Date

MINUTES OF THE SENATE PUBLIC HEALTH AND WELFARE COMMITTEE

The meeting was called to order by Chairman James Barnett at 1:40 P.M. on January 11, 2007 in Room 231-N of the Capitol.

All members were present except:

Pete Brungardt Vicki Schmidt

Committee staff present:

Emalene Correll, Kansas Legislative Research Department Terri Weber, Kansas Legislative Research Department Jim Wilson, Office of Revisor of Statutes Nabuko Folmsbee, Office of Revisor of Statutes Morgan Dreyer, Committee Secretary

Conferees appearing before the committee:

Lawrence Buening - Executive Director, Kansas State Board of Healing Arts Mary Blubaugh - Executive Administrator, Board of Nursing Sheldon Weisgrau - Senior Policy Analyst, Kansas Health Institute Barbara Langer - Associate Professor, KU Med.

Others attending:

See attached list.

Upon calling the meeting to order, Chairman Barnett asked that the Committee review the Minutes for January 10, 2007 for approval at the end of the meeting.

Chairman Barnett then asked for the introduction of bills. Lawrence Buening, Executive Director, Kansas Board of Healing Arts introduced a proposal concerning the state board of healing arts; fingerprinting and criminal history record checks. A handout of the bill draft was passed out to the Committee. A copy of his bill draft is (Attachment 1) attached hereto and incorporated into the Minutes as referenced.

<u>Senator Palmer motioned to adopt the introduced bill.</u> <u>Senator Journey seconded the motion and the motion carried.</u>

The Chair then called upon Mary Blubaugh, Executive Administration, Board of Nursing, who introduced four bills to the Committee. The four bills introduced present proposals concerning the following topics.

- 1. Fingerprints no statute number
- 2. Composition of the Board of Nursing: 741106
- 3. Elimination of graduate status: 651124
- 4. Four statutes: RN/LPN:651116, 651132, 651155, 651205

The drafts of these bills were not available at the time of the meeting.

Senator Jordan motioned to adopt the introduced bill. Senator Palmer seconded the motion and the motion carried.

Presentation on Who are the Uninsured in Kansas

Chairman Barnett then called upon Sheldon Weisgrau, Senior Policy Analyst, Kansas Health Institute who presented information and statistics on the uninsured in Kansas. Highlights of his presentation included:

- 1. Why is Health Insurance Important?
- 2. Kansans with Health Insurance Have Better Access to Services and are Healthier than Uninsured Kansans
- 3. Sources of Health Insurance for Kansans, 2004-2005
- 4. The Cost of Health Insurance is Rising Rapidly

CONTINUATION SHEET

MINUTES OF THE Senate Public Health and Welfare Committee at 1:30 P.M. on January 11, 2007 in Room 231-N of the Capitol.

- 5. The percentage of Employers that Offer Health Insurance has Declined
- 6. The Uninsurance Rate in Kansas is Lower than the U.S. Rate
- 7. Problems Persist Despite the Low Uninsurance Rate in Kansas
- 8. Working Age Kansas Adults are Uninsured at a Higher Rate than Children
- 9. The Number and Percentage of Uninsured Kansas Children Increased in 2004-2005 After Several Years of Decline
- 10. Young Adult Kansans are Uninsured at a Higher Rate than Older Adults
- 11. Young Adults Comprise One-Third of Uninsured Working Age Kansans, 2004-2005
- 12. Racial/Ethnic Minority Kansans are More Likely to be Uninsured than Non-Hispanic Whites
- 13. Racial/Ethnic Minority Kansans are Uninsured at Rates Disproportionate to Their Presence in the Population, 2004-2005
- 14. The Uninsurance Rate is Higher at Lower Levels of Household Income
- 15. The Uninsurance Rate is Higher at Higher Poverty Levels
- 16. Percent of County Population Without Health Insurance Coverage, 2000

A copy of his presentation is (Attachment 2) attached hereto and incorporated into the Minutes as referenced.

The Chair asked for questions or comments from the Committee. Questions came from Senators Palmer, Barnett, Haley and Wagle regarding, definitions, criteria, why is such a large number of children uninsured, why young people choose to not be uninsured, rates of the Hispanic population uninsured, Healthwave, insurance coverage at the Emergency Room.

