Approved: 3-10-98

## 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 23, 1998 in Room 526-S of the Capitol.

All members were present except:

Committee staff present: Emalene Correll, Legislative Research Department

Robin Kempf, Legislative Research Department

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

Conferees appearing before the committee:

Jerry Slaughter, KMS

Others attending: See attached list

Briefing and Action on SB 535 - Board of emergency medical services

Staff briefed the Committee on a balloon of <u>SB 535</u> which was the result of input from various EMS entities studied by a subcommittee consisting of Senators Salmans and Steineger. In addition to technical amendments, the changes removed language which authorized administration of specific "medical agents" but retained endotracheal intubation and nebulized albuterol under specified protocols. The amendments also established increased penalties for interfering with emergency medical service attendants. (Attachment 1) Staff brought the Committee's attention to new language in the balloon of the bill on page 17, line 33, relating to "firefighter" which should be changed to "attendant" as well as striking "fire" and inserting "an emergency".

Senator Steineger made a motion that the Committee adopt the balloon of the bill with changes as suggested by staff, and that the Committee recommend SB 535 as amended favorably for passage, seconded by Senator Jones. After Committee discussion on the balloon of the bill, the motion carried.

## Briefing and Action on SB 129 - Secretary of Aging powers and duties

Staff briefed the Committee on a balloon of **SB 129** showing technical changes as well as clarifying that the Department on Aging would comply with normal Rules and Regs procedures. (Attachment 2) During Committee discussion it was suggested that language relating to the department's renewal of the plan, which refers to the federal Senior Care Act, be done so annually with local agencies and service providers instead of periodically as shown in the balloon of the bill.

Senator Jones made a motion that the Committee adopt the balloon of **SB 129** with additional changes relating to renewal of the plan done "annually" instead of "periodically" as shown in the balloon on the bill, seconded by Senator Steineger. The motion carried.

Senator Lee made a motion that the Committee recommend SB 129 as amended favorably for passage, seconded by Senator Hardenburger. The motion carried.

## Discussion on SB 284 - Communications accommodations under the DD Reform Act

The Chair brought the Committee's attention to disagreements in **SB 284** between Envision, Kansas Advocacy and Protective Services, and Kansas Council on Developmental Disabilities in clarifying the definition of "deaf-blind" as well as other issues outlined in Attachment 3. It was suggested that the Committee study these conflicts before the bill is considered at the next meeting.

Continued discussion on SB 655 - Board of Medical Professions

Jerry Slaughter, KMS, clarified that podiatrists did not wish to be on a separate board, but would like to be included on the new board of medical professions if the bill was enacted-- see attached letter from Harold J. Sauder, DPM, wanting representation on the new board. (Attachment 4) Committee discussion related to finding out what other states are doing regarding this issue, as well as current trends toward centralization of administrative entities on the Board.

**Approval of Minutes** 

Senator Steineger made a motion to approve the Committee minutes of February 16, 17, 18, 19 and 20, 1998, as written, seconded by Senator Salmans. The motion carried.

Adjournment

The meeting was adjourned at 11:00 a.m.

The next meeting is scheduled for February 24, 1998.

# SENATE PUBLIC HEALTH AND WELFARE COMMITTEE GUEST LIST

DATE: 2-23-98

NAME	REPRESENTING
Rhow Clarent	myself
Orte massey	KBHA
Steven French	KBHA
Marska Sahrengo	KBHA
Dety Janan	KBHA
Atolisia K Kipp	KRHA
mary J. Bruner	Self
Michila Huzelon	ICAPS
Pot Johnson	KSBN
Rds McDandd	BEMI
Mes Draper	IAMG
HOW INDUSTRICE	MA
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Sondy Every	Enusia
michael Brington	Envesion
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SHELBY SMITH	KPMA
KOTH R LANDIS	ON PUBLICATION FOR KS
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# SENATE PUBLIC HEALTH AND WELFARE COMMITTEE GUEST LIST

DATE: 2-23-98

NAME	DEDDEGENATIVE
NAME	REPRESENTING
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## SENATE BILL No. 535

#### By Committee on Public Health and Welfare

1-28

AN ACT concerning the emergency medical services board; relating to the powers and duties thereof; relating to attendants and the regulation thereof; amending K.S.A. 65-6102, 65-6127, 65-6129a, 65-6129b, 65-6133 and 65-6135 and K.S.A. 1997 Supp. 65-6110, 65-6111, 65-6112, 65-6119, 65-6120, 65-6121, 65-6123, 65-6124, 65-6129 and 65-6144 and repealing the existing sections; also repealing K.S.A. 65-6148 and K.S.A. 1997 Supp. 65-6149.

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

Section 1 K.S.A. 65-6102 is hereby amended to read as follows: 65-6102. (a) There is hereby established the emergency medical services board. The office of the emergency medical services board shall be located in the city of Topeka, Kansas

- (b) The emergency medical services board shall be composed of 13 members to be appointed as follows
- (1) Nine members shall be appointed by the governor. Of such members:
- (A) One shall be a member of the Kansas medical society who is actively involved in emergency medical services;
- (B) two shall be county commissioners of counties making a levy for ambulance service, at least one of whom shall be from a county having a population of less than 15,000;
  - (C) one shall be an instructor-coordinator;
- (D) one shall be a hospital administrator actively involved in emergency medical services;
- (E) one shall be a member of a firefighting unit which provides emergency medical service; and
- (F) three shall be attendants who are actively involved in emergency medical service. At least two classifications of attendants shall be represented. At least one of such members shall be from a volunteer emergency medical service; and
  - (2) four members shall be appointed as follows:
- (A) One shall be a member of the Kansas senate to be appointed by the president of the senate;
  - (B) one shall be a member of the Kansas senate to be appointed by

emergency medical services; relating to

sician, physician's assistant or professional nurse authorized by a physician. These protocols shall be developed and approved by a county medical society or, if there is no county medical society, the medical staff of a hospital to which the ambulance service primarily transports patients.

