIENCE COMM ON PUBLICATION FOR KS	TOPEKA
Chris BERS BAZE	KDHE	Topeka
David E. Tiel	Femec	Jalla
Margaret Lindeman	Boehringer Ingelheim	Columbia, Mo.
Louise Fene	Playo	Blue Springs, MO
Bob Williams	Ks Pharmacists Assoc	Topeka
ALAN COBB	WICHITA HOSPITALS	WICHITA
LINDA MCGILL	PETE MCGILL'S ASSOC. TOPEKA	TOPEKA
Lee Miller	Reliance Assoc	Topeka
Emily Mankin	IGMS	Topeka
David Hanzlick	KS Dental Assn	Topeka
Kenia Brandenberg	PCU	KC
Frank Koe	KHTE	Topeka
Tom Bell	KHA	Topeka

SENATE BILL No. 410

By Committee on Ways and Means

3-4

9 AN ACT concerning drug utilization review; creating a medicaid
10 drug utilization review board; providing for membership, appoint-
11 ment, powers and duties thereof; concerning the confidentiality
12 of certain information; amending K.S.A. 1992 Supp. 39-7,118 and
13 75-4319 and repealing the existing ~~section~~ sections.

14
15 *Be it enacted by the Legislature of the State of Kansas:*

16 Section 1. K.S.A. 1992 Supp. 39-7,118 is hereby amended to
17 read as follows: 39-7,118. ~~(a)~~ The ~~department~~ secretary of social
18 and rehabilitation services shall implement a drug utilization review
19 program with the assistance of a ~~committee of qualified health~~
20 ~~care providers~~ medicaid drug utilization review board as provided
21 in section 2 and amendments thereto to assure the appropriate util-
22 ization of drugs by patients receiving medical assistance under the
23 medicaid program. The drug utilization review program shall include:

24 ~~(1)~~ (a) Monitoring of prescription information including overu-
25 tilization and underutilization of prescription-only drugs;

26 ~~(2)~~ (b) making periodic reports of findings and recommendations
27 to the ~~department~~ secretary of social and rehabilitation services
28 and the United States department of health and human services
29 regarding the activities of the board, drug utilization review pro-
30 grams, summary of interventions, assessments of education inter-
31 ventions and drug utilization review cost estimates;

32 ~~(3)~~ (c) providing advice and recommendations to the de-
33 partment regarding deletions from the formulary and any other
34 matters relating to use or control of prescription-only drugs
35 providing for prospective and retrospective drug utilization review,
36 as specified in the federal omnibus budget reconciliation act of 1990
37 (public law 101-508);

38 ~~(4)~~ (d) monitoring provider and recipient compliance with pro-
39 gram objectives; and

40 ~~(5)~~ (e) providing educational information on state program ob-
41 jectives, directly or by contract, to private and public sector health
42 care providers to improve prescribing and dispensing practices;

43 ~~(6)~~ (f) Review reviewing the increasing costs of purchasing pre-

[Material within brackets would be Deleted]

PHK
3-22-94
Attm #1

PH + W
3-22-94
Altman # 1-2
pg 2 of 4

1 prescription drugs and make making recommendations on cost con-
2 tainment; and

3 (g) recommending any modifications or changes to the medicaid
4 prescription drug program.

5 (e) In addition, the department shall supervise and partici-
6 pate in a privately funded study on the costs and effects of
7 the open medicaid drug formulary as prescribed by K.S.A. 39-
8 7,117 to be completed on or before October 1, 1991.

9 New Sec. 2. (a) There is hereby created the medicaid drug util-
10 ization review board which shall be responsible for the implemen-
11 tation of retrospective and prospective drug utilization programs
12 under the Kansas medicaid program.

13 (b) The board shall consist of seven members appointed as fol-
14 lows:

15 (1) Two licensed physicians actively engaged in the practice of
16 medicine, nominated by the Kansas medical society and appointed
17 by the secretary of social and rehabilitation services from a list of
18 four nominees;

19 (2) one licensed physician actively engaged in the practice of
20 osteopathic medicine, nominated by the Kansas association of os-
21 teopathic medicine and appointed by the secretary of social and
22 rehabilitation services from a list of four nominees;

23 (3) two licensed pharmacists actively engaged in the practice of
24 pharmacy, nominated by the Kansas pharmacy association and ap-
25 pointed by the secretary of social and rehabilitation services from a
26 list of four nominees;

27 (4) one person licensed as a pharmacist and actively engaged in
28 academic pharmacy, appointed by the secretary of social and reha-
29 bilitation services from a list of two nominees provided by the uni-
30 versity of Kansas; and

31 (5) one person representing medicaid consumers appointed by
32 the governor.

33 (c) The physician and pharmacist members shall have expertise
34 in the clinically appropriate prescribing and dispensing of outpatient
35 drugs.

36 (d) The appointments to the board shall be for three years, except
37 that for the initial appointments to the board one physician and one
38 pharmacist, as designated by the secretary of social and rehabilitation
39 services, and the consumer representative shall be appointed for two
40 years. Thereafter, all appointments shall be for three years. In mak-
41 ing the appointments, the secretary of social and rehabilitation serv-
42 ices shall provide for geographic balance in the representation on

at least

four

licensed professional nurse actively engaged in
long-term care nursing, nominated by the Kansas
state nurses association and appointed by the
secretary of social and rehabilitation services
from a list of four nominees

(c) The secretary of social and
rehabilitation services may add two additional
members so long as no class of professional
representatives exceeds 51% of the membership.

(d)

(e)

~~(f)~~ The board shall elect a chairperson from among board members who shall serve a one-year term. The chairperson may serve consecutive terms.

(f)

~~(g)~~ The board shall not be subject to K.S.A. 75-4317 *et seq.* and amendments thereto in accordance with K.S.A. 75-4319 and amendments thereto may recess for a closed or executive meeting when it is considering matters relating to identifiable patients or providers.

(g)

Sec. 3. K.S.A. 1992 Supp. 75-4319 is hereby amended to read as follows: 75-4319. (a) Upon formal motion made, seconded and carried, all bodies and agencies subject to this act may recess, but not adjourn, open meetings for closed or executive meetings. Any motion to recess for a closed or executive meeting shall include a statement of (1) the justification for closing the meeting, (2) the subjects to be discussed during the closed or executive meeting and (3) the time and place at which the open meeting shall resume. Such motion, including the required statement, shall be recorded in the minutes of the meeting and shall be maintained as a part of the permanent records of the body or agency. Discussion during the closed or executive meeting shall be limited to those subjects stated in the motion.

(b) No subjects shall be discussed at any closed or executive meeting, except the following:

- (1) Personnel matters of nonselected personnel;
- (2) consultation with an attorney for the body or agency which would be deemed privileged in the attorney-client relationship;
- (3) matters relating to employer-employee negotiations whether or not in consultation with the representative or representatives of the body or agency;
- (4) confidential data relating to financial affairs or trade secrets of corporations, partnerships, trusts, and individual proprietorships;
- (5) matters relating to actions adversely or favorably affecting a person as a student, patient or resident of a public institution, except that any such person shall have the right to a public hearing if requested by the person;
- (6) preliminary discussions relating to the acquisition of real property;
- (7) matters permitted to be discussed in a closed or executive meeting pursuant to K.S.A. 74-8804 and amendments thereto; and
- (8) matters permitted to be discussed in a closed or executive meeting pursuant to subsection (f) (a)(2)(i) of K.S.A. 38-1507 and amendments thereto or subsection (f) of K.S.A. 38-1508 and amend-

Revisor's Note: This section was amended in 1993.

This section needs to be replaced by the current law section and the current law section amended with the new language proposed in this bill.

PH+W
3-22-94
Acton #1-3
pg 2 of 4

(9) *matters permitted to be discussed in a closed or executive meeting pursuant to subsection (f) of section 2 and amendments thereto.*

(c) *No binding action shall be taken during closed or executive recesses, and such recesses shall not be used as a subterfuge to defeat the purposes of this act.*

Sec. ~~4~~ K.S.A. 1992 Supp. 39-7,118 is and 75-4319 are hereby repealed.

Sec. ~~4~~ This act shall take effect and be in force from and after its publication in the statute book.

The department of social and rehabilitation services shall not restrict patient access to prescription-only drugs pursuant to a program of prior authorization or a restrictive formulary except by rules and regulations adopted in accordance with K.S.A. 77-415 et seq. Prior to the promulgation of any such rules and regulations, the department shall submit such proposed rules and regulations to the medicaid drug utilization review board for written comment.

PHG:W
3-22-94
Section # 1-4
pg 4 of 4

5.

6.

SENATE BILL No. 451

By Joint Committee on Children and Families

1-10

[Material within brackets would be deleted]

615 - 7000
H. Sub for 451
PH & W
3-22-94
ATTN #2

AN ACT concerning children; establishing state child care policy; relating to licensure of maternity centers and licensure and registration of providers of care for children; amending K.S.A. 39-923, 65-501, 65-502, 65-503, 65-504, 65-505, 65-506, 65-507, 65-508, 65-510, 65-511, 65-512, 65-513, 65-516, 65-517, 65-518, 65-519, 65-521, 65-523, 65-524 and 65-526 and K.S.A. 1993 Supp. 59-2123, 75-6506 and 75-6508 and repealing the existing sections:

and repealing K.S.A. 65-511

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

New Section 1. (a) The desired outcome of the child care policy of the state of Kansas is that families be able to fulfill their roles as primary child care givers and educators of young children by having access to high quality, affordable child care. The following principles shall guide development and implementation of state policy to achieve that outcome:

(1) Family self-sufficiency. A stable source of child care is a critical ingredient to economic self-sufficiency. Child care policies and programs must facilitate a smooth transition into the work force for parents and a rich and stable environment for children.

