Approved: 3-10-95

MINUTES OF THE SENATE COMMITTEE ON PUBLIC HEALTH AND WELFARE.

The meeting was called to order by Chair Sandy Praeger at 10:00 a.m. on February 27, 1995 in Room 526-S of the Capitol.

All members were present except:

Committee staff present: Emalene Correll, Legislative Research Department

Norman Furse, Revisor of Statutes Jo Ann Bunten, Committee Secretary

Conferees appearing before the committee:

Others attending: See attached list

Action on: SB 263 - Long-term care ombudsman access to records

Senator Hardenburger, Chair of the subcommittee on <u>SB 263</u>, briefed the Committee on the subcommittee report and balloon of the bill. (Attachment 1) <u>Senator Hardenburger made a motion the Committee adopt the balloon amendments, seconded by Senator Papay. The motion carried.</u>

Senator Hardenburger made a motion the Committee recommend SB 263 as amended favorably for passage, seconded by Senator Papay. The motion carried.

Action on: SB 43 - Comprehensive individualized services act; community teams and child and family teams

Staff briefed the Committee on the balloon amendments of <u>SB 43</u>. (Attachment 2) <u>Senator Walker made a motion the Committee adopt the balloon amendments, seconded by Senator Harrington. The motion carried.</u>

Senator Walker made a motion the Committee recommend SB 43 as amended and a Substitute bill be drafted favorably for passage, seconded by Senator Langworthy. The motion carried.

Action on: SB 271 - Creating under healing arts act inactive license, federally active license, post graduate permit and limited permit

Staff briefed the Committee on the balloon amendments of <u>SB 271</u>. (Attachment 3) <u>Senator Hardenburger made a motion the Committee adopt the balloon amendments, seconded by Senator Lee. The motion carried.</u>

Senator Lee made a motion the Committee recommend SB 271 as amended favorably for passage. The motion carried.

The meeting was adjourned at 10:30 a.m.

The next meeting will be scheduled at a later date.

SENATE PUBLIC HEALTH AND WELFARE COMMITTEE GUEST LIST

DATE: 2-27-95

NAME	REPRESENTING
Josie Cooper	Leys for Metavorking
Stain Clans	1.45BD
Pat Johnson	KSBN
Chys Wheelen	KS Medical Society
Tom Bell	Ks. Hosp, Asson.
SADOUS FIEHM	KADM
John Federico	Pete Mc Isill & assoc
Staces Gurp son	Hein Ebert & Weir
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SENATE BILL No. 263

By Committee on Public Health and Welfare

2-9

AN ACT concerning the long-term care ombudsman; access to records; amending K.S.A. 1994 Supp. 75-5920 and repealing the existing section.

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

Section 1. K.S.A. 1994 Supp. 75-5920 is hereby amended to read as follows: 75-5920. With the written consent of the resident of the facility, guardian of the resident or next of kin of a deceased resident, an ombudsman shall have access to all records and documents kept for or concerning the resident. In addition, in assisting a resident of a facility, an ombudsman shall have access to all records and documents of the facility which are relevant to such assistance to the extent necessary to carry out the provisions of the long term care ombudsman least access to all records and documents kept for or concerning residents, including medical and social records of a resident, if (1) the ombudsman has the permission of the resident, or the legal representative of the resident; or (2) the resident is unable to consent to access the records and has no legal representative.

- (b) The eccretary shall assure that the state long-term care ombudsman has access to resident records to investigate or resolve a complaint, if (1) a guardian or other legal representative of a resident refuses to give permission; (2) an ombudsman has reasonable cause to believe that the legal representative is not acting in the best interests of the resident, and (3) the ombudsman obtains the approval of the state long-term care ombudsman.
- (c) The secretary shall assure access to all records and documents which are relevant to assisting an applicant for admission to a facility or a resident of a facility to carry out the provisions of the long term care and administrations.

The ombudsman shall have access to and, on request, copies of all licensing and costification records maintained by the state with respect to long term care facilities.