- (o) "Mobile intensive care technician" means any a person who has successfully completed a course of training, approved by the board, in emergency medical care, and who holds a valid mobile intensive care technician certificate under holds a mobile intensive care technician certificate issued pursuant to this act.
- (p) "Municipality" means any city, county, township, fire district or ambulance service district.
- (q) "Nonemergency transportation" means the care and transport of a sick or injured person under a foreseen combination of circumstances calling for continuing care of such person. As used in this subsection, transportation includes performance of the authorized level of services of the attendant whether within or outside the vehicle as part of such transportation services.
- (r) "Operator" means a person or municipality who has a permit to operate an ambulance service in the state of Kansas.
- (s) "Person" means an individual, a partnership, an association, a joint-stock company or a corporation
- (t) "Physician" means a person licensed by the state board of healing erts any state to practice medicine and surgery.
- (ii) "Training officer I" means any person who has completed successfully a course of training, approved by the board, to conduct continuing education programs for attendants.
- (v) "Training officer H" means any person who has: (1) Completed successfully a course of training, approved by the board, to concluet continuing education programs for attendants; and (2) completed successfully a supplemental course of training, approved by the board, to conduct initial training programs for first responders.
- (u) "Physician's assistant" means a person who is registered in accordance with the provisions of K.S.A. 65-2896a, and amendments thereto.
- (v) "Professional nurse" means a professional nurse as defined by K.S.A. 65-1113, and amendments thereto.
- (w) "Provider of training" means a corporation, partnership, community college, ambulance service, fire department, hospital or municipality that conducts training programs that include, but are not limited to, initial courses of instruction and continuing education for attendants, instructor-coordinators or training officers.
- (x) "Training officer" means a person who is certified pursuant to this act to teach initial courses of instruction for first responders and contin-

licensed

accredited postsecondary education institution

uing education as prescribed by the board.

Sec. 5. K.S.A. 1997 Supp. 65-6119 is hereby amended to read as follows: 65-6119. Notwithstanding any other provision of law, mobile intensive care technicians may perform any of the following:

(a) May Perform all the authorized activities of an emergency medical technician as described identified in K.S.A. 65-6121, and amendments

thereto.;

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(b) perform cardiopulmonary resuscitation and defibrillation in a

pulseless, nonbreathing patient.;

(c) when voice contact or a telemetered electrocardiogram is monitored by a person licensed to practice medicine and surgery or a licensed professional nurse where authorized by a person licensed to practice medicine and surgery, physician or professional nurse where authorized by a physician and direct communication is maintained, and upon order of such person or such nurse do any of the following may:

Perform veni-puncture for the purpose of blood sampling collection and initiation and maintenance of intravenous infusion of saline solutions, destrose and water solutions or ringers lactate IV-solutions;

(2) -perform-gastrie-suction by intubation;

(3) -perform-endotracheal intubation;-

(4)—administer-parenteral injections of any of the following classes of drugs:

(A)-Antiarrhythmic agonts.;-

(B) -vagolytic agents.;

(C) - ehronotropie agents.;

(D) - analgesic agents.;

(E) - alkalinizing agents.; or

(F)—vasopressor-agents.;
(5) administer such other medications or procedures as may be deemed necessary by such an ordering person. a person identified in subsection (c);

(d) perform, during an emergency, those activities specified in subsection (c) before contacting the person licensed to practice medicine and surgery or authorized licensed professional nurse a person identified in subsection (c) when specifically authorized to perform such activities by medical protocols; and

(e) perform, during nonemergency transportation, those activities specified in this section when specifically authorized to perform such activities by medical protocols.

Sec. 6. K.S.A. 1997 Supp. 65-6120 is hereby amended to read as follows: 65-6120. Notwithstanding any other provision of law to the contrary, an emergency medical technician-intermediate may:

(a) May Perform any of the activities described identified by K.S.A.

----delete lines 16 through 28

---- delete "other"

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65-6121, and amendments thereto, which an emergency medical technician may perform;

- (b) when approved by medical protocols and where voice contact by radio or telephone is monitored by a person licensed to practice medicine and surgery or a licensed professional physician or professional nurse, where authorized by a person licensed to practice medicine and surgery physician, and direct communication is maintained, upon order of such person or such nurse may perform veni-puncture for the purpose of blood sampling collection and initiation and maintenance of intravenous infusion of saline solutions, dextrose and water solutions or ringers lactate IV solutions, endotracheal intubation and administration of nebulized albuterol;
- (c) perform, during an emergency, those activities specified in subsection (b) before contacting the person licensed to practice medicine and surgery or authorized licensed professional nurse persons identified in subsection (b) when specifically authorized to perform such activities by medical protocols; or
- (d) perform, during nonemergency transportation, those activities specified in this section when specifically authorized to perform such activities by medical protocols.
- Sec. 7. K.S.A. 1997 Supp. 65-6121 is hereby amended to read as follows: 65-6121. Notwithstanding any other provision of law to the contrary, an emergency medical technician may perform any of the following activities:
  - (a) Patient assessment and vital signs;
- (b) airway maintenance to include including the use of:
- (1) Oropharyngeal and nasopharyngeal airways;
- (2) esophageal obturator airways with or without gastric suction device; and
- (3) oxygen demand valves.
- (c) Oxygen therapy;
- (d) oropharyngeal suctioning;
- (e) cardiopulmonary resuscitation procedures;
  - (f) control accessible bleeding;
  - (g) application of apply pneumatic anti-shock garment;
  - (h) management of manage outpatient medical emergencies;
  - (i) extrication of patients and lifting and moving techniques extricate patients and utilize lifting and moving techniques;
  - (j) management of manage musculoskeletal and soft tissue injuries to include including dressing and bandaging wounds or the splinting of fractures, dislocations, sprains or strains;
    - (k) use of backboards to immobilize the spine;
    - (l) administer syrup of ipecac, activated charcoal and glucose;

---- delete "and" Add new (3) "multi-lumen airway; and" ---- change (3) to (4)