(2) Investment in children. Child care is a critical investment that affects a child's readiness to learn. High quality child care programs recognize and implement good early childhood practices.

(3) Consumer orientation and education. Child care policies and programs must be responsive to the changing needs of families and educate families about available options, identifying quality programs and selecting appropriate care.

(4) Accessibility. High quality child care must be available to any family seeking care regardless of where the family lives or the special needs of the child. A centralized place in local communities must be available to facilitate parents' access to child care.

(5) Affordability. High quality child care must be available on a sliding scale basis, with families contributing based on ability to pay.

(6) Diversity. It is the goal of the state to strive wherever possible to provide child care in an integrated setting where children with various needs and of various income levels and cultures are cared for together.

PHW
3-22-94
Action #2-2
pg 2 of 20

(7) Efficient, coordinated administration and support for infrastructure. Child care programs must be coordinated to ensure the most effective use of federal, state, local and private funds. State child care agencies and policies must support the orderly development of a high quality child care system working with local and private providers.

(b) Any state agency involved in implementing any part of the state's child care policy shall develop appropriate measures of progress toward achievement of the stated outcome under the oversight of the joint committee on children and families in accordance with K.S.A. 46-2001 et seq. and amendments thereto.

Sec. 2. K.S.A. 39-923 is hereby amended to read as follows: 39-923. (a) As used in this act:

(1) "Adult care home" means any nursing facility, intermediate personal care home, one-to-five-bed adult care home and any boarding care home, all of which classifications of adult care homes are required to be licensed by the secretary of health and environment. Adult care home does not mean adult family home.

(2) "Nursing facility" means any place or facility operating for not less than 24 hours in any week and caring for six or more individuals not related within the third degree of relationship to the administrator or owner by blood or marriage and who by reason of aging, illness, disease or physical or mental infirmity are unable to sufficiently or properly care for themselves, and for whom reception, accommodation, board and skilled nursing care and treatment is provided, and which place or facility is staffed to provide 24 hours a day licensed nursing personnel plus additional staff, and is maintained and equipped primarily for the accommodation of individuals who are not acutely ill and are not in need of hospital care but who require skilled nursing care.

(3) "Intermediate personal care home" means any place or facility operating for not less than 24 hours in any week and caring for six or more individuals not related within the third degree of relationship to the administrator or owner by blood or marriage and who by reason of aging, illness, disease or physical or mental infirmity are unable to sufficiently or properly care for themselves and for whom reception, accommodation, board, personal care and treatment or simple nursing care is provided, and which place or facility is staffed, maintained and equipped primarily for the accommodation of individuals not acutely ill or in need of hospital care, nursing facility care or moderate nursing care but who require domiciliary care and simple nursing care.

(4) "One-to-five-bed adult care home" means any place or facility

Section amended by 1994 legislature--
Insert new section and amend as amended
here--p. 4, lines 29 through 32

1 which place or facility may be a private residence and which place
2 or facility is operating for not less than 24 hours in any week and
3 caring for not more than five individuals not related within the third
4 degree of relationship to the administrator or owner by blood or
5 marriage and who by reason of aging, illness, disease or physical or
6 mental infirmity are unable to sufficiently or properly care for them-
7 selves and for whom reception, accommodation, board, personal care
8 and treatment and skilled nursing care, supervised nursing care or
9 simple nursing care is provided by the adult care home, and which
10 place or facility is staffed, maintained and equipped primarily for
11 the accommodation of individuals not acutely ill or in need of hospital
12 care but who require domiciliary care and skilled nursing care, su-
13 pervised nursing care or simple nursing care provided by the adult
14 care home. When the home's capabilities are questioned in writing,
15 the licensing agency shall determine according to its rules and reg-
16 ulations if any restriction will be placed on the care the home will
17 give residents.

18 (5) "Boarding care home" means any place or facility operating
19 for not less than 24 hours in any week and caring for three or more
20 individuals not related within the third degree of relationship to the
21 administrator or owner by blood or marriage and who by reason of
22 aging, illness, disease or physical or mental infirmity are unable to
23 sufficiently or properly care for themselves and for whom reception,
24 accommodation, board and supervision is provided and which place
25 or facility is staffed, maintained and equipped primarily to provide
26 shelter to residents who require some supervision, but who are
27 ambulatory and essentially capable of managing their own care and
28 affairs.

29 (6) "Place or facility" means a building or any one or more com-
30 plete floors of a building, or any one or more complete wings of a
31 building, or any one or more complete wings and one or more
32 complete floors of a building, and the term "place or facility" may
33 include multiple buildings.

34 (7) "Skilled nursing care" means services commonly performed
35 by or under the immediate supervision of a registered professional
36 nurse and additional licensed nursing personnel for individuals re-
37 quiring 24-hour-a-day care by licensed nursing personnel including:
38 Acts of observation, care and counsel of the ill, injured or infirm;
39 the administration of medications and treatments as prescribed by
40 a licensed physician or dentist; and other nursing functions requiring
41 substantial specialized judgment and skill based on the knowledge
42 and application of scientific principles.

43 (8) "Supervised nursing care" means services commonly per-

PH+V
3-22-94
Altman # 2-3
Pg 3 of 20

formed by or under the immediate supervision of licensed nursing personnel at least eight hours a day for at least five days a week including: Acts of observation, care and counsel of the ill, injured or infirm; the administration of medications and treatments as prescribed by a licensed physician or dentist; and other selected functions requiring specialized judgment and certain skills based on the knowledge of scientific principles.

(9) "Simple nursing care" means selected acts in the care of the ill, injured or infirm requiring certain knowledge and specialized skills but not requiring the substantial specialized skills, judgment and knowledge of licensed nursing personnel.

(10) "Resident" means all individuals kept, cared for, treated, boarded or otherwise accommodated in any adult care home.

(11) "Person" means any individual, firm, partnership, corporation, company, association or joint-stock association, and the legal successor thereof.

(12) "Operate an adult care home" means to own, lease, establish, maintain, conduct the affairs of or manage an adult care home, except that for the purposes of this definition the word "own" and the word "lease" shall not include hospital districts, cities and counties which hold title to an adult care home purchased or constructed through the sale of bonds.

(13) "Licensing agency" means the secretary of health and environment.

(14) "Skilled nursing home" means a nursing facility.

(15) "Intermediate nursing care home" means a nursing facility.

(b) The term "adult care home" shall not include institutions operated by federal or state governments, hospitals or institutions for the treatment and care of psychiatric patients, ~~boarding homes for children under the age of 16 years, day nurseries, child rearing institutions facilities for care of children, maternity homes centers, hotels or offices of physicians.~~

(c) The licensing agency may by rule and regulation change the name of the different classes of homes when necessary to avoid confusion in terminology and the agency may further amend, substitute, change and in a manner consistent with the definitions established in this section, further define and identify the specific acts and services which shall fall within the respective categories of facilities so long as the above categories for adult care homes are used as guidelines to define and identify the specific acts.

Sec. 3. K.S.A. 1993 Supp. 59-2123 is hereby amended to read as follows: 59-2123. (a) Except as otherwise provided in this section:

(1) No person shall advertise that such person will adopt, find

PHW
3-22-94
Attn # 2-4
pg 4 of 20

PH+W
3-22-94
Attn # 2-5
Pg 5 of 20

1 an adoptive home for a child or otherwise place a child for adoption;
2 (2) no person shall offer to adopt, find a home for or otherwise
3 place a child as an inducement to a woman to come to such person's
4 maternity ~~hospital or home center~~ during pregnancy or after de-
5 livery; and

6 (3) no person shall offer to adopt, find a home for or otherwise
7 place a child as an inducement to any parent, guardian or custodian
8 of a child to place such child in such person's home, institution or
9 establishment.

10 (b) The provisions of subsection (a)(1) shall not apply to a licensed
11 child placement agency operating as authorized by Kansas law or to
12 the department of social and rehabilitation services.

13 (c) As used in this section:

14 (1) "Advertise" means to communicate by newspaper, radio, tel-
15 evision, handbills, placards or other print, broadcast or electronic
16 medium.

17 (2) "Person" means an individual, firm, partnership, corporation,
18 joint venture or other association or entity; and.

19 (3) "Maternity ~~hospital or home center~~" means the same as
20 provided in K.S.A. 65-502 and amendments thereto.

21 (d) Any person who violates the provisions of this section shall
22 be guilty of a class C misdemeanor.

23 Sec. 4. K.S.A. 65-501 is hereby amended to read as follows: 65-
24 501. It shall be unlawful for any person, firm, corporation or asso-
25 ciation to conduct or maintain a maternity ~~hospital or home, or a~~
26 ~~boarding, receiving or detention home for center or a facility for~~
27 ~~care of children~~ under 16 years of age without having a license or
28 temporary permit therefor from the secretary of health and envi-
29 ronment. Nothing in this act shall apply to any state institution
30 maintained and operated by the state.

31 Sec. 5. K.S.A. 65-502 is hereby amended to read as follows: 65-
32 502. The term maternity ~~hospital or home~~ as used in this act
33 shall mean a house or other place maintained or conducted by
34 anyone who advertises himself or who holds himself out as
35 having or conducting such a home or place as a maternity
36 hospital or home; or a house or any other place in which any
37 person receives, cares for or treats one or more women during
38 pregnancy; or at or after delivery; except women related to him
39 by blood or marriage: *Provided, however,* That nothing in this
40 act shall apply to a regular hospital other than a maternity
41 hospital; and that nothing herein shall be construed to prevent
42 a nurse from practicing her profession in the care of a patient
43 in the home of a patient. "Maternity center" means a facility which

provides delivery services for normal, uncomplicated pregnancies but does not include a medical care facility as defined by K.S.A. 65-425 and amendments thereto.