Sec. 2. K.S.A. 1994 Supp. 75-5920 is hereby repealed.

Subcommittee Report 2/23/95

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(d) As used in this section, "legal representative" means a guardian or conservator, or both, a person acting pursuant to a durable power of attorney for health care decisions or a person acting pursuant to a durable power of attorney.

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- Section 1. K.S.A. 1994 Supp. 75-5920 is hereby amended to read as follows:
- (a) The office of the state long-term care ombudsman shall have access to all medical and social records of a resident, if (1) the ombudsman has the permission of the resident, or the legal representative of the resident; or (2) the resident is unable to consent to access to the records and has no legal representative.
- (b) The office of the state long-term care ombudsman shall have access to resident records to investigate or resolve a complaint, if (1) a legal representative of a resident refuses to give permission; (2) an ombudsman has reasonable cause to believe that the legal representative is not acting in the best interests of the resident, and (3) the ombudsman, other than the state long-term care ombusman, obtains the approval of the state long-term care ombudsman.
- (c) The office of the state long-term care ombudsman shall have access to and, on request, copies of all records mainted by the state with respect to facilities.
- (d) As used in this section, "legal representative" means a guardian or conservator, or both, a person acting pursuant to a durable power of attorney for health care decisions or a person acting pursuant to a durable power of attorney.
 - Sec. 2. K.S.A. 1994 Supp. 75-5920 is hereby repealed.

SENATE BILL No. 43

By Joint Committee on Children and Families

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AN ACT concerning children, adolescents and families; relating to community teams; amending K.S.A. 39-1701, 39-1702, 39-1703 and 39-1704 and repealing the existing sections.

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

Section 1. K.S.A. 39-1701 is hereby amended to read as follows: 39-1701. This act shall be known and may be cited as the interagency provision of services for children; adolescents and families comprehensive individualized services act. It is the purpose and intention of this act to provide for regional interagency councils community teams which will collaborate in the provision of services respond to needs and barriers identified by child and family teams as individualized service plans are designed for children and adolescents in this state who require multiple levels and kinds of specialized services which are beyond the capability of one agency. Such services shall be provided in accord with the identified needs of each such child or adolescent, and in the least restrictive environment.

Sec. 2. K.S.A. 39-1702 is hereby amended to read as follows: 39-1702. As used in this act:

- (a) "Children and adolescents who require multiple levels and kinds of specialized services which are beyond the capability of one agency" means children and adolescents who are residents of Kansas, and with respect to whom there is documentation that: (1) Various agencies have acknowledged the need for a certain type of service and have taken action to provide that level of card (2) various agencies have collaborated to develop a program plan to meet the needs of the child or adolescent; and (3) various agencies have collaborated to develop programs and funding to meet the need of the child or adolescent, and that existing or alternative programs and funding have been exhausted or are insufficient or inappropriate in view of the distinctive nature of the situation of the child or adolescent.
- (b) "Agency" means and includes but is not limited to county health departments, area offices of the department of social and rehabilitation services, district offices of the department of health and environment, local offices of the department of human resources, boards of education