- Sec 14. K.S.A. 65-6133 is hereby amended to read as follows: 65-6133. (a) An attendant's or instructor-coordinator's certificate may be denied, revoked, limited, modified or suspended by the board or the board may refuse to renew such certificate upon proof that such attendant or instructor-coordinator individual:
- (1) Has been guilty of misrepresentation in obtaining the certificate made intentional misrepresentations in obtaining a certificate or renewing a certificate;
- (2) has engaged or attempted to engage in or represented the nuclees estimated to perform, any service not authorized in the certificate performed or attempted to perform activities not authorized by statute at the level of certification held by the individual,
- (3) has demonstrated incompetence as defined by rules and regulations adopted by the board or has shown themselves otherwise unable to provide adequate patient care as determined by the board;
- (4) has violated or aided and abetted in the violation of any provision of this act or the rules and regulations promulgated thereunder.
- (5) has been convicted of a felony and after investigation by the board, it is determined that such person his not been sufficiently relimbilitated to warrant the public trust any state or federal craw that is related substantially to the qualifications, functions and duties of an attendant or an instructor coordinator or any craw pumbable as a felony under any state or federal statute. A connection means a plua of guilty, a plea of melo contenders or a cordict of guilty. The board may take ducit pleasery action pursuant to this section when the time for appeal has clapsed or after the judgment of connection is afferinged on appeal or when an order granting probation is made suspending the imposition of sentenced.
- (6) has demonstrated habitual intemperance or is addicted to the use of habit forming drugs an mability to perform authorized activities with reasonable skill and safety by reason of illness, alcoholism, excessive use of drugs, controlled substances or any physical or mental condition; or
- (7) has engaged in unprofessional conduct, as defined by rules and regulations adopted under this act by the board.
- (b) The board shall not may limit, modify, revoke or suspend any an attendant's or instructor-coordinator's certificate pursuant to this section without first conducting a hearing or the board may refuse to renew such certificate in accordance with the provisions of the Kansas administrative procedure act.
- Sec. 15. K.S.A. 65-6135 is hereby amended to read as follows: 65-5135. (a) All ambulance services providing emergency care as defined by the rules and regulations adopted by the board shall offer service 24 hours

a felony and, after investigation by the board, it is determined that such person has not been sufficiently rehabilitated to warrant the public trust

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- (c) A training officer's certificate may be denied, revoked, limited, modified or suspended or the board may refuse to renew such certificate in accordance with the Kansas administrative procedures act upon any of the following conditions: (1) Failure to maintain certification or licensure as an emergency medical technician, emergency medical technician-intermediate, emergency medical technician defibrillator, mobile intensive care technician, physician or professional nurse; (2) withdrawal of appointment by a provider of training; or (3) failure to successfully complete continuing education.
- (d) A training officer's certificate may be denied, revoked, limited, modified or suspended by the board or the board may refuse to renew such certificate upon proof that such individual:
- (1) Has made intentional misrepresentations in obtaining a certificate or renewing a certificate,
- (2) has demonstrated incompetence or engaged in unprofessional conduct as defined by rules and regulations adopted by the board;
- (3) has violated or aided and abetted in the violation of any provision of this act or the rules and regulations promulgated by the board, or
- (4) has been convicted of any state or federal crime that is related substantially to the qualifications, functions and duties of a training officer or any crime punishable as a felony under any state or federal statute. A conviction means a plea of guilty, a plea of nolo contendere or a verdict of guilty. The board may take disciplinary action pursuant to this section when the time for appeal has elapsed, or after the judgment of conviction is affirmed on appeal or when an order granting probation is made suspending the imposition of sentence.
- (e) If a person who previously was certified as a training officer applies for a training officer's certificate within two years of the date of its expiration, the board may grant a certificate without the person completing an initial course of training or taking an examination if the person complies with the other provisions of subsection (a) and completes continuing education requirements.

Sec. [18]. K.S.A. 65-6102, 65-6127, 65-6129a, 65-6129b, 65-6133, 65-6135 and 65-6148 and K.S.A. 1997 Supp. 65-6110, 65-6111, 65-6112, 65-6119, 65-6120, 65-6121, 65-6123, 65-6124, 65-6129, 65-6144 and 65-6149 are hereby repealed.

Sec. [19]. This act shall take effect and be in force from and after its publication in the statute book.

New Sec. 18. (a) Unlawful interference with an emergency medical services attendant is knowingly and intentionally interfering with, molesting or assaulting, as defined in K.S.A. 21-3408 and amendments thereto, any attendant while engaged in the performance of such attendant's duties, or knowingly and intentionally obstructing, interfering with or impeding the efforts of any firefighter to reach the location of a fire emergence attlement.

- (b) As used in this section, "attendant" shall have the meaning ascribed to such term under K.S.A. 65-6112 and amendments thereto.
- (c) Unlawful interference with an emergency medical services attendant is a class B person misdemeanor.
- (d) This section shall be part of and supplemental to the Kansas criminal code.

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## SENATE BILL No. 129

## By Committee on Public Health and Welfare

#### 1-28

AN ACT concerning the secretary of aging; older Americans act programs; senior care act; long-term care programs; department on aging; amending K.S.A. 75-5908 and 75-5932 and K.S.A. 1996 Supp. 75-5910, 75-5928 and 75-5945 and repealing the existing sections; also repealing K.S.A. 1996 Supp. 75-5935.

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

Section 1. K.S.A. 75-5908 is hereby amended to read as follows: 75-5908. In addition to powers and duties otherwise provided by law, on and after July 1, 1977, the secretary shall have the following powers and duties:

- (a) To evaluate all programs, services and facilities for the aged within the state and determine the extent to which present public or private programs, services and facilities meet the needs of the aged.
- (b) To evaluate and coordinate all programs, services and facilities for the aging presently furnished by state and federal agencies, and make appropriate recommendations regarding such services, programs and facilities to the governor and the legislature.
- (c) To function as the sole state agency to develop a comprehensive plan to meet the needs of the state's senior citizens.
- (d) To receive and disburse federal funds made available directly to the department, including those funds made available under the federal older Americans act of 1965 (public law 50-73), 42 U.S.C. 3001 et seq., and any amendments thereto, for providing services for senior citizens or for purposes related thereto and to develop and administer any state plan for the aging required by federal law.
- (e) To solicit, accept, hold and administer in behalf of the state any grants, devises or bequests of money, securities or property to the state of Kansas for services to senior citizens or purposes related thereto.
- (f) To provide consultation and assistance to communities and groups developing local and area services for senior citizens.
- (g) To promote community education regarding the problems of senior citizens through institutes, publications, radio, television and the press.
- (h) To cooperate with agencies of the federal government in studies and conferences designed to examine the needs of senior citizens and to

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pare programs and facilities to meet those needs.