Sec. 6. K.S.A. 65-503 is hereby amended to read as follows: 65-503. As used in this act:

(a) "Child placement agency" means a facility for care of children that receives, cares for or finds homes for orphaned or deprived children under 16 years of age.

(b) "Day care referral agency" means a facility for care of children that receives, cares for and finds day care for children under 16 years of age.

(c) "Family care foster home" means a facility for care of children that is a private home in which care is given for 24 hours a day for a small number of children away from their parent or guardian.

(a) "Boarding home for children," as used in this act, (d)

(1) "Facility for care of children" means:

(1) (A) A place facility maintained by a person who has control or custody of one or more children under 16 years of age, unattended by parent or guardian, for the purpose of providing the children with food or lodging, or both, except children related to the person by blood, marriage or legal adoption;

(2) (B) a children's home, orphanage or any day nursery, day care facility or other institution facility of a type determined by the secretary to require regulation under the provisions of this act;

(3) an association, organization or individual (C) [a person engaged in receiving, caring for or finding homes for children under 16 years of age who are orphans, children in need of care, orphaned or deprived children or children who need day care], or a place facility maintained by such association, organization or individual [person] for the purpose of caring for children under 16 years of age; or

(4) (D) any receiving or detention home for children under 16 years of age provided or maintained by, or receiving aid from, any city or county or the state.

(b) "Boarding home for children" (2) "Facility for care of children" shall not include a family day care home defined in K.S.A. 65-517 and amendments thereto.

(e) "Person" means any individual, association, partnership, corporation or other entity.

Sec. 7. K.S.A. 65-504 is hereby amended to read as follows: 65-504. (a) The secretary of health and environment shall have the power to grant a license to a person; firm, corporation or association to maintain a maternity hospital or home, or a boarding

business or service conducted, maintained or operated by a person engaged in finding homes for children by placing or arranging for the placement of such children for adoption or foster care

"Child care resource and referral agency" means a business or service conducted, maintained or operated by a person engaged in providing information and referral services, including information of specific services provided by child care facilities, to assist parents to find child care.

(C)

"Child care facility"

maternity home,

a child placement agency or child care resource and referral agency

agency

child care facility

(d)

government, governmental subdivision

PH-11
3-22-94
Attn # 2-6
Page 20

P 44-00
3-22-94
attm # 2-7
Pg 7 of 20

child care facility

1 ~~home for center or~~ [facility for care of children] under 16 years of
2 age. The license shall state the name of the licensee, describe the
3 particular premises in or at which the business shall be carried on,
4 whether it shall receive and care for women or children, and the
5 number of women or children that may be treated, maintained,
6 boarded or cared for at any one time. No greater number of women
7 or children than is authorized in the license shall be kept on those
8 premises and the business shall not be carried on in a building or
9 place not designated in the license. The license shall be kept posted
10 in a conspicuous place ~~in the hospital or house in which on the~~
11 ~~premises where~~ the business is conducted. The secretary of health
12 and environment shall grant no license in any case until careful
13 inspection of the maternity ~~hospital or home, or home for center~~
14 ~~or~~ [facility for care of children] shall have been made according to
15 the terms of this act and until such maternity ~~hospital or home,~~
16 ~~or home for center or~~ [facility for care of children] has complied
17 with all the requirements of this act. No license shall be granted
18 without the approval of the secretary of social and rehabilitation
19 services, except that the secretary of health and environment may
20 issue, without the approval of the secretary of social and rehabilitation
21 services, a temporary permit to operate for a period not to exceed
22 90 days upon receipt of an initial application for license.

23 (b) (1) In all cases where the secretary of social and rehabilitation
24 services deems it necessary, an investigation of the ~~home maternity~~
25 ~~center or~~ [facility for care of children] shall be made under the
26 supervision of the secretary of social and rehabilitation services or
27 other designated qualified agents. For that purpose and for any
28 subsequent investigations they shall have the right of entry and access
29 to the premises of the ~~home center or facility~~ and to any information
30 deemed necessary to the completion of the investigation. In all cases
31 where an investigation is made, a report of the investigation of such
32 ~~home center or facility~~ shall be filed with the secretary of health
33 and environment.

34 (2) In cases where neither approval or disapproval can be given
35 within a period of 30 days following formal request for such a study,
36 the secretary of health and environment may issue a temporary
37 license without fee pending final approval or disapproval of the ~~home~~
38 ~~center or facility~~.

39 (c) Whenever the secretary of health and environment refuses to
40 grant a license to an applicant, the secretary shall issue an order to
41 that effect stating the reasons for such denial and within five days
42 after the issuance of such order shall notify the applicant of the
43 refusal. Upon application not more than 15 days after the date of

PHW
3-22-94
Attn # 2-8
pg 2 of 20

its issuance a hearing on the order shall be held in accordance with the provisions of the Kansas administrative procedure act.

(d) When the secretary of health and environment finds upon investigation or is advised by the secretary of social and rehabilitation services that any of the provisions of this act or the provisions of K.S.A. 59-2123 and amendments thereto are being violated, or ~~such maternity hospital or home, or home for that the maternity center~~ or ~~facility for care of children~~ is maintained without due regard to the health, comfort or ~~morality~~ *welfare* of the residents, the secretary of health and environment, after giving notice and conducting a hearing in accordance with the provisions of the Kansas administrative procedure act, shall issue an order revoking such license and ~~such~~. The order shall clearly state the reason for ~~such~~ the revocation.

(e) If the secretary revokes or refuses to renew a license, the licensee who had a license revoked or not renewed shall not be eligible to apply for a license or for a certificate of registration to maintain a family day care home under K.S.A. 65-518 and amendments thereto for a period of one year subsequent to the date such revocation or refusal to renew becomes final.

(f) Any applicant or licensee aggrieved by a final order of the secretary of health and environment denying or revoking a license under this act may appeal the order in accordance with the act for judicial review and civil enforcement of agency actions.

Sec. 8. K.S.A. 65-505 is hereby amended to read as follows: 65-505. (a) ~~Except as otherwise provided in this section, an~~ The annual fee for a license to conduct a maternity ~~hospital or home,~~ or ~~home for children center or~~ ~~facility for care of children~~ shall be fixed by the secretary of health and environment by rules and regulations. ~~Such fee shall not exceed \$15 except that for a hospital or home which is licensed to care for 13 or more residents such fee shall not exceed \$75. Such in an amount not exceeding the following:~~

- (1) For a maternity center, \$75;
- (2) for a child placement agency, \$75;
- (3) for a ~~day care~~ referral agency, \$75;
- (4) ~~for a family care foster home, \$5; and~~
- (5) ~~for any other~~ ~~facility for care of children~~, \$35 plus \$1 times the maximum number of children authorized under the license to be on the premises at any one time.

The license fee shall be paid to the secretary of health and environment when the license is applied for and annually thereafter. The fee shall not be refundable. No fee shall be charged for a

child care facility

child care resource and

and

child care facility

1 license to conduct a home for children which is a family foster
2 home as defined in K.A.R. 28-4-311 and amendments thereto.

3 (b) Any person who fails to renew the person's license within
4 the time required by rules and regulations of the secretary shall pay
5 to the secretary a late renewal fee of \$10.

6 (c) Any licensee applying for an amended license shall pay to
7 the secretary of health and environment a fee established by rules
8 and regulations of the secretary in an amount not exceeding \$35.

9 (b) (d) The secretary of health and environment shall remit all
10 moneys received by the secretary from fees under the provisions of
11 this section to the state treasurer at least monthly. Upon receipt of
12 any such the remittance, the state treasurer shall deposit the entire
13 amount thereof in the state treasury; and such amount shall be
14 credited and credit it to the state general fund.

15 Sec. 9. K.S.A. 65-506 is hereby amended to read as follows: 65-
16 506. The secretary of health and environment shall serve [written]
17 notice of the issuance [or revocation of a license to conduct a ma-
18 ternity center or [facility for care of children] to the secretary of social
19 and rehabilitation services [and] to the county, city-county and or
20 multi-county department of health in every city and county in
21 which a maternity hospital or home, or home for children is
22 located; of the issuance of a license to conduct such hospital
23 or home; or the revocation of such license [serving the area where
24 the center or facility is located]. Neither the secretary of social and
25 rehabilitation services nor any other person shall place or cause to
26 be placed any maternity patient or child under 16 years of age in
27 any maternity hospital or home; or home for center or [facility for
28 care of children] not licensed by the secretary of health and envi-
29 ronment.

30 Sec. 10. K.S.A. 65-507 is hereby amended to read as follows:
31 65-507. The licensee of a maternity hospital or home [Each ma-
32 ternity center licensee shall keep a record upon forms prescribed
33 and provided by the secretary of health and environment and the
34 secretary of social and rehabilitation services; wherein shall be
35 entered the true which shall include the name of every patient,
36 together with her the patient's place of residence during the year
37 preceding admission to the hospital or home; center and the name
38 and address of the physician or midwife who attends each birth
39 taking place in such hospital or home; and the licensee of a
40 home for children the center]. Each [facility for care of children]
41 licensee shall keep a record upon forms prescribed and provided by
42 the secretary of health and environment; wherein shall be entered
43 which shall include the name and age of each child received and

No fee shall be charged for a license to conduct a home for children which is a family foster home as defined by K.A.R. 28-4-311.