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- of public school districts, community mental health centers, community facilities for the mentally retarded/developmentally disabled, district courts, county commissions, and law enforcement agencies, residential facilities, detention centers and other child and family providers as appropriate.
- (c) "Authorized decision makers" means agency representatives who have the authority to commit the resources of the agency they represent in the provision of services to any child or adolescent whose needs are brought before a regional interagency council community team.
- (d) "District court" means the administrative judge for a judicial district.
- (e) "Parent" means a natural parent, an adoptive parent, a stepparent, a foster care provider of a child or adolescent for whom services are needed from more than one agency, or a person acting as parent of a child or adolescent for whom services are needed from more than one agency.
- (f) "Person acting as parent" means a guardian or conservator, or a person, other than a parent, who is liable by law to maintain, care for, or support a child or adolescent, or who has actual care and custody of the child or adolescent and is contributing the major portion of the cost of support of the child or adolescent, or who has actual care and control of the child or adolescent with the written consent of a person who has legal custody of the child or adolescent, or who has been granted custody of the child or adolescent, by a court of competent jurisdiction.
- (g) "Child and family team" shall consist of the parent or parents, the child or adolescent, when appropriate, the facilitator and four to eight persons who know the child best and are chosen by the family to participate as members of the child and family team
- (h) "Facilitator" means an individual trained, knowledgeable about and skilled in comprehensive individualized planning, chosen by the parent or parents, and approved by the community team, who will convene the child and family team, meet with the family separately and facilitate development of the individualized service plan and the report from the child and family team to the community team, and the response from the community team to the child and family team.
- (i) "Community team" shall consist of authorized decision makers with authority to commit resources to implement the individualized service plan for the individual child or family as developed by the child and family team.
- (j) "Local planning councils" are composed of public and private sector partners, including advocates and family members who work together to invest in the future of children and families in their community.
 - (k) "State level team" means the state interagency team of the Kansas

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commission on children, youth and families established by executive order number 91-145. If such commission is no longer in existence, the secretary of social and rehabilitation services shall appoint key state stakeholders and parents to comprise the state level team

Sec. 3. K.S.A. 39-1703 is hereby amended to read as follows: 39-1703. (a) There is hereby established a system of regional interagency councils community teams to coordinate or assure delivery of services for children and adolescents who require multiple levels and kinds of specialized services which are beyond the capability of one agency. The secretary of social and rehabilitation services shall adopt rules and regulations to implement the provisions of this act.

(b) The child and family team shall develop an individualized service plan, negotiated with a family member, and where appropriate, the child or adolescent, for the provision of services to the child or adolescent and family whose case has been referred. This plan shall include a description of each needed service and shall note the desired agency or agencies to be responsible for providing the service within the timeline specified by the team.

(f)® The local planning councils shall receive reports of the community teams and use the information in those reports about barriers to the development or implementation or both of the individual child and family plan. The councils shall further pool their local resources and authority to address the barriers to the system at the local level. The councils shall forward all issues and barriers the council cannot resolve to the state level team to be addressed. If there is no council in the community, issue and barrier information will go directly to the state level team.

Sec. 4. K.S.A. 39-1704 is hereby amended to read as follows 39-1704 (a) Subject to the provisions of subsection (b), the director, or an appointed designee of the director, of each area office of the department of social and rehabilitation services shall convene a regional interagency council community team to coordinate or assure delivery of services at such area office to children and adolescents who require multiple levels and kinds of specialized services which are beyond the capability of one agency. The director, or the appointed designee of the director, shall serve as chairperson of the council team convened by such director or designee.

(b) In those areas where the secretary of social and rehabilitation services determines that *teams*, councils or committees already exist for the purpose of enhancing interagency cooperation and collaboration of service delivery, a regional interagency council community team as described in subsection (a) need not be convened.

(e) Each regional interagency council shall consist of: (1) Authorized decision makers who are representative of agencies; (2) parents; (3) com-

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"Supports" means community-based services characterized by accessibility and responsiveness to individual, family, and community needs and which may be provided by public or private nonprofit agencies or organizations including community-based organizations. Supports should be directed towards: (1) Enhancing parents' ability to create safe, stable and nurturing home environments that promote healthy child development; (2) assisting children and families to resolve crises, connect with necessary and appropriate services, and remain safely together in their home; (3) avoiding unnecessary out-of-home placement of children; and (4) helping children already in out-of-home care to be returned to and be maintained with their families or in another planned, permanent living arrangement.

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- (c) The facilitator shall convene the child and family team, meet with the family separately and facilitate development of the individualized support plan and the report from the child and family team to the community team, and the response from the community team to the child and family team.
- (d) The community team shall receive the individualized support plan developed by the child and family team, work collaboratively to implement the individualized support plan recognizing the appropriate and available services and supports in the community and state and pool and commit resources to assure implementation of the plan within available resources. The community team shall be created in response to the child and family plan and shall be dispersed after the implementation of the plan.