- (i) To establish and maintain information and referral sources throughout the state in conjunction with other agencies.
- (j) To provide such staff support as may reasonably be required by the council.
- (k) To establish state policies for the administration of the department; for the disbursement of federal older Americans act funds within the state; and for state administration of federal older Americans act programs consistent with relevant federal law, rules and regulations, policies and procedures.
- (l) To keep informed of the latest developments of research, studies and programs being conducted nationally and internationally on problems and needs of aging.
- (m) To adopt such rules and regulations as may be necessary to administer the previsions of this act department and the programs and services it provide.
- (n) To lend surplus state property under the authority of the department on azing to area agencies on aging or to the state long-term care ombudsman to help them perform duties required under state and federal programs administered by the department on aging
- (o) To enter into any contract or agreement not otherwise probabilists by law utuch the secretary finds necessary or expediend to perform the powers, duties and functions of the secretary or the department.

copying, packaging postage, and delivery costs, for publications and other information sent to any person or organization upon request, and any moneys received from such charges shall be deposited in the state treasury and credited to the department on aging's conferences and workshaps affendance and publications fee fund and used to defray those costs.

- Sec. 2 K.S.A. [1996] Supp. 75-5910 is hereby amended to read as follows: 75-5910. (a) Except as otherwise specifically provided by law, and subject to the Kansas civil service act, the secretary of aging shall appoint all subordinate officers and employees of the department and all such subordinate officers and employees shall be within the classified service under the Kansas civil service act.
- (b) The secretary may appoint one public information officer, one chief attorney, one personal secretary and one special assistant who shall be in the unclassified service under the Kansas civil service act and shall receive compensation fixed by the secretary and approved by the governor. The secretary may appoint deputy secretaries and commissioners as mined necessary by the secretary to effectively carry out the mission
- department. All deputy secretaries and commissioners shall be in the unclassified service under the Kansas civil service act and shall receive

the provisions of article 59 of chapter 75 of the Kansas Statutes Annotated and acts amendatory thereof and supplemental thereto

See L. 1997, Sec. 59(b)

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ompensation fixed by the secretary and approved by the governor.

(c) Nothing in subsection (b) shall affect the classified status of any person employed by the department on aging on the day immediately preceding the effective date of this act. The provisions of this subsection shall not be construed to limit the powers of the secretary pursuant to K.S.A. 75-5909 or 75-2948 and amendments thereto.

(d) Personnel of the department shall perform such duties and exercise such powers as the secretary may prescribe such duties and powers or as are designated by law.

- Sec. 3. K.S.A. [1996] Supp. 75-5928 is hereby amended to read as follows: 75-5928. (a) Within the limitations of appropriations therefor, the secretary of aging is hereby authorized to establish a program of in-home services for residents of Kansas 60 years of age or older who have functional limitations which restrict their ability to carry out activities of daily living and impede their ability to live independently.
- (b) The secretary of aging shall establish and administer, pursuant to the provisions of this act, a program of in-home services as authorized under subsection (a). The secretary shall designate area agencies on aging to administer the program in their respective planning and service areas. The secretary shall designate an area agency on aging to receive funds only after the area agency on aging has submitted an acceptable program plan. The plan must be developed with support of a local or regional coordinating committee comprised of representatives of senior organizations, home health agencies and health departments, department of social and rehabilitation services offices and other interested groups.
- (c) The program of in-home services authorized under subsection (a) shall serve such planning and service areas and provide such services as may be specified by the secretary and as are consistent with this act and with appropriation acts relating thereto. The secretary shall establish by rules and regulations the priority of services to be offered under this program. Such services shall include, but not be limited to, homemaker services, attendant care services, transportation for care services, chore services and care management services. The secretary shall follow the priorities established in specifying services under this act, but any such service or services, or combination of services, to be provided under this act shall be consistent with appropriations for such program.
- (d) In establishing a program of in-home services authorized under subsection (a) and the provisions of this act, the secretary of aging may:
  - (1) Make grants to area agencies on aging;
- (2) fix, charge and collect fees for services provided as part of such ogram, such fees to be fixed on a stiding scale based on the recipient's ility to pay for the services and the schedule of fees shall be published annually in the Kansas register;

The program plan must be renewed periodically by the area agency on aging older Americans act advisory council and representatives of senior organizations, home health agencies, health departments and the department of social and rehabilitation services.

Contract authority, see p. 4, lines 4-5

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- (3) adopt rules and regulations necessary to establish the program under this act and to administer the provisions of such program and shall adopt rules and regulations as provided under K.S.A. 75-5931;
- (4) enter into contracts as necessary to carry out the provisions of this act; and
- (5) take such other action as may be necessary to carry out the provisions of this act.
- Sec. 4. K.S.A. 75-5932 is hereby amended to read as follows: 75-5932. Plans shall not be found acceptable unless they contain:
- (a) Evidence of support by a broadly representative committee of representatives of within the planning and service area to be served;
  - (b) identification of service providers to be reimbursed for services;
- (c) evidence that no in-home services will be directly provided by an area agency on aging; and
- (d) a means acceptable for selecting clients who are most in need of the program's benefits.
- Sec. 5. K.S.A. [1996] Supp 75-5945 is hereby amended to read as follows: 75-5945. The secretary of aging shall administer the long-term care programs and services transferred in this act. All powers granted in this act are to be interpreted and administered in conformity with federal grant requirements as applicable to programs transferred, even if such powers are limited or excluded
- (a) The secretary of aging shall develop state plans or state plan amendments or portions of state plans or state plan amendments in consultation with the secretary of social and rehabilitation services relating to long-term care programs as provided under the federal social security act. The secretary of aging shall not develop any state plan amendment in duplication of or contrary to any state plan otherwise developed by the secretary of social and rehabilitation services. The secretary of aging may cooperate with the federal government on any other program providing federal financial assistance and long-term care services not otherwise inconsistent with this act. The secretary of aging is not required to develop a state plan for participation or cooperation in all federal social security act programs or other federal programs that are available for long-term care services. The secretary of aging may develop a state plan in regard to long-term care services in which the federal government does not participate.
- (b) The secretary of aging, in consultation with the secretary of social and rehabilitation services, may determine the general policies relating to all forms of long-term care programs which are administered or supervised by the secretary of aging and to adopt the rules and regulations therefor.
  - (c) The secretary of aging shall adopt rules and regulations necessary

And by renumbering sections

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to protect the confidentiality of all client information as required by federal and state statutes and regulations.