[, suspension

[child care facility or the issuance, suspension or revocation of a certificate of registration for a family day care home

[and to any child care resource and referral agency

[or child care facility

[or family day care home not holding a certificate of registration from the secretary of health and environment

[(a)

[attending

[child care facility

PH+10
3-22-94
Attn #2-9
pg 9 of 20

1 cared for in ~~such home~~ *the facility*; the name of the physician who
 2 attended any sick children ~~therein~~ *in the facility*, together with the
 3 names and addresses of the parents or guardians of such children;
 4 and such other information as the secretary of health and environ-
 5 ment or secretary of social and rehabilitation services may require.
 6 The licensee of a maternity hospital or home, or home for
 7 children *Each maternity center licensee and each [facility for care*
 8 *of children]* licensee shall apply to and shall receive ~~gratuitously~~
 9 *without charge* from the secretary of health and environment and
 10 the secretary of social and rehabilitation services forms for such
 11 records as may be required, which forms shall contain a copy of this
 12 act.

[child care facility

13 Sec. 11. K.S.A. 65-508 is hereby amended to read as follows:
 14 65-508. (a) Any maternity hospital, or home for children coming
 15 under center or *[facility for care of children]* ~~subject to the provisions~~
 16 of this act shall: (1) Be properly heated, plumbed, lighted and ven-
 17 tilated and shall be conducted in every department; (2) have
 18 plumbing, water and sewerage systems which conform to all appli-
 19 cable state and local laws; and (3) be operated with strict regard to
 20 the health, comfort, safety and social welfare of the residents. In
 21 all cities, towns and villages where there is a system of wa-
 22 terworks and sewerage maintained for public use, every ma-
 23 ternity hospital or home, or home for children shall be
 24 equipped with suitable toilets, lavatories, bathtubs, sinks and
 25 drains; shall be connected by proper plumbing with such water
 26 and sewerage systems and shall be kept at all times in a clean
 27 and sanitary condition. In all cities, towns or villages not having
 28 a system of waterworks or sewerage for public use, every ma-
 29 ternity hospital or home, or home for children shall have prop-
 30 erly constructed privies or overvaults to receive night soil; the
 31 same to be ventilated, screened, disinfected, kept free from
 32 foul odor, all times in a clean and sanitary condition.

(b) Information obtained under this section shall be confidential and shall not be made public in a manner which would identify individuals.

[child care facility

33 (b) Every maternity hospital or home, or home for center or
 34 *[facility for care of children]* shall furnish or cause to be furnished
 35 for the use of each resident and employee individual towel, wash
 36 cloth, comb and individual drinking cup or sanitary bubbling foun-
 37 tain, and toothbrushes for all other than infants, and shall keep or
 38 require such articles to be kept at all times in a clean and sanitary
 39 condition. Every maternity hospital or home, or home for center
 40 or *[facility for care of children]* shall be provided with one fire ex-
 41 tinguisher of a style and size approved by the state fire marshal;
 42 and every maternity hospital or home, or home for center or
 43 *facilitu for care of children* which is more than one story high and

PH + W
3-22-94
attm # 2-10
pg 10 of 20

PH+LW
3-22-94
atm # 2-11
pg 11 of 20

[Containing and offering accommodations for, at any one time, 10 or more maternity patients, or 10 or more children, shall be provided with a suitable fire escape constructed of iron or steel, approved by the state fire marshal]

child care facility shall comply with all applicable fire codes and rules and regulations of the state fire marshal

(c) The secretary of health and environment with the cooperation of the secretary of social and rehabilitation services shall develop and adopt rules and regulations for the operation and maintenance of maternity hospitals or homes, or homes for centers and facilities for care of children and for the granting, suspending or revoking of licenses. The rules and regulations for operating and maintaining maternity hospitals or homes, or homes for centers and facilities for care of children shall be designed to promote the health, safety and welfare of the residents who are to be served in such facilities by assuring ensuring safe and adequate physical surroundings, healthful food, supervision and care of the residents by capable, qualified persons of sufficient number, an adequate program of activities and services and such appropriate parental participation as may be feasible under the circumstances. [The rules and regulations with respect to granting, suspending and revoking licenses shall be designed to promote the proper and efficient processing of matters relating to licensure to assure applicants and licensees fair and expeditious treatment under the law.]

child care facilities

(d) On and after January 1, 1993, Each child cared for in a boarding home for facility for care of children, including children of the person maintaining the home facility, shall be required to have current such immunizations as the secretary of health and environment considers necessary. The person maintaining a boarding home for facility for care of children shall maintain a record of each child's immunizations and shall provide to the secretary of health and environment such information relating thereto, in accordance with rules and regulations of the secretary.

(e) The immunization requirement of subsection (d) shall not apply if one of the following is obtained:

(1) Certification from a licensed physician stating that the physical condition of the child is such that immunization would endanger the child's life or health; or

(2) a written statement signed by a parent or guardian that the parent or guardian is an adherent of a religious denomination whose teachings are opposed to immunizations.

Sec. 12. K.S.A. 65-510 is hereby amended to read as follows: 65-510. It shall be unlawful for any home for facility for care of children to receive or care for any adult except as authorized by rules and regulations adopted by the secretary of health and envi-

Subcommittee recommends this language conform with S.B. 575.

PH+U
3-22-94
altm #2-12
pg 12 of 20

1 ronment.

2 [Sec. 13. K.S.A. 65-511 is hereby amended to read as follows:
3 65-511. No person conducting a maternity ~~hospital or home center~~
4 shall receive or care for infants over three years of age.]

And by renumbering sections accordingly

5 Sec. 14. K.S.A. 65-512 is hereby amended to read as follows:
6 65-512. It is hereby made the duty of the ~~Division of health of the~~
7 ~~department of health and environment~~ to inspect or cause to be
8 inspected at least once every 12 months every maternity ~~hospital~~
9 ~~or home, or home for center or~~ facility for care of children, and
10 for that purpose it shall have the right of entry and access thereto
11 in every department and to every place in the premises, shall call
12 for and examine the records which are required to be kept by the
13 provisions of this act and shall make and preserve a record of every
14 inspection. The licensee shall give all reasonable information to the
15 authorized agent of the secretary of health and environment and
16 shall afford every reasonable facility for viewing the premises and
17 seeing the patients or ~~residents children~~ therein. No ~~such~~ patient
18 or ~~resident child~~ without the consent of the patient or ~~resident~~
19 ~~child~~ shall be required to be interviewed by any agent unless the
20 agent is an authorized person or a licensed physician.

secretary

child care facility

21 Sec. 15. K.S.A. 65-513 is hereby amended to read as follows:
22 65-513. Whenever an authorized agent of the secretary of health and
23 environment or secretary of social and rehabilitation services finds
24 a maternity ~~hospital or home, or home for center or~~ facility for
25 care of children is not being conducted according to law, it shall be
26 the duty of such agent to notify the licensee in writing of such
27 changes or alterations as the agent ~~shall deem~~ determines necessary
28 in order to comply with the requirements of the law, and the agent
29 shall file a copy of such notice with the secretary of health and
30 environment. It shall thereupon be the duty of the licensee to make
31 such changes or alterations as are contained in the written notice
32 within five days from the receipt of such notice. Notice shall be
33 given in accordance with the provisions of the Kansas administrative
34 procedure act.

35 Sec. 16. K.S.A. 65-516 is hereby amended to read as follows:
36 65-516. (a) No person shall knowingly maintain a ~~boarding home~~
37 ~~for~~ facility for care of children or maintain a family day care home
38 if, in ~~such boarding home the~~ facility for care of children or family
39 day care home, there resides, works or regularly volunteers any
40 person who:

41 (1) (A) Has a felony conviction for a crime against persons, (B)
42 has a felony conviction under the uniform controlled substances act,
43 (C) has a conviction of any act which is described in articles 34, 35

or 36 of chapter 21 of the Kansas Statutes Annotated and acts amendatory thereof or supplemental thereto or a conviction of an attempt under K.S.A. 21-3301 and amendments thereto to commit any such act, or (D) has been convicted of any act which is described in K.S.A. 21-4301 or 21-4301a and amendments thereto or similar statutes of other states or the federal government;

(2) has been adjudicated a juvenile offender because of having committed an act which if done by an adult would constitute the commission of a felony and which is a crime against persons, is any act described in articles 34, 35 or 36 of chapter 21 of the Kansas Statutes Annotated and acts amendatory thereof or supplemental thereto, or is any act described in K.S.A. 21-4301 or 21-4301a and amendments thereto or similar statutes of other states or the federal government;

(3) has committed an act of physical, mental or emotional abuse or neglect or sexual abuse as validated by the department of social and rehabilitation services pursuant to K.S.A. 38-1523 and amendments thereto and (A) the person has failed to successfully complete a corrective action plan which had been deemed appropriate and approved by the department of social and rehabilitation services, or (B) the record has not been expunged pursuant to rules and regulations adopted by the secretary of social and rehabilitation services;

(4) has had a child declared in a court order in this or any other state to be deprived or a child in need of care based on an allegation of physical, mental or emotional abuse or neglect or sexual abuse;

(5) has had parental rights terminated pursuant to the Kansas juvenile code or K.S.A. 38-1581 to 38-1584, inclusive through 38-1584, and amendments thereto, or a similar statute of other states;

(6) has signed a diversion agreement pursuant to K.S.A. 22-2906 et seq., and amendments thereto, or pursuant to K.S.A. 38-1635 and amendments thereto involving a charge of child abuse or a sexual offense; or

(7) has an infectious or contagious disease.