(a) munity business representatives; and (4) such other persons as directors of area offices of the department of social and rehabilitation services may a facilitator determine. td) [c] Each regional interagency council community team shall essupport tablish its own internal procedures and shall meet as often as needed to: (1) Review all cases referred to them by one of the agencies represupports sented or by a family member. (2) develop a review an individualized service plan, negotiated with support a family member and, where appropriate, the child or adolescent, for the provision of services to the child or adolescent and family whose case has (4) report to the local planning council unmet been referred. This plan shall include a description of each needed service 11 needs or duplications of service identified through and shall specify the agency responsible for providing the service within 12 work on the individualized support plan. 13 the timeline specified by the council team: Each local planning council shall (3) maintain information sufficient to assess the effectiveness of the 14 establish its own internal procedures and shall interagency council community team in meeting the service needs of chil-15 meet as often as needed to: 16 dren and adolescents and their families: 17 (4) make an annual report to the joint committee on children and families. The local planning council and to the Kansas commission on 18 Make children, youth and families regarding the local assessment; 19 (b)2 determine what service needs are not being met in their region 20 and develop and plan to meet these service needs; 21 to the corporation for change (b) make an annual report to the joint committee on children and 22 families. The local planning council and to the Kansas commission on support 24 children, youth and families regarding the service needs which are not being met and the plan to meet these service needs; supports (f) destablish interagency agreements as necessary for coordination of 26 services to children and adolescents and their families who are served by support 28 more than one agency; (8)5 refer any problems with service coordination to the joint committee on children and families, the local planning council and to the to the state interagency team for resolution Kansas commission on children, youth and families, and 32 (b) ensure that members of the council ceam receive training in collaborative teaming as needed. teams (e) (d) Each regional interagency council and its members child and 34 family team and community team and the members of each are responsible for maintaining confidentiality by securing appropriate authoriza-36 tions from a parent or person acting as parent of a child or adolescent for release of confidential information received by the eouneil teams. 38 (1) Each community team is responsible for identifying a point of 39 local planning council contact for agencies and parents to call to activate an assessment in order to establish the necessity for a child and family team. (1) The state level team shall create conditions, in response to infordetermine mation from community teams and local planning councils, which will

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allow the creation of individualized service plans which build on the unique strengths of families. Further, the state level team, based upon information from community teams, local planning councils and others, shall work together with the community teams to eliminate duplications of service provisions, remove barriers to service and ensure flexibility of agency operational procedures and regulatory requirements.

(g) The state level team shall facilitate the development of memos of understanding between affected state agencies on how to facilitate the work of local planning councils and community teams in meeting the needs identified in individualized service plans from the child and family teams and to receive the reports from local planning councils and community teams to use the information contained in those reports to review and revise annually the memorandums of understanding

The state level team shall prepare an annual report concerning

subsections (f) and (g) and (h)

Sec. 5. K.S.A. 39-1701, 39-1702, 39-1703 and 39-1704 are hereby repealed.

Sec. 6. This act shall take effect and be in force from and after its publication in the statute book.

support

(h) The state level team, local planning councils, community teams, authorized decision makers and other interested parties shall engage in a planning process between July 1, 1995, and January 1, 1996, for the following:

(1) Identify existing funds that may be

pooled;

(2) develop a strategy and implementation plan for distribution of those funds to communities;

(3) insure the plan has all the necessary safeguards for accountability of public funds;

(4) insure the plan has some measure of consumer satisfaction or evaluation built into the plan; and

(5) develop an implementation plan.

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SENATE BILL No. 271

By Committee on Public Health and Welfare

2-9

AN ACT concerning the Kansas healing arts act; creating a designation of inactive license; creating a designation of federally active license; authorizing issuance of a postgraduate permit; creating a designation of limited permit; requiring notice of address change; amending K.S.A. 65-2811, 65-2828 and 65-2852 and K.S.A. 1994 Supp. 65-2809 and repealing the existing sections; also repealing K.S.A. 65-2829.