- (d) The secretary of aging shall provide that all officers and employees of the department of social and rehabilitation services who are engaged in the exercise and performance of the powers, duties and functions of the programs transferred in this act and are determined by the secretary to be necessary to perform such functions are transferred to the department on aging. Officers and employees of the department of social and rehabilitation services shall retain their elassified or unclassified status and all retirement benefits and leave rights which had accrued or vested prior to each date of transfer. The service of each such officer and employee so transferred shall be deemed to have been continuous. All transfers, layoffs and abolition of classified service positions under the Kansas civil service act which may result from program transfers shall be made in accordance with the civil service laws and any rules and regulations adopted thereunder. The secretary of aging may appoint attorneys as are necessary to effectively carry out the mission of the department and the programs transferred by this act. The attorneys appointed shall be in the unclassified service under the Kansas civil service act, shall serve at the pleasure of the secretary, and shall receive an annual salary fixed by the secretary and approved by the governor. Nothing in this act shall affect the classified status of any transferred person employed as an attorney by the department of social and rehabilitation services prior to the date of transfer and the unclassified status shall apply only to persons appointed to such attorney positions on or after the effective date of this act.
- (e) The secretary of aging shall establish an adequate system of financial records. The secretary of aging and the secretary of social and rehabilitation services shall execute agreements for the department of social and rehabilitation services and the department on aging to share data systems necessary to maximize the efficiency of program operations and to ensure that federal grant requirements are met. The secretary of aging shall make annual reports to the governor and shall make any reports required by federal agencies.
- (f) The secretary of aging may receive, have custody of, protect, administer, disburse, dispose of and account for federal or private equipment, supplies and property which is given, granted, loaned or advanced to the state of Kansas for long-term care programs after the transfer of such programs pursuant to this act.
- (g) The secretary of aging may assist other departments, agencies and institutions of the state and federal government and of other states under interstate agreements, when so requested, by performing services in conformity with the purpose of this act.
  - (h) The secretary of aging may lease real and personal property when-

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ever the property is not available through the state or a political subdivision of the state for performing the functions required by this act.

- (i) All contracts shall be made in the name of "secretary of aging" and in that name the secretary may sue and be sued on such contracts. The grant of authority under this subsection shall not be construed to be a waiver of any rights retained by the state under the 11th amendment to the United States constitution and shall be subject to and shall not supersede the provisions of any appropriations act of this state.
- (j) The secretary of aging, except as set forth in the Kansas administrative procedure act and paragraphs 5 and 6, shall provide a fair hearing for any person who is an applicant, client or other interested person who appeals from the decision or final action of any agent or employee of the secretary. The hearing shall be conducted in accordance with the provisions of the Kansas administrative procedure act and the requirements of any applicable federal grant programs.
- (1) The secretary of aging may investigate (A) any claims and vouchers and persons, businesses and other entities who provide services to the secretary of aging or to clients served by long-term care programs under the administration of the secretary, and (B) the eligibility of persons to receive services under long-term care programs under the administration of the secretary, and (C) the eligibility of providers of services.
- (2) When conducting investigations, the secretary of aging may issue subpoenas; compel the attendance of witnesses at any place in this state; compel the production of any records, books, papers or other documents considered necessary; administer oaths; take testimony; and render decisions. If a person refuses to comply with any subpoena issued under this section or to testify to any matter regarding which the person may lawfully be questioned, the district court of any county, on application of the secretary, may issue an order requiring the person to comply with the subpoena and to testify. Failure to obey the order of the court may be punished by the court as a contempt of court. Unless incapacitated, the person placing a claim or defending a privilege before the secretary shall appear in person or by authorized representative and may not be excused from answering questions and supplying information, except in accordance with the person's constitutional rights and lawful privileges.
- (3) The presiding officer may close any portion of a hearing conducted under the Kansas administrative procedure act when matters made confidential, pursuant to federal or state law or regulation are under consideration.
- (4) Except as provided in subsection (d) of K.S.A. 77-511 and amendments thereto and notwithstanding the other provisions of the Kansas administrative procedure act, the secretary of aging may enforce any order prior to the disposition of a person's application for an adjudicative

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proceeding unless prohibited from such action by federal or state statute, regulation or court order.

- (5) This appeals procedure shall not have jurisdiction to determine the facial validity of a state or federal statute, rule or regulation.
- (6) The secretary of aging shall not be required to provide a hearing if: (A) The appeals procedure lacks jurisdiction over the subject matter; (B) resolution of the matter does not require the secretary to issue an order that determines an applicant's or client's legal rights, duties, privileges, immunities or other legal interests; (C) the matter was not timely submitted for appeal pursuant to regulation or other provision of law; (D) the matter was not submitted in a form substantially complying with any applicable provision of law; or (E) the matter is under the prior or concurrent jurisdiction of the secretary of social and rehabilitation services pursuant to K.S.A. 75-3306 and amendments thereto.
- (k) The secretary of aging may establish payment schedules for each group of providers for the long-term care programs. The secretary shall consider budgetary constraints as a factor in establishing payment schedules so long as the result does not conflict with applicable federal law. The secretary shall not be required to make any payments under any federal grant program which do not meet the requirements for state and federal financial participation. The secretary shall not be required to make any payments under any federal grant program which do not meet the requirements for state and federal financial participation. The secretary shall not be required to establish or pay at rates which are in excess of the minimum necessary payment requirements regardless of excess costs incurred by a provider
- (l) The secretary of aging shall review all rules and regulations of the department on aging and shall amend and revoke the rules and regulations to conform to the purposes of this act
- (m) The secretary of aging may implement a program which would permit the value of any services provided by the area agencies on aging for the benefit of any long-term care programs administered by the secretary to be considered eligible for federal financial participation for such long-term care programs.
- Sec. 6. K.S.A. 75-5908 and 75-5932 and K.S.A. 1996 Supp. 75-5910, 75-5928, 75-5935 and 75-5945 are hereby repealed.
- Sec. 7. This act shall take effect and be in force from and after its publication in the statute book.