(b) No person shall maintain a ~~boarding home for~~ facility for care of children or maintain a family day care home if such person has been found to be a disabled person in need of a guardian or conservator, or both.

(c) Any person who resides in ~~the a~~ a facility for care of children or family day care home and who has been found to be a disabled person in need of a guardian or conservator, or both, shall be counted in the total number of children allowed in care.

(d) In accordance with the provisions of this subsection (d), the secretary shall have access to any court orders or adjudications of

child care facility

PH-10
3-22-94
attm. # 2-13
pg. 13 of 20

any court of record, any records of such orders or adjudications, criminal history record information in the possession of the Kansas bureau of investigation and any report of investigations as authorized by subsection (e) of K.S.A. 38-1523 and amendments thereto in the possession of the department of social and rehabilitation services or court of this state concerning persons working, regularly volunteering or residing in a boarding home for *facility for care of children* or a family day care home. The secretary shall have access to these records for the purpose of determining whether or not the home meets the requirements of K.S.A. 65-516 and 65-519 and amendments thereto.

(e) No boarding home for *facility for care of children* or family day care home or their, or *its* employees, shall be liable for civil damages to any person refused employment or discharged from employment by reason of such *facility's or home's* compliance with the provisions of this section if such home acts in good faith to comply with this section.

(f) For the purpose of subsection (a)(3), an act of abuse or neglect shall not be considered to have been validated by the department of social and rehabilitation services unless the alleged perpetrator has: (1) Had an opportunity to be interviewed and present information during the investigation of the alleged act of abuse or neglect; and (2) been given notice of the agency decision and an opportunity to appeal such decision to the secretary and to the courts pursuant to the act for judicial review and civil enforcement of agency actions.

Sec. 17. K.S.A. 65-517 is hereby amended to read as follows: 65-517. (a) "Family day care home" means a place maintained for the purpose of providing children with food or lodging, or both, away from such children's home or homes, for less than ~~twenty-four~~ 24 hours a day, if:

(1) Not more than ~~six~~ *four* of the children cared for at such place are less than ~~sixteen~~ 16 years of age; and

(2) not more than three of the children cared for at such place are less than ~~eighteen~~ 18 months of age.

(b) Any ~~children~~ child of a person maintaining a place referred to in subsection (a) shall count toward the limitations of subsection (a) if such ~~children~~ are child is less than 12 years of age and is cared for at such place.

(c) A person shall not be considered to be maintaining a family day care home as defined in subsection (a); if only children who are related by blood, marriage or legal adoption to such person are cared for.

Sec. 18. K.S.A. 65-518 is hereby amended to read as follows:

child care facility

the

thereof

six

PH + W
3-22-94
ATTN # 2-14
pg 14 of 20

9/14/94
 22-94
 2-15
 2-15
 2-15

65-518. Any person maintaining a family day care home shall register such home with the secretary of health and environment on forms furnished by the secretary. In lieu of registration, a person maintaining a family day care home may seek licensure for such home as a boarding home for facility for care of children under article 5 of chapter 65 of Kansas Statutes Annotated and amendments to the provisions thereof and supplemental thereto.

child care facility

Sec. 19. K.S.A. 65-519 is hereby amended to read as follows:

65-519. (a) The secretary shall issue a certificate of registration to any person who: (1) Applies for registration on forms furnished by the secretary; ~~who~~; (2) attests to the safety of the family day care home for the care of children; ~~who~~; (3) submits a fee of \$5/~~\$15~~ payable to the secretary of health and environment; ~~and who~~; and (4) certifies that no person described in ~~paragraphs subsection (a)(1), (2), (3), (4), (5) or (6) of subsection (a)~~ of K.S.A. 65-516 and amendments thereto resides, works or volunteers in the family day care home.

not to exceed

as established by rules and regulations of the secretary of health and environment

(b) The secretary shall furnish each applicant for registration a family day care home safety evaluation form to be completed by the applicant and submitted with the registration application.

(c) (1) ~~On and after January 1, 1993,~~ Each child cared for in a family day care home, including children of the person maintaining the home, shall be required to have current such immunizations as the secretary of health and environment considers necessary. The person maintaining a family day care home shall maintain a record of each child's immunizations, and shall provide to the secretary of health and environment such information relating thereto, in accordance with rules and regulations of the secretary.

The fee in effect under this subsection immediately prior to the effective date of this act shall continue in effect on and after the effective date of this act until a different fee is established by the secretary of health and environment by rules and regulations under this subsection.

(2) The immunization requirement of subsection (c)(1) shall not apply if one of the following is obtained:

(A) Certification from a licensed physician stating that the physical condition of the child is such that immunization would endanger the child's life or health; or

(B) a written statement signed by a parent or guardian that the parent or guardian is an adherent of a religious denomination whose teachings are opposed to immunizations.

(d) *The secretary of health and environment shall provide to each person maintaining a registered family day care home a list of the requirements for registration of family day care homes. The person maintaining a family day care home shall provide a copy of such list to the parent or guardian of each child cared for in such home and shall maintain on the premises a copy of the list which has been signed and dated by the parent or guardian.*

(e) The certificate of registration shall be renewed annually in the same manner provided for in this section.

(f) The secretary of health and environment shall remit all moneys received by the secretary from fees under the provisions of this act to the state treasurer at least monthly. Upon receipt of each such remittance, the state treasurer shall deposit the entire amount thereof in the state treasury, and such amount shall be credited and credit it to the state general fund.

Sec. 20. K.S.A. 65-521 is hereby amended to read as follows:

(a) The secretary may deny, revoke or refuse to renew a certificate of registration upon a determination by the secretary that the registrant falsified information on the application or willfully and substantially has violated K.S.A. 65-516 to 65-522, inclusive through 65-522, and amendments thereto. The secretary shall not revoke or refuse to renew any certificate without first giving notice and conducting a hearing in accordance with the provisions of the Kansas administrative procedure act.

(b) If the secretary revokes or refuses to renew a certificate of registration, the registrant who has had a certificate of registration revoked or not renewed shall not be eligible to apply for a certificate of registration or for a license to maintain a boarding home for facility for care of children under K.S.A. 65-504 and amendments thereto for a period of one year subsequent to the date such revocation or refusal to renew becomes final.

Sec. 21. K.S.A. 65-523 is hereby amended to read as follows: 65-523. The secretary may suspend any license, certificate of registration or temporary permit issued under the provisions of K.S.A. 65-501 to 65-522, inclusive through 65-522, and amendments thereto, upon any of the following grounds and in the manner provided in this act:

(a) Violation by the licensee, registrant or holder of a temporary permit of any provision of this act or of the rules and regulations promulgated under this act;

(b) aiding, abetting or permitting the violating of any provision of this act or of the rules and regulations promulgated under this act;

(c) conduct in the operation or maintenance, or both the operation and maintenance, of a boarding home for facility for care of children or family day care home which is inimical to health, morals, welfare or safety of either an individual in or receiving services from the facility or home or the people of this state; and

(d) the conviction of a licensee, registrant or holder of a temporary permit, at any time during the term of the license, certificate

child care facility

PH 4-W
2-22-94
Autism #2-16
pg 16 of 20

1 the time the temporary permit is in effect, of crimes as defined in
2 K.S.A. 65-516 and amendments thereto.

3 Sec. 22. K.S.A. 65-524 is hereby amended to read as follows:
4 65-524. The secretary may suspend any license, certificate of reg-
5 istration or temporary permit issued under the provisions of K.S.A.
6 65-501 to ~~65-522~~, *inclusive through* 65-522, and amendments
7 thereto, prior to any hearing when, in the opinion of the secretary,
8 the action is necessary to protect any child in the ~~boarding home~~
9 ~~for~~ *[facility for care of children]* or family day care home from physical
10 or mental abuse, abandonment or any other substantial threat to
11 health or safety. Administrative proceedings under this section shall
12 be conducted in accordance with the emergency adjudicative pro-
13 ceedings of the Kansas administrative procedure act and in accor-
14 dance with other relevant provisions of the Kansas administrative
15 procedure act.

16 Sec. 23. K.S.A. 65-526 is hereby amended to read as follows:
17 65-526. The secretary of health and environment, in addition to any
18 other penalty prescribed under article 5 of chapter 65 of the Kansas
19 Statutes Annotated, or acts amendatory of the provisions thereof or
20 supplemental thereto, may assess a civil fine, after proper notice and
21 an opportunity to be heard, against a licensee or registrant for a
22 violation of such provisions or rules and regulations adopted pursuant
23 thereto which affect significantly and adversely the health, safety or
24 sanitation of children in a ~~boarding home for~~ *[facility for care of*
25 *children]* or family day care home. A civil fine assessed under this
26 section shall not exceed \$500. All fines assessed and collected under
27 this section shall be remitted promptly to the state treasurer. Upon
28 receipt thereof, the state treasurer shall deposit the entire amount
29 in the state treasury and credit it to the state general fund.

30 Sec. 24. K.S.A. 1993 Supp. 75-6506 is hereby amended to read
31 as follows: 75-6506. (a) The participation of a person qualified to
32 participate in the state health care benefits program shall be vol-
33 untary, and the cost of the state health care benefits program for
34 such person shall be established by the Kansas state employees health
35 care commission.