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

Section 1. K.S.A. 1994 Supp. 65-2809 is hereby amended to read as follows: 65-2809. (a) The license shall expire on the date established by rules and regulations of the board which may provide renewal throughout the year on a continuing basis. In each case in which a license is renewed for a period of time of less than one year, the board may prorate the amount of the fee established under K.S.A. 65-2852 and amendments thereto. The request for renewal shall be on a form provided by the board and shall be accompanied by the prescribed fee, which shall be paid not later than the expiration date of the license.

- (b) Except as otherwise provided in this section, the board shall require every licensee in the active practice of the healing arts within the state to submit evidence of satisfactory completion of a program of continuing education required by the board. The requirements for continuing education for licensees of each branch of the healing arts shall be established by the members of such branch on the board. The board shall adopt rules and regulations presoribing the requirements established by the members of each branch of the healing arts for each program of continuing education as soon as possible after the effective date of this act. In establishing such requirements the members of the branch shall eonsider any programs of continuing education currently being offered to such licensees. If, immediately prior to the effective date of this act, any branch of the healing arts is requiring continuing education or annual postgraduate education as a condition to renewal of a license; the requirement as a condition for the renewal of the license shall continue notwithstanding any other provision of this section adopted by the board.
- (c) The board, prior to renewal of a license, shall require the licensee, if in the active practice of the healing arts within the state, to submit to

75-6102 and

lished pursuant to K.S.A. 65-2852 and amendments thereto. For those licensees whose license has been inactive for less than two years, the board shall adopt rules and regulations establishing appropriate continuing education requirements for inactive licensees to become licensed to regularly practice the healing arts within Kansas. Any licensee whose license has been inactive for more than two years and who has not been in the active practice of the healing arts or engaged in a formal education program since the licensee has been inactive may be required to complete such additional testing, training or education as the board may deem necessary to establish the licensee's present ability to practice with reasonable skill and safety.

(h) There is hereby created a designation of federally active license. The board is authorized to issue a federally active license to any licensee who makes written application for such license on a form provided by the board and remits the same fee required for a license established under K.S.A. 65-2852 and amendments thereto. The board may issue a federally active license only to a person who meets all the requirements for a license to practice the healing arts in Kansas and who practices that branch of the healing arts solely in the course of employment or active duty in the United States government or any of its departments, bureaus or agencies or who, in addition to such employment or assignment, provides professional services as a charitable health care provider as defined under K.S.A. 1994 Supp. 75-6102 and amendments thereto. The provisions of subsections (b), (d) and (e) of this section relating to continuing education, expiration and renewal of a license shall be applicable to a federally active license issued under this subsection.

Sec. 2. K.S.A. 65-2811 is hereby amended to read as follows: 65-2811. (a) The board may issue a temporary permit to practice the appropriate branch of the healing arts to any person: (1) who has made proper application for a license by endorsement, has the required qualifications for such license and has paid the prescribed fees, and such permit, when issued, shall authorize the person receiving the permit to practice within the limits of the permit until the license is issued or denied by the board, but no more than one such temporary permit shall be issued to any one person without the approval of 2/3 of the members of the board.

(2) (b) The board may issue a postgraduate permit to practice the appropriate branch of the healing arts to any person who is engaged in a full time, approved postgraduate training program; has made proper application for such temporary postgraduate permit upon forms approved by the board; meets all qualifications of licensure, except the examination examinations required under subsection (a)(3) of K.S.A. 65-2873 and amendments thereto and postgraduate training, as required by this act; has paid the prescribed fees established by the board for such temporary

A person who practices under a federally active license shall not be deemed to be rendering professional service as a health care provider in this state for purposes of K.S.A. 40-3402 and amendments thereto.

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65-2873 and amendments thereto may have a reexamination in accordance with criteria established by rules and regulations of the board, which criteria may limit the number of times an applicant may retake the examination until the applicant has submitted evidence acceptable to the board of further professional study.