February 19, 1998

The Honorable Sandy Praeger, Chairperson Senate Public Health and Welfare Committee 128 S. State Capitol Topeka, Kansas 66612

Dear Senator Praeger:

During the February 10 hearing on Senate Bill 284, you asked that proponent Michael Byington (Envision) and opponents Jane Rhys (Kansas Council on Developmental Disabilities) and Sherry Diel (Kansas Advocacy and Protective Services) meet to see if agreement could be obtained. We have met twice and concur on the attached balloon of SB 286 except in the following instances:

Lines are numbered, however, for quick reference; proposed changes in Statutes are underlined, and language to be struck is shown in strikeout mode. This document could be considered an amended S. B. 284 or a substitute for the original 284.

#### Disagreements

### Page 2, Lines 22-25

Diel and Rhys request deletion of the proposed language because they believe these additions clearly add to the size and scope of the DD population, and open the door to other groups wishing to add language which broadens the definition of DD.

Byington suggests that the definition is clarified, but not broadened by the proposed changes. He argues that the structure of the Statutes, would still require any applicant to meet the functional criteria in the definition, and 284 does not make any changes in these functional requirements.

#### Lines 41-42

Diel and Rhys propose deletion of proposed language because the need for such services are covered in the existent language and there are many "specialized techniques or services" required by the variety of different disabilities served under this Act. To specify or list all such services would make the Act unwieldy and it would be difficult to have an all inclusive list.

Byington suggests that specialize communications do not constitute stand alone techniques or services, but rather those practices which make other services provided effective and efficiently delivered. The proposed language clarifies ambiguities without opening the way for addition of a laundry list of stand alone services.

#### Page 6, Lines 41-44

Diel and Rhys oppose the suggested revision because it is unnecessary. Current law already requires services to be individualized to meet the needs of persons served. The added language makes this a discretionary rather than a mandatory requirement. They further state that adding "communication accommodations" to the funding section of the law is inappropriate because providing reasonable accommodations such as Braille, large print and interpreter services should be considered as part of the cost of doing business under both state and federal law

Byington suggests that this clarification is necessary. Although he is pleased with proposed Kansas Administrative Regulation changes, a number of advocacy groups have attempted to use the regulatory process to exclude service providers who specialize, and thus do not serve all disabilities. Byington suggests that it needs to be documented that sometimes these specialized services are necessary, and the addition of these words do not make such services discretionary. Byington further suggests that, in practice, providing the communications accommodations mentioned is not done as a matter of course.

All three participants regret that it is not possible to agree on every point. They do not feel they can do so, however, and remain true to those persons whom they are representing. The discussions have, however, moved the participants closer together on certain points.

Sincerely:

Jane Rhys

herry Diel

Michael Byingron

BALLOON FOR S.B. 284

(All involved statutes are listed below. Language from the original statutes to be struck is presented in strikeout mode. New language to be added to the original statute is underlined. This balloon language is presented with reference to the original statute rather than referencing add ons and strikeouts relevant to the originally introduced 284.)

Statute # 39-1802

Chapter 39.--MENTALLY ILL, INCAPACITATED AND DEPENDENT PERSONS; SOCIAL WELFARE Article 18.--DEVELOPMENTAL DISABILITIES REFORM Title Policy of state.

It is the policy of this state to assist persons who have a developmental disability to have:

- (a) Services and supports which allow persons opportunities of choice to increase their independence and productivity and integration and inclusion into the community;
- (b) access to a range of services and supports appropriate to such persons; and
  - (c) the same dignity and respect as all persons

Statute # 39-1803

Chapter 39.--MENTALLY ILL, INCAPACITATED AND DEPENDENT PERSONS; SOCIAL WELFARE Article 18.--DEVELOPMENTAL DISABILITIES REFORM Title Definitions.

As used in the developmental disabilities reform act:

- (a) "Adaptive behavior" means the effectiveness or degree with which an individual meets the standards of personal independence and social responsibility expected of that person's age, cultural group and community.
- (b) "Affiliate" means an entity or person that meets standards set out in rules and regulations adopted by the secretary relating to the provision of services and that contracts with a community developmental disabilities organization.
- (new c) "communications accommodations" means the presentation of information, materials, choices, and instructions in the manner proven to provide the most effective form of communications for persons with developmental disabilities. Such accommodations may involve, but are not limited to, the use of specific types of sign language and sign language interpretation,

other communications assistance, Braille, large print, and tape recordings of written materials.

 $\underline{(d)}$  "Community services" means services provided to meet the needs of persons with developmental disabilities relating to work, living in the community, and individualized supports and services.

- $\underline{\text{(e)-(d)}}$  "Community developmental disability organization" means any community mental retardation facility that is organized pursuant to K.S.A. 19-4001 through 19-4015 and amendments thereto.
- $\underline{\text{(f)}}$  "Community service provider" means a community developmental disability organization or affiliate thereof.
  - (g) (f) "Developmental disability" means:
  - (1) Mental retardation; or
  - (2) a severe, chronic disability, which:
- (A) Is attributable to a mental or physical impairment, or multiple sensory impairments, a combination of mental and physical impairments, physical and sensory impairments, mental and sensory impairments, or a condition which has received a dual diagnosis of mental retardation and mental illness:
  - (B) is manifest before 22 years of age;
  - (C) is likely to continue indefinitely;
- (D) results, in the case of a person five years of age or older, in a substantial limitation in three or more of the following areas of major life functioning: Self-care, receptive and expressive language development and use, learning and adapting, mobility, self-direction, capacity for independent living and economic self-sufficiency;
- and economic self-sufficiency;
- (E) reflects a need for a combination and sequence of special interdisciplinary or generic care, treatment, specialized communications techniques or other services which are lifelong, or extended in duration and are individually planned and coordinated; and
- (F) does not include individuals who are solely and severely emotionally disturbed or seriously or persistently mentally ill or have disabilities solely as a result of the infirmities of aging.