36 (b) Periodic deductions from state payrolls may be made in ac-
37 cordance with procedures prescribed by the secretary of adminis-
38 tration to cover the costs of the state health care benefits program
39 payable by persons who are on the state payroll when authorized
40 by such persons. Any such periodic payroll deductions in effect on
an implementation date for biweekly payroll periods shall be col-
lected in the manner prescribed by the secretary of administration.

43 (c) In the event that the Kansas state employees health care

child care facility

PH 11/10
3-22-94
attm # 2-17
Pg 17 of 20

PH+W
3-22-94
Attn # 2-18
Pg 18 of 20

1 commission designates by rules and regulations a group of persons
2 on the payroll of a county, township, city, special district or other
3 local governmental entity, public school district, licensed ~~boarding~~
4 ~~home for~~ facility for care of children operated by a not-for-profit
5 corporation providing residential group foster care for children and
6 receiving reimbursement for all or part of such care from the de-
7 partment of social and rehabilitation services, nonprofit community
8 mental health center, as provided in K.S.A. 19-4001 *et seq.* and
9 amendments thereto, nonprofit community facility for the mentally
10 retarded, as provided in K.S.A. 19-4001 *et seq.* and amendments
11 thereto, or nonprofit independent living agency, as defined in K.S.A.
12 65-5101 and amendments thereto, as qualified to participate in the
13 state health care benefits program, periodic deductions from payrolls
14 of the local governmental entity, public school district, licensed
15 ~~boarding home for~~ facility for care of children operated by a not-
16 for-profit corporation providing residential group foster care for chil-
17 dren and receiving reimbursement for all or part of such care from
18 the department of social and rehabilitation services, nonprofit com-
19 munity mental health center, as provided in K.S.A. 19-4001 *et seq.*
20 and amendments thereto, nonprofit community facility for the men-
21 tally retarded, as provided in K.S.A. 19-4001 *et seq.* and amendments
22 thereto, or nonprofit independent living agency, as defined in K.S.A.
23 65-5101 and amendments thereto, may be made to cover the costs
24 of the state health care benefits program payable by such persons
25 when authorized by such persons. All such moneys deducted from
26 payrolls shall be remitted to the Kansas state employees health care
27 commission in accordance with the directions of the commission.

28 Sec. 25. K.S.A. 1993 Supp. 75-6508 is hereby amended to read
29 as follows: 75-6508. (a) (1) Each state agency which has on its payroll
30 persons participating in the state health care benefits program shall
31 pay from any moneys available to the agency for such purpose an
32 amount specified by the Kansas state employees health care com-
33 mission, including any amounts prescribed under a cafeteria plan
34 established under K.S.A. 75-6512 and amendments thereto. All such
35 payments shall continue on the behalf of employees otherwise eligible
36 for participation in the state health care benefits program who are
37 temporarily unable to work because of an injury or illness and who
38 have exhausted their sick and annual leave hours. Such payments
39 will continue for three months following the exhaustion of sick and
40 annual leave. The commission may charge each state agency a uni-
41 form amount per person as the cost to the agency for the state's
42 contribution for persons participating in the state health care benefits
43 program. Such amounts may include the costs of administering the

child care facility

1 program.

2 (2) In the event that the Kansas state employees health care
3 commission designates by rules and regulations a group of persons
4 on the payroll of a county, township, city, special district or other
5 local governmental entity, public school district, licensed ~~boarding~~
6 ~~home for~~ [facility for care of children] operated by a not-for-profit
7 corporation providing residential group foster care for children and
8 receiving reimbursement for all or part of such care from the de-
9 partment of social and rehabilitation services, nonprofit community
10 mental health center, as provided in K.S.A. 19-4001 *et seq.* and
11 amendments thereto, nonprofit community facility for the mentally
12 retarded, as provided in K.S.A. 19-4001 *et seq.* and amendments
13 thereto, or nonprofit independent living agency, as defined in K.S.A.
14 65-5101 and amendments thereto, as qualified to participate in the
15 state health care benefits program, each local governmental entity,
16 public school district, licensed ~~boarding home for~~ [facility for care
17 of children] operated by a not-for-profit corporation providing resi-
18 dential group foster care for children and receiving reimbursement
19 for all or part of such care from the department of social and re-
20 habilitation services, nonprofit community mental health center, as
21 provided in K.S.A. 19-4001 *et seq.* and amendments thereto, non-
22 profit community facility for the mentally retarded, as provided in
23 K.S.A. 19-4001 *et seq.* and amendments thereto, or nonprofit in-
24 dependent living agency, as defined in K.S.A. 65-5101 and amend-
25 ments thereto, which has on its payroll persons participating in the
26 state health care benefits program shall pay from any moneys avail-
27 able to the local governmental entity, public school district, licensed
28 ~~boarding home for~~ [facility for care of children] operated by a not-
29 for-profit corporation providing residential group foster care for chil-
30 dren and receiving reimbursement for all or part of such care from
31 the department of social and rehabilitation services, nonprofit com-
32 munity mental health center, as provided in K.S.A. 19-4001 *et seq.*
33 and amendments thereto, nonprofit community facility for the men-
34 tally retarded, as provided in K.S.A. 19-4001 *et seq.* and amendments
35 thereto, or nonprofit independent living agency, as defined in K.S.A.
36 65-5101 and amendments thereto, for such purpose an amount spec-
37 ified by the commission. The commission may charge each local
38 governmental entity, public school district, licensed ~~boarding home~~
39 ~~for~~ [facility for care of children] operated by a not-for-profit corpo-
40 ration providing residential group foster care for children and re-
ceiving reimbursement for all or part of such care from the de-
partment of social and rehabilitation services, nonprofit community
43 mental health center, as provided in K.S.A. 19-4001 *et seq.* and

child care facility.

PH-402
B-22-94
attm #2-19
pg 19 of 20

amendments thereto, nonprofit community facility for the mentally retarded, as provided in K.S.A. 19-4001 *et seq.* and amendments thereto, or nonprofit independent living agency, as defined in K.S.A. 65-5101 and amendments thereto, a uniform amount per person as the cost to the local governmental entity, public school district, licensed boarding home for ~~facility for care of children~~ operated by a not-for-profit corporation providing residential group foster care for children and receiving reimbursement for all or part of such care from the department of social and rehabilitation services, nonprofit community mental health center, as provided in K.S.A. 19-4001 *et seq.* and amendments thereto, nonprofit community facility for the mentally retarded, as provided in K.S.A. 19-4001 *et seq.* and amendments thereto, or nonprofit independent living agency, as defined in K.S.A. 65-5101 and amendments thereto, for the contribution of the local governmental entity, public school district, licensed boarding home for ~~facility for care of children~~ operated by a not-for-profit corporation providing residential group foster care for children and receiving reimbursement for all or part of such care from the department of social and rehabilitation services, nonprofit community mental health center, as provided in K.S.A. 19-4001 *et seq.* and amendments thereto, nonprofit community facility for the mentally retarded, as provided in K.S.A. 19-4001 *et seq.* and amendments thereto, or nonprofit independent living agency, as defined in K.S.A. 65-5101 and amendments thereto, for persons participating in the state health care benefits program. Such amounts may include the costs of administering the program.

(b) Payments from public funds for coverage under the state health care benefits program for persons participating in that program shall not be deemed a payment or supplement of wages of such person notwithstanding any other provision of law or rules and regulations relating to wages of any such person.

Sec. 26. K.S.A. 39-923, 65-501, 65-502, 65-503, 65-504, 65-505, 65-506, 65-507, 65-508, 65-510, 65-511, 65-512, 65-513, 65-516, 65-517, 65-518, 65-519, 65-521, 65-523, 65-524 and 65-526 and K.S.A. 1993 Supp. 59-2123, 75-6506 and 75-6508 are hereby repealed.

Sec. 27. This act shall take effect and be in force from and after its publication in the statute book.

child care facility

PA+W 94
3-22-20
Cotton #2-20
29820420

SENATE BILL No. 816

By Committee on Federal and State Affairs

2-25

11 AN ACT ~~creating the health care reform legislative oversight com-~~
12 ~~mittee; providing for the powers, duties and functions thereof;~~
13 ~~and repealing K.S.A. 46-1901.~~
14

[Material within brackets would be deleted]
relating to health care for Kansans;

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

16 Section 1. Health care reform for all Kansans is a matter of
17 general public interest. It is ~~therefor~~ [thereof] a matter that should
18 be addressed by those persons elected by the voters to make public
19 policy. The prospect of federal legislation affecting state laws and
20 regulations requires that the state have the legislative and admin-
21 istrative expertise to promptly make the necessary adjustments in
22 both laws and regulations as required by federal law. Further, re-
23 gardless of the federal proposal enacted, each such proposal relies
24 ultimately on the state for implementation in the crucial areas of
25 insurance reform, quality assurance, availability of service and ad-
26 ministrative structure to implement the reform program. The leg-
27 islature must be prepared to respond timely but deliberately to
28 safeguard the public health and welfare of all Kansans.

29 Sec. 2. (a) There is hereby created the health care reform leg-
30 islative oversight committee, hereinafter "committee," to oversee the
31 necessary changes in state laws and regulations made necessary by
32 federal law and, to the fullest extent possible, implement health care
33 reform specific to Kansas needs.

34 (b) The committee shall be composed of [10] members of the
35 legislature appointed as follows: ~~Three members of the house of~~
36 ~~representatives appointed by the speaker of the house of represen-~~
37 ~~tatives; two members of the house of representatives appointed by~~
38 ~~the minority leader of the house of representatives; three members~~
39 ~~of the senate appointed by the president of the senate; and two~~
40 ~~members of the senate appointed by the minority leader of the~~
41 ~~senate. The secretary of health and environment, the secretary of~~
~~social and rehabilitation services, the director of the budget and the~~
~~commissioner of insurance shall be advisors to the committee and~~

12

PHW
3-22-94
Attn #3

1 shall serve as directed by the chairperson, including working with
2 related subcommittees created by the committee.