Sec. 4. K.S.A. 65-2852 is hereby amended to read as follows: 65-2852. The following fees shall be established by the board by rules and regulations and collected by the board:

(a) For a license, issued upon the basis of an examination given by the board, in a sum of not more than \$150;

(b) for a license, issued without examination and by endorsement, in a sum of not more than \$150;

(c) for a license, issued upon a certificate from the national boards, in a sum of not more than \$150;

(d) for the annual renewal of a license, the sum of not more than \$150:

(e) for a temporary permit, in a sum of not more than \$30;

(f) for an institutional license, in a sum of not more than \$150;

(g) for a visiting professor temporary license, in a sum of not more than \$25;

(h) for a certified statement from the board that a licensee is licensed in this state, the sum of not more than \$15;

(i) for any copy of any license issued by the board, the sum of not more than \$15;

(j) for any examination given by the board, a sum in an amount equal to the cost to the board of the examination;

(k) for application for and issuance of a special permit under K.S.A. 65-2811a and amendments thereto, the sum of not more than \$30;

(l) for an exempt or inactive license or renewal of an exempt or inactive license, the sum of not more than \$150;

(m) for conversion of an exempt or inactive license to a license to practice the healing arts, the sum of not more than \$150;

(n) for reinstatement of a revoked license, in a sum of not more than \$1,000;

(o) for a visiting clinical professor license, or renewal of a visiting clinical professor license, in a sum of not more than \$150-;

(p) for a postgraduate permit in a sum of not more than \$30;

(q) for a limited permit or renewal of a limited permit, the sum of not more than \$150.

New Sec. 5. (a) There is hereby created a designation of limited permit to practice a branch of the healing arts which may be issued by the board to a person who holds a degree from a healing arts school; is duly licensed and in good standing to practice the same branch of the healing





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arts in another state, territory, or the District of Columbia; has made proper application upon forms provided by the board; has paid the prescribed fee established under K.S.A. 65-2852 and amendments thereto; has not previously been licensed in this state; and will provide professional services in this state only as a charitable health care provider as defined under K.S.A. 1994 Supp. 75-6102 and amendments thereto.

(b) The limited permit issued under subsection (a), when issued, shall authorize the person receiving the permit to practice the appropriate branch of the healing arts as a charitable health care provider but shall not authorize the person receiving the permit to otherwise engage in the practice of the healing arts in this state.

(c) The provisions of subsections (a), (d) and (e) of K.S.A. 65-2809 and amendments thereto relating to expiration, renewal and reinstatement of a license shall be applicable to a limited permit issued under this section.

(d) This section shall be a part of and supplemental to the Kansas healing arts act.

New Sec. 6. (a) It shall be the duty of each licensee to notify the state board of healing arts in writing within 30 days of any changes in licensee's mailing address.

(b) A penalty in the amount not to exceed \$100 for the first violation of subsection (a) and \$150 for each subsequent violation of subsection (a) may be assessed by the state board of healing arts under the provisions of K.S.A. 65-2863a and amendments thereto.

(c) This section shall be part of and supplemental to the Kansas healing arts act.

Sec. -7: K.S.A. 65-2811, 65-2828, 65-2829 and 65-2852 and K.S.A. 1994 Supp. 65-2809 are hereby repealed.

Sec. 8. This act shall take effect and be in force from and after its publication in the statute book.

75-6102 is hereby amended (SEE ATTACHED)

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and 75-6102

Sec. 7. K.S.A.1994 Supp. to read as follows: 75-6102.

- 75-6102. Definitions. As used in K.S.A. 75-6101 through 75-6118, and amendments thereto, unless the context clearly requires otherwise:
- (a) "State" means the state of Kansas and any department or branch of state government, or any agency, authority, institution or other instrumentality thereof.
- (b) "Municipality" means any county, township, city, school district or other political or taxing subdivision of the state, or any agency, authority, institution or other instrumentality thereof.