- (g) "Institution" means state institution for the mentally retarded as defined by subsection (c) of K.S.A. 76-12b01 and amendments thereto or intermediate care facility for the mentally retarded of nine beds or more as defined by subsection (a) (4) of K.S.A. 39-923 and amendments thereto.
- (h) "Mental retardation" means substantial limitations in present functioning that is manifested during the period from birth to age 18 years and is characterized by significantly subaverage intellectual functioning existing concurrently with deficits in adaptive behavior including related limitations in two or more of the following applicable adaptive skill areas: Communication, self-care, home living, social skills, community use, self-direction, health and safety, functional academics, leisure and work.
- (i) "Secretary" means the secretary of social and rehabilitation services.
  History: L. 1995, ch. 234, S. 3; Jan. 1, 1996.

Statute # 39-1804

Chapter 39.--MENTALLY ILL, INCAPACITATED AND DEPENDENT PERSONS; SOCIAL WELFARE Article 18.--DEVELOPMENTAL DISABILITIES REFORM Title Implementation of act; powers and duties of secretary of social and rehabilitation services; reports.

- (a) Except as otherwise specifically provided in this act and subject to appropriations of federal and state funds, the secretary, after consultation with representatives of community developmental disability organizations, community service providers, families and consumer advocates, shall implement and administer the provisions of the developmental disabilities reform act in accordance with the following policies. Persons with developmental disabilities shall:
- (1) Be provided assistance to obtain food, housing, clothing and medical care; protection from abuse, neglect and exploitation; and a range of services and supports, which include communications accommodations which in order to assist in the determination of individual needs; and
- (2) receive assistance in determining and communicating their needs; be provided information, using appropriate communications accommodations about all service options available to meet those needs; have coordination of services delivered; be assisted and supported in living with their families, or independently; be assisted in finding transportation to support access to the community; and receive individually planned habilitation, education, training, employment and recreation subject to supports and services available in the community of their choice.

- (b) To accomplish the policies set forth in subsection (a), the secretary, subject to the provisions of appropriation acts, shall annually propose and implement a plan including, but not limited to, financing thereof which shall: (1) Provide for an organized network of community services for persons with developmental disabilities; (2) maximize the availability of federal resources to supplement state and local funding for such systems; and (3) reduce reliance on separate, segregated settings in institutions or the community for persons with developmental disabilities.
- (c) The secretary shall report to the legislature the number of persons with developmental disabilities eligible to receive community services and shall make a progress report on the implementation of the annual plans and the progress made to accomplish a comprehensive community services system for persons with developmental disabilities.
- (d) The secretary shall prepare and submit budget estimates for the department of social and rehabilitation services to the division of the budget and the legislature and shall establish and implement policies and procedures within the programs and activities of the department so that funds for state-level programs and activities for persons who are developmentally disabled are allocated between services delivered in institutions and community services.
- (e) Subject to the provisions of this act and appropriation acts, the secretary shall administer and disburse funds to each community developmental disability organization for the coordination and provision of community services.
- (f) The secretary shall establish procedures and systems to evaluate the result and outcomes of the implementation of this act to assure the attainment of maximum quality and efficient delivery of community services.

  History: L. 1995, ch. 234, S. 4; Jan. 1, 1996.

Statute #39-1805

Chapter 39.--MENTALLY ILL, INCAPACITATED AND DEPENDENT PERSONS; SOCIAL WELFARE Article 18.--DEVELOPMENTAL DISABILITIES REFORM

Title Powers and duties of community developmental disability organization.

In addition to any other power and duty prescribed by law, and subject to appropriations, a community developmental disability organization shall have the power and duty to:

(a) Directly or by subcontract, serve as a single point of application or referral for services, and assist all persons with

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- a developmental disability to have access to, and an opportunity to, and arrange for communications accommodations when necessary to, participate in community services, except in those circumstances in which the secretary determines, subject to an immediate hearing before the district court located in the county in which the person with a developmental disability resides, participation in community services is not the appropriate placement for such person because such person is presently likely to cause harm to self or others;
- (b) provide either directly or by subcontract, services to persons with a developmental disability, including, but not limited to, eligibility determination; explanation of available services and service providers; case management services, if requested; communications accommodations, if necessary; assistance in establishing new providers, if requested; and advocacy for participation in community services;
- (c) organize a council of community members, consumers or their family members or guardians, and community service providers, composed of a majority of consumers or their family members or guardians who shall meet not less than quarterly to address systems issues, including, but not limited to, planning and implementation of services; and develop and implement a method by which consumer complaints, interagency and other intrasystem disputes are resolved;
- (d) provide, directly or by subcontract, information about affiliate and referral services to persons with a developmental disability whose particular needs can be met in the community or through government; and
- (e) ensure that affiliates have the option to review referrals and waiting lists on a periodic basis to contact potential consumers with information concerning their services.

  History: L. 1995, ch. 234, S. 5; Jan. 1, 1996.

Statute #39-1806

Chapter 39.--MENTALLY ILL, INCAPACITATED AND DEPENDENT PERSONS; SOCIAL WELFARE Article 18.--DEVELOPMENTAL DISABILITIES REFORM

Title Establishment of system of funding, quality assurance and contracting.

To carry out the provisions of this act, the secretary shall establish after consultation with representatives of community developmental disability organizations and affiliates thereof, and families and consumer advocates:

(a) A system of adequate and reasonable funding or reimbursement for the delivery of community services that:

- (1) For persons moving from institutions into the community, directs funding to follow in an amount not less than that which is required to reimburse community service providers for services as set forth in such person's plan for transfer from the institution to community services including expenses of relocation and initiation of services;
  - (2) consolidates federal and state funding sources;
- (3) requires an independent, profession review of the rate structures on a biennial basis resulting in a recommendation to the legislature regarding rate adjustments. Such recommendation shall be adequate to support: (A) A system of employee compensation competitive with local conditions; (B) training and technical support to attract and retain qualified employees; (C) a quality assurance process which is responsive to consumers' needs and which maintains the standards of quality service; (D) risk management and insurance costs; and (E) program management and coordination responsibilities;
- (b) a system of quality assurance based on standards set out in rules and regulations adopted by the secretary which insures effective service delivery, fiscal accountability and networking cooperation and which allows community service providers to present evidence of attainment of national accreditation or compliance with state or federal laws or rules and regulations, or both, to indicate compliance with such standards; and
  - (c) a system of contracting that:
- (1) Authorizes open and equitable negotiation between contracting parties or their designated agent or agents;
- (2) authorizes mediation by an independent entity chosen by the parties to the contract in the event of contract disputes and if mediation is not completed prior to the end of any existing contract, authorizes an extension of time of such existing contract or entering into a temporary contract;
- (3) requires achievement and maintenance of community services standards by community service providers;
- (4) includes compensation for community services, which may be specialized in nature, and which meet the individualized needs of persons with developmental disabilities for community services and communications accommodations related thereto; and
- (5) requires community developmental disability organizations to contract with those affiliates from whom a person with a developmental disability chooses services.