3 (c) The chairperson shall be elected annually by the committee
4 and alternate between the senate and the house of representatives.
5 The committee shall take action only by majority vote of the entire
6 committee ~~whether or not present and voting~~.

7 (d) The committee shall be designated a standing joint committee
8 of the legislature and shall have such powers and duties as hereinafter
9 provided. Funding of operations of the committee shall be made
10 from moneys appropriated to the legislature and expenditures of the
11 committee shall be approved by the legislative coordinating council.
12 Administrative support for the committee shall be provided by the
13 division of legislative administrative services.

14 (e) The health care reform legislative oversight committee shall
15 meet on call of the chairperson as authorized by the legislative
16 coordinating council. All such meetings shall be held in Topeka
17 unless authorized to be held in a different place by the legislative
18 coordinating council. Members of the committee shall receive com-
19 pensation and travel expenses and subsistence expenses or allowances
20 as provided in K.S.A. 75-3212 and amendments thereto, when at-
21 tending meetings of such committee authorized by the legislative
22 coordinating council.

23 Sec. 3. (a) The health care reform legislative oversight committee
24 shall:

25 (1) Examine changes in federal laws affecting Kansas and propose
26 such changes in Kansas laws and regulations as are necessary to meet
27 the federal requirements.

28 (2) Cooperate and interact with agencies of the federal govern-
29 ment responsible for health care reform.

30 (3) Consider all health care financing and delivery options now
31 in effect taking into account the actions of other states and the federal
32 government.

33 (4) Work cooperatively with all relevant state and federal agen-
34 cies, health care providers, payors and consumer groups in the de-
35 velopment of an integrated health plan for all Kansans.

36 (5) Receive, analyze and make recommendations related to the
37 state health care data base developed by the health care data gov-
38 erning board.

39 (6) Develop plans for health care cost containment.

40 (7) Study and make recommendations for legislative action to
1 integrate health care financing and coverage with other states.

2 (8) Recommend legislative actions necessary to assure accessi-
43 bility of services to residents of underserved areas.

PK4W
3-22-94
Attm #3-2
The senate members shall be the chairperson of
the senate committee on public health and welfare
or a member of such committee designated by the
chairperson and the ranking minority member of
the senate committee on public health and welfare
or a member of such committee designated by the
ranking minority member, the chairperson of the
senate committee on ways and means or a member of
such committee designated by the chairperson and
the ranking minority member of the senate
committee on ways and means or a member of such
committee designated by the ranking minority
member, the chairperson of the senate committee
on financial institutions and insurance or a
member of such committee designated by the
chairperson and the ranking minority member of
the senate committee on financial institutions
and insurance or a member of such committee
designated by the ranking minority member. The
house of representative members shall be the
chairperson of the house committee on
appropriations or a member of such committee
designated by the chairperson and the ranking
minority member of the house committee on
appropriations or a member of such committee
designated by the ranking minority member, the
chairperson of the house committee on public
health and welfare or a member of such committee
designated by the chairperson and the ranking
minority member of the house committee on public
health and welfare or a member of such committee
designated by the ranking minority member, the
chairperson of the house committee on financial
institutions and insurance or a member of such
committee designated by the chairperson and the
ranking minority member of the house committee on
financial institutions and insurance or a member
designated by the ranking minority member.

PH40
3-22-94
attm # 3-3
pg 3 of 4

(9) Provide recommendations if federal or state laws require inclusion of the medical care component of workers compensation and automobile insurance into all inclusive health care coverage.

(10) Make recommendations on tort reform for medical liability and for state antitrust reform and federal antitrust modifications.

(b) The committee may appoint advisory subcommittees as it deems appropriate but shall at least name the following:

(1) Administrative subcommittee. This subcommittee shall be composed of the secretary of health and environment, the secretary of social and rehabilitation services, the secretary of aging and, *the director of the budget*, such other state or local governmental agency officials as are named by the committee *and a minimum of two consumers of health care*.

(2) Insurance subcommittee. This subcommittee shall be composed of the commissioner of insurance, a representative of a domestic insurance carrier, a representative of a foreign insurance company, a representative of the managed care industry, *a minimum of two consumers of health care* and such others as are named by the committee.

(3) Employer subcommittee. This subcommittee shall be composed of a representative of statewide business organization having large and small employer members, a representative of an organization having only small employer members, a representative of organized labor, *a minimum of two consumers of health care* and such other members as are named by the committee.

(4) Provider subcommittee. This subcommittee shall be composed of a representative of a statewide physicians group, a statewide nursing group, a statewide hospital group and, such other provider groups as are named by the committee *and a minimum of two consumers of health care*.

(5) Consumer subcommittee. This subcommittee shall be composed of representatives of consumers of health care in this state as are named by the committee.

(c) All subcommittees shall meet and report at the direction of the committee, but in no event shall the subcommittees report less than quarterly. All meetings shall be subject to the Kansas open meetings act. Members of the advisory subcommittees shall not be paid compensation, subsistence allowances, mileage or other expenses as otherwise may be authorized by law for attending meetings of the advisory subcommittees.

Sec. 4. (a) From moneys appropriated to the legislature, the health care reform legislative oversight committee shall employ an executive secretary who shall be in the unclassified service of the

PH+ell
3-22-94
actm #3-4
pg 4 of 4

1 Kansas civil service act and receive compensation as approved by
2 the legislative coordinating council. The executive secretary shall act
3 as staff to the committee and its subcommittees and shall serve as
4 liaison with the state agencies and the office of the governor.

5 (b) All officers and employees of the state shall provide such
6 information and assistance as may be deemed necessary by the com-
7 mittee. Other staff assistance shall be provided by the office of the
8 revisor of statutes, the legislative research department and such other
9 legislative offices and employees as may be directed by the legislative
10 coordinating council.

11 Sec. 5. The ~~health care reform legislative oversight com-~~
12 ~~mittee department of health and environment~~ is hereby designated
13 the contact ~~committee agency~~ for the state of Kansas with reference
14 to federal health care reform measures. All ~~official acts~~ of the state
15 of Kansas, ~~not otherwise required to be performed by another~~
16 ~~statute, with regard to health care reform, shall be performed~~
17 ~~by the chairperson of the committee or the chairperson's des-~~
18 ~~ignee. The department of health and environment shall not make~~
19 ~~any decision with reference to federal health care reform measures~~
20 ~~not otherwise authorized by the legislature or which would be in-~~
21 ~~consistent with existing law.~~

22 Sec. 6. The committee may introduce legislation. ~~[Legislation in-~~
23 ~~troduced by the committee may be directly referred to the floor of~~
24 ~~the senate by the president of the senate or to the floor of the house~~
25 ~~of representatives by the speaker of the house of representatives.]~~

26 Sec. 7. The provisions of this act shall expire on June 30, 1998.

27 Sec. 8. K.S.A. 46-1901 is hereby repealed.

28 Sec. 9. This act shall take effect and be in force from and after
29 its publication in the Kansas register.

STATE OF KANSAS



DIVISION OF THE BUDGET

Room 152-E
State Capitol Building
Topeka, Kansas 66612-1504
(913) 296-2436
FAX (913) 296-0231

Joan Finney
Governor

Gloria M. Timmer
Director

March 9, 1994

The Honorable Sandy Praeger, Chairperson
Senate Committee on Public Health and Welfare
Statehouse, Room 128-S
Topeka, Kansas 66612

Dear Senator Praeger:

SUBJECT: Fiscal Note for SB 816 by Senate Committee on
Federal and State Affairs

In accordance with KSA 75-3715a, the following fiscal note concerning SB 816 is respectfully submitted to your committee.

SB 816 would create the Health Care Reform Legislative Oversight Committee. The purpose of the Committee would be to oversee changes in state laws and regulations made necessary by changes in federal law. To the fullest extent possible, the Committee would oversee the implementation of health care reform in the state.

The Committee would comprise 10 members of the Legislature, including five members of the Senate and 5 members of the House of Representatives. In each case, three members would represent the majority party and two members the minority party. The Secretary of Health and Environment, the Secretary of Social and Rehabilitation Services, the Director of the Budget and the Commissioner of Insurance would serve as advisors to the Committee. The Committee would be designated a joint standing committee of the Legislature.

Under provisions of the bill, the Committee would evaluate changes in federal law and cooperate with federal agencies as necessary to meet the responsibilities of the state in implementing health care reform. It would work cooperatively with relevant state and federal agencies, health care providers, payors and consumer groups in the development of an integrated health plan for

PNH
3-22-94
Attm #4

all Kansans. It would also make recommendations regarding the state health care database developed by the Health Care Data Governing Board.

The board would also develop plans for health care cost containment and make recommendations for legislative action to integrate health care financing and coverage with other states. Also, it would recommend actions necessary to assure accessibility of services to residents of underserved areas. The Committee would study inclusion of the medical care component of workers compensation and automobile insurance into the overall health care coverage. Tort reform for medical liability would also be studied.

The Committee would appoint subcommittees, including specific administrative, insurance, employer, provider and consumer groups, as well as subcommittees for additional subject areas, as designated by the Committee. Subcommittees would meet quarterly.