(c) "Governmental entity" means state or municipality.

(d) "Employee" means any officer, employee, servant or member of a board, commission, committee, division, department, branch or council of a governmental entity, including elected or appointed officials and persons acting on behalf or in service of a governmental entity in any official capacity, whether with or without compensation and a charitable health care provider. Employee includes any steward or racing judge appointed pursuant to K.S.A. 74-8818, and amendments thereto, regardless of whether the services of such steward or racing judge are rendered pursuant to contract as an independent contractor, but does not otherwise include any independent contractor under contract with a governmental entity but does include a person who is an employee of a nonprofit independent contractor, other than a municipality, under contract to provide educational or vocational training to inmates in the custody of the secretary of corrections and who is engaged in providing such service in an institution under the control of the secretary of corrections provided that such employee does not otherwise have coverage for such acts and omissions within the scope of their employment through a liability insurance contract of such independent contractor. "Employee" also includes an employee of an indigent health care clinic. "Employee" also includes former employees for acts and omissions within the scope of their employment during their former employment with the governmental entity.

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- (e) "Community service work" means public or community service performed by a person (1) as a result of a contract of diversion entered into by such person as authorized by law, (2) pursuant to the assignment of such person by a court to a community corrections program, (3) as a result of suspension of sentence or as a condition of probation pursuant to court order, (4) in lieu of a fine imposed by court order or (5) as a condition of placement ordered by a court pursuant to K.S.A. 38-1663, and amendments thereto.
- (f) "Charitable health care provider" means a person licensed by the state board of healing arts as an exempt licensee or a health care provider as the term "health care provider" is defined under K.S.A. 65-4921, and amendments thereto, who has entered into an agreement with:
- (1) The secretary of health and environment under K.S.A. 1993 Supp. 75-6120, and amendments thereto, who, pursuant to such agreement, gratuitously renders 'professional services to a person who has provided information which would reasonably lead the health care provider to make the good faith assumption that such person meets the definition of medically indigent person as defined by this section or to a person receiving medical assistance from the programs operated by the department of social and rehabilitation services, and who is considered an employee of the state of Kansas under K.S.A. 1993 Supp. 75-6120, and amendments thereto; or
- (2) the secretary of health and environment and who, pursuant to such agreement, gratuitously renders professional services in conducting children's immunization programs administered by the secretary; or

or a federally active licensee, a person issued a limited permit by the state board of healing arts

(3) a local health department or indigent health care clinic, which renders professional services to medically indigent persons or persons receiving medical assistance from the programs operated by the department of social and rehabilitation services gratuitously or for a fee paid by the local health department or indigent health care clinic to such provider and who is considered an employee of the state of Kansas under K.S.A. 1993 Supp. 75-6120 and amendments thereto. Professional services rendered by a provider under this paragraph (3) shall be considered gratuitous notwithstanding fees based on income eligibility guidelines charged by a local health department or indigent health care clinic and notwithstanding any fee paid by the local health department or indigent health care clinic to a provider in accordance with this paragraph (3).

(g) "Medically indigent person" means a person who lacks resources to pay for medically necessary health care services and who meets the eligibility criteria for qualification as a medically indigent person established by the secretary of health and environment under K.S.A. 1993 Supp. 75-6120, and amendments thereto.

(h) "Indigent health care clinic" means an outpatient medical care clinic operated on a not-for-profit basis which has a contractual agreement in effect with the secretary of health and environment to provide health care services to medically indigent persons.

(i) "Local health department" shall have the meaning ascribed to such term under K.S.A. 65-241 and amendments thereto.

History: L. 1979, ch. 186, § 2; L. 1982, ch. 374, § 1; L. 1983, ch. 299, § 1; L. 1987, ch. 353, § 1; L. 1990, ch. 146, § 4; L. 1990, ch. 329, § 2; L. 1990, ch. 149, § 9; L. 1991, ch. 268, § 1; L. 1991, ch. 182, § 5; L. 1993, ch. 29, § 2; April 1.