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History: L. 1995, ch. 234, S. 6; Jan. 1, 1996.

Statute #39-1807

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Chapter 39.--MENTALLY ILL, INCAPACITATED AND DEPENDENT PERSONS; SOCIAL WELFARE Article 18.--DEVELOPMENTAL DISABILITIES REFORM

Title Failure of community service provider to comply with requirements, standards or laws; inspection and review of operations by secretary; mediation; written plan of correction; civil penalties; emergency orders.

Whenever the secretary finds a community service provider has failed to comply with the requirements, standards or rules and regulations established pursuant to this act or any other provision of law, the secretary shall have the power to inspect and review the operations of the community service provider and identify deficiencies. The secretary and such community provider shall choose an independent entity to mediate any dispute regarding the secretary's finding that such community service provider has failed to comply with such requirements, standards or rules and regulations and the secretary's identified deficiencies. If such mediation is not able to resolve any such dispute and the secretary finds that the community service provider has still failed to comply with such requirements, standards or rules and regulations, the secretary shall require a written plan of correction. If, after notice and an opportunity for hearing pursuant to the Kansas administrative procedure act, the secretary finds the community service provider has failed to carry out the plan of correction within 30 days of the submission of the plan of correction, the secretary may assess a civil penalty in an amount not to exceed \$125 per day for each day the provider has failed to carry out the plan of correction. The secretary may extend the time in which the provider has to comply with the plan of correction for good cause. The secretary may require the community service provider to maintain consumers in place until alternative community services can be secured with reasonable compensation for actual costs and to remove the designation as community service provider, except that in the event the secretary makes written findings of fact that there appears to be a situation involving imminent danger to the health, safety or welfare of the person with a developmental disability unless immediate action is taken, the secretary may issue an emergency order. Such emergency order shall be subject to the procedures under K.S.A. 77-536 and amendments thereto. Upon entry of such an emergency order, the secretary shall promptly notify the community service provider subject to the order: (1) The content of the order; (2) the reasons therefor; and (3) that upon written request within 15 days after service of the order, the matter will be set for a hearing which shall be conducted in accordance with the provisions of the Kansas administrative procedure act. If no hearing is requested and none is ordered by the secretary, the order will remain in effect until it is modified or vacated by the secretary. If a hearing is requested or ordered, the secretary, after notice of and opportunity for hearing to the community service provider subject to the order, by written findings of fact and conclusions of law, shall vacate, modify or make permanent the order. History: L. 1995, ch. 234, S. 7; Jan. 1, 1996.

#### Statute #39-1808

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Chapter 39.--MENTALLY ILL, INCAPACITATED AND DEPENDENT PERSONS; SOCIAL WELFARE Article 18.--DEVELOPMENTAL DISABILITIES REFORM Title Act does not require community service provider to make certain expenditures.

Nothing in this act shall authorize the secretary to require a community service provider to make expenditures not in compliance with contracts or agreements entered into by the governing board of such provider.

History: L. 1995, ch. 234, S. 8; Jan. 1, 1996.

#### Statute #39-1809

Chapter 39.--MENTALLY ILL, INCAPACITATED AND DEPENDENT PERSONS; SOCIAL WELFARE Article 18.--DEVELOPMENTAL DISABILITIES REFORM Title Act does not create any entitlement to services.

Nothing in this act shall create any entitlement to services.

History: L. 1995, ch. 234, S. 9; Jan. 1, 1996.

#### Statute #39-1810

Chapter 39.--MENTALLY ILL, INCAPACITATED AND DEPENDENT PERSONS; SOCIAL WELFARE Article 18.--DEVELOPMENTAL DISABILITIES REFORM Title Rules and regulations.

The secretary may adopt rules and regulations to carry out the provisions of this act.
History: L. 1995, ch. 234, S. 10; Jan. 1, 1996.



## DR. HAROLD J. SAUDER DR. BARRY WESSELOWSKI

Podiatrist Podiatrist

FAMILY PODIATRY, P.A.
P.O. Box 372 209 N. 6th, Independence, Kansas 67301

Telephone: (316) 331-1840

2-21-98

Jerry Slaughter, Executive Director Kansas Medical Society 623 S W 10th Ave Topeka Kansas 66612-1627

Dear Jerry,

Reference: Your Feb. 19, 1998 statement before the Senate Public Health and Welfare Committee.

I have served on the Kansas Board of Healing Arts as the Podiatric board member from 1976 to 1988. I am presently serving my second year of a four year term in that same position.

Your statement regarding the Podiatrists position on  ${\tt SB655}$  is totally incorrect.

We have intentionally communicated our position to the senate committee through one source, KPMA Lobbist Shelby Smith, so that there would be no mistake or misunderstanding of our position.

Our position now and has always been as stated in my January 23, 1998 letter
1. We are very satisfied with the

1. We are very satisfied with the present function and structure of the Board of Healing Arts.

2. If a new Board of Medical Professions is established, Podiatrists should be included because of our close and shared relationship with M.D.'s and D.O.'s in providing health care to our patients.

I hope you will correct your mistake of our position of this very serious matter.

Sincerely,

Harold J. Sauder, D.P.M.

Member Board of Healing Arts

cc: Tim Emert, Senate Majority Leader Shelby Smith (Please distribute to all Senate Committee Mc Dr David Laha, President KPMA

Senate Public Health & Welfare Date: 2 - 23 - 9 8
Attachment No.