The Committee would employ an executive secretary in the unclassified service. This individual would staff the Committee and provide liaison with state agencies and the Governor's Office. State agencies would provide assistance to the Committee as requested. Staff assistance would be provided by the Revisor of Statutes, the Legislative Research Department and other legislative agencies. The Committee would be designated the official contact committee for the state with reference to federal health care reform measures. All official acts of the state with regard to health care reform would be performed by the chairperson of the committee.

Estimated State Fiscal Impact				
	FY 1994 SGF	FY 1994 All Funds	FY 1995 SGF	FY 1995 All Funds
Revenue	--	--	--	--
Expenditure	--	--	\$87,600	\$87,600
FTE Pos.	--	--	--	1.0

The Division of the Budget estimates that passage of the bill would increase state expenditures by \$87,600 in FY 1995. This amount would include \$46,000 for salaries and wages for the executive secretary authorized by the bill's provisions. Also, the estimate would include \$21,600 from the State General Fund for members' salary and subsistence payments. This amount assumes that the full committee would meet 4 times for 2 days at each meeting with average salary and expense reimbursements of \$135 per day.

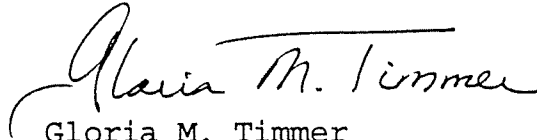
Also, with this estimate, each subcommittee would meet 4 times for 2 days at each meeting. The amount also includes \$20,000 for

PNW
3-22-94
Attn # 4-2
273

The Honorable Sandy Praeger, Chairperson
March 9, 1994
Page 3

other operating expenditures to support the new position created by the bill. This estimate assumes that any needed clerical support would be provided by other agencies, and additional staff would not be required. Any expenditures resulting from the passage of this bill would be in addition to amounts included in the FY 1995 Governor's Budget Report.

Sincerely,



Gloria M. Timmer
Director of the Budget

cc: Laura Epler, Health and Environment

816.fn

PHW
3-22-94
Attn #4-3
Pg 3 of 3

SENATE BILL No. 520

By Committee on Public Health and Welfare

1-18

PHW
3-22-94
Attm #5

8 AN ACT relating to health assessments of school pupils; amending
9 K.S.A. 1993 Supp. 72-5214 and repealing the existing section.

10
11 *Be it enacted by the Legislature of the State of Kansas:*

12 Section 1. K.S.A. 1993 Supp. 72-5214 is hereby amended to read
13 as follows: 72-5214. (a) As used in this section:

14 (1) "School board" means the board of education of a school
15 district and the governing authority of any nonpublic school;

16 (2) "school" means all elementary, ~~junior high, or high~~ schools
17 within the state;

18 (3) "local health department" means any county or joint board
19 of health having jurisdiction over the place where any pupil affected
20 by this section may reside;

21 (4) "secretary" means the secretary of health and environment;

22 (5) "physician" means a person licensed to practice medicine and
23 surgery;

24 (6) "nurse" means a person licensed to practice professional nurs-
25 ing;

26 (7) "health assessment" means a basic screening for hearing,
27 vision, dental, lead, urinalysis, hemoglobin/hematoerit, nutri-
28 tion, developmental, health history and complete physical ex-
29 amination *a health history, physical examination and such screening*
30 *tests as are medically indicated to determine hearing ability, vision*
31 *ability, [dental health], nutrition adequacy and appropriate growth*
32 *and development.*

33 (b) Subject to the provisions of subsection (d) and subsection (g),
34 on and after July 1, 1994, every pupil *up to the age of nine years*
35 *who has not previously enrolled in any school in this state, prior to*
36 *admission to and attendance in school, shall present to the appro-*
37 *prate school board the results of a health assessment, recorded on*
38 *a form provided by the secretary pursuant to subsection (g), which*
39 *assessment shall have been conducted within six 24 months before*
40 *admission of school entry by a nurse or health care provider*
41 *other than a physician approved by the secretary to perform*
42 *health assessments who has completed the department of health*
43 *and environment training and certification* [or] by a physician. In

*license of the
(licensed in health care)*

(8) "clinic" means an indigent health care clinic as defined by K.S.A. 1993 Supp. 75-6102 and amendments thereto.

or by a person acting under the direction of a physician

PHW
3-22-94
Attm #5

Called
3-22-94-2
Attn # 5
Pg 284

1 approving health care providers other than physicians to con-
2 duct health assessments, the secretary shall not approve such
3 providers individually but shall approve such providers by cre-
4 dentialled group. Information contained in the health assessment
5 shall be confidential and shall not be disclosed or made public beyond
6 that necessary under this section except that: (1) Information con-
7 tained in the health assessment may be disclosed to school board
8 personnel but only to the extent necessary to administer this section
9 and protect the health of the pupil; (2) if a medical emergency exists,
10 the information contained in the health assessment may be disclosed
11 to medical personnel to the extent necessary to protect the health
12 of the pupil; (3) if the parent or guardian of a pupil under 18 years
13 of age consents to the disclosure of the information contained in the
14 health assessment or, if the pupil is 18 years of age or older, if the
15 pupil consents to the disclosure of the information; and (4) if no
16 person can be identified in the information to be disclosed and the
17 disclosure is for statistical purposes.

18 (c) As an alternative to the health assessment required under
19 subsection (b), a pupil shall present:

20 (1) A written statement signed by one parent or guardian that
21 the child is an adherent of a religious denomination whose religious
22 teachings are opposed to such assessments; *General philosophy or*
23 *moral reluctance to allow the health assessment will not provide a*
24 *sufficient basis for the exception to the statutory requirement;* or

25 (2) a written statement signed by one parent or guardian that
26 such assessments are in the process of being received and will
27 be scheduled and completed within 90 days after admission to school.

28 (d) Every pupil enrolling or enrolled in any school in this
29 state who is subject to the requirements of subsection (b) and
30 who has not complied with the requirements of subsections (b)
31 or (c), shall present evidence of compliance with either sub-
32 section (b) or (c) to the school board upon admission to school.

33 (e) (d) Prior to the commencement of each school year, the
34 school board of every school affected by this section shall give to
35 all known pupils who are enrolled or who will be enrolling in the
36 school and who are subject to the requirements of subsection (b) or
37 (c)(1) and (2), a copy of this section and any policy regarding the
38 implementation of the provisions of this section adopted by the school
39 board.

40 (f) (e) If a pupil transfers from one school to another, the school
41 board of the school from which the pupil transfers shall forward with
42 the pupil's transcript, upon request of the parent or guardian of the
43 pupil therefor, the certification or statement results of the health

assessment

1 assessment showing evidence of compliance with the requirements
2 of this section to the school board of the school to which the pupil
3 transfers.

4 (g) The local health department, upon application of the
5 school board of any school affected by this section, at federal,
6 state, county, municipal, local health department or school district,
7 or any combination thereof, expense (to the extent that
8 funds are available for this purpose) and without delay, shall
9 provide the health assessments required by this section to such
10 pupils as are not provided with them by their parents or guardians
11 and who have not been exempted under subsection (e).

12 (f) Local health departments may charge a sliding fee for providing
13 such health assessments based on ability to pay except that
14 no pupil eligible to participate in the school lunch program
15 under K.S.A. 72-5112 *et seq.*, and amendments thereto, shall
16 be charged a fee by the local health department for a health
17 assessment required by this section. If no funds are available
18 for the local health department to provide a health assessment
19 to a pupil unable to pay for the health assessment, the local
20 health department shall certify to the school board that insufficient
21 funds are available for the local health department to
22 provide the health assessment for such pupil. Upon receipt of
23 such certification by the local school board, such pupil shall
24 be exempt from the requirements of subsection (b) and no pupil
25 shall be denied the health assessment due to inability to pay. The
26 local health officer shall counsel and advise local school boards concerning
27 the administration of this section. The secretary may
28 adopt rules and regulations to award grants to assist local health
29 departments in providing such health assessments, consistent with
30 state appropriations.

31 (h) (g) The secretary shall prescribe the content of forms
32 and certificates to be used by the school boards in carrying
33 out this section and shall provide, without cost to the school
34 boards, sufficient copies of this section for distribution to pupils.
35 The secretary may adopt such rules and regulations as are
36 necessary to carry out the provisions of this section, but shall not
37 prescribe a form on which the results of health assessments are
38 reported.

39 (i) (h) The school board of every school affected by this section
40 may exclude from school attendance, or by policy adopted by any
41 such school board authorize any certificated employee or committee
42 of certificated employees to exclude from school attendance, any
43 pupil who is subject to and who has not complied with the requirements

[and clinics

[and clinics

PNW
3-22-94
Attm #5-3
Page 3 of 4

PHW
3-28-94
#5-4
Carm
P. 447

1 ments of subsection (b) or (c). A pupil shall be subject to exclusion
2 from school attendance under this section until such time as the
3 pupil shall have complied with the requirements of subsection (b)
4 or (c). The policy shall include provisions for written notice to be
5 given to the parent or guardian of the involved pupil. The notice
6 shall indicate the reason for the exclusion from school attendance,
7 state that the pupil shall continue to be excluded until the pupil has
8 complied with the requirements of subsection (b) or (c) and inform
9 the parent or guardian that a hearing thereon shall be afforded the
10 parent or guardian upon request for a hearing.

11 (j) (i) The provisions of K.S.A. 72-1111 and amendments thereto
12 do not apply to any pupil while ~~subject to exclusion~~ *excluded* from
13 school attendance under the provisions of ~~this section~~ *subsection*
14 *(h)*.

15 (j) *The provisions of this section shall expire on July 1, 1999.*

16 Sec. 2. K.S.A. 1993 Supp. 72-5214 is hereby repealed.

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