Presentation on Uninsured Kansans: A Demographic Profile

The Chairman then called upon Barbara Langer, Associate Professor, KU Med. Who presented graphs and statistics on the uninsured demographic profiles in Kansas. Highlights of his presentation included:

- 1. Research Grants Support
- 2. 2000 State Planning Grant Project Objectives
- 3. Sample Design
- 4. SPG Regions in Kansans
- 5. The Survey Process
- 6. Percentage of Kansans Residents Who Do Not Have Health Insurance
- 7. Uninsurance Kansans under Age 65 by Region
- 8. Uninsured Adults by Region
- 9. Uninsured Children by Region
- 10. Uninsured Kansans under Age 65, Statewide and by Region, Percent of Total # of Uninsured Kansans in Each Region
- 11. Uninsured Kansans Statewide and By Region, with Population Estimates
- 12. Length of Time Without Health Coverage, Uninsured Kansans under Age 65
- 13. Informant Counties
- 14. Primary Themes
- 15. The Uninsured Population
- 16. Uninsured Kansans under Age 65 by Specific Age Category
- 17. Uninsured Kansans under Age 65 by Race and Ethnicity, Distribution and Population Size
- 18. Uninsured Kansans under Age 65 by Income as a Percent of FPL, and Distribution of Uninsured
- 19. Uninsured Kansans Age 18-64 by Employment Status and Distribution of Uninsured
- 20. Uninsured Working Adults by Income Level
- 21. Uninsured Full-Time Employed Kansans Age 18-64 by size of Firm
- 22. Uninsured Working Adults by Industry Type
- 23. Uninsured Working Adults: Employer-Based Health Insurance Coverage Offers
- 24. Offers of Employment-Based Health Insurance Coverage: Family Coverage vs. Employee-Only Coverage
- 25. Health Insurance Offers by Firm Type
- 26. Percent of Employed Kansans Age 18-64 Who Report that Their Employer Offers Health Insurance

CONTINUATION SHEET

MINUTES OF THE Senate Public Health and Welfare Committee at 1:30 P.M. on January 11, 2007 in Room 231-N of the Capitol.

Coverage

- 27. Enrollment of Employed Kansans Age 18-64 Who Are Eligible for Employment-Based Insurance
- 28. Most Uninsured Kansans have a Linkage to the Workforce
- 29. Small Business Health Insurance Survey Findings
- 30. Rising Cost of Health Insurance
- 31. Impact on Small Employers
- 32. Firms Offering Health Insurance
- 33. Firms Not Offering Health Insurance

A copy of her presentation is (Attachment 3) attached hereto and incorporated into the Minutes as referenced.

The Chair asked for questions or comments from the Committee. Questions came from Senators Palmer and Barnett regarding, cost vs. coverage, less quality coverage, individual market study, small businesses, pre-tax dollars.

Introduction of Bills

Chairman Barnett thanked his guest speakers and proceeded to introduce a bill for Senator Vratil who was unable to attend the Committee meeting. The proposal concerns the Cleveland College of Chiropractic Medicine.

The draft of this bill was not available at the time of the meeting.

<u>Senator Jordan motioned to adopt the introduced bill.</u> <u>Senator Palmer seconded the motion and the motion carried.</u>

The Chair announced that the final item on the agenda was for the Minutes to be approved for the Senate Public Health and Welfare Committee for January 10, 2007.

The motion was made by Senator Haley to approve the Minutes. It was seconded by Senator Palmer and the motion carried.

As there was no further business, the meeting was adjourned at 2:25p.m.

The next meeting is scheduled for Tuesday, January 16, 2007

Senate Public Health and Welfare Committee | San | N | 2007 | Please Sign In

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Senate Public Health and Welfare Committee

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Carolyn M. Iddendon	Ks St No Casen
Bar Jangar	Kumc
John Kiethaber	Kumc Ks. Chiropractic Assn
Anthony Wellen	KS HITH INSTITUTE
Jim Milean	ICS Health Institute
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2007

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SENATE BILL NO. ____

Ву

Lawrence Buening Exe. Dir. KS State Board Healing

AN ACT concerning the state board of healing arts; fingerprinting and criminal history record checks.

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

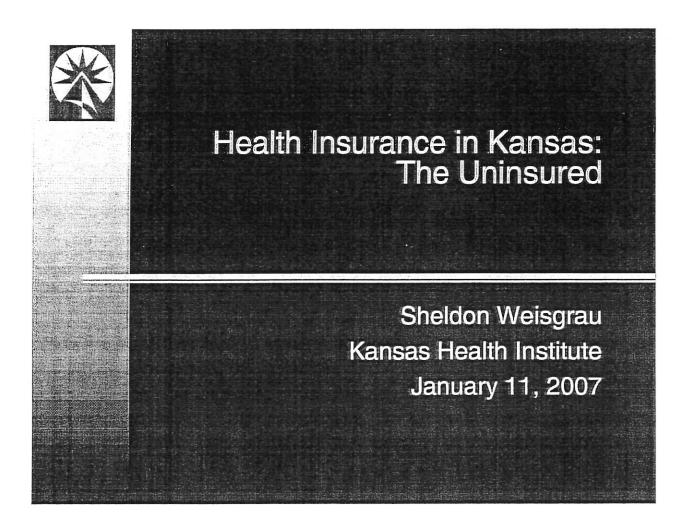
Section 1. (a) As part of an application for or reinstatement of any license, registration, permit or certificate or in connection with any investigation of any holder of a license, registration, permit or certificate, the state board of healing arts may require a person to be fingerprinted and submit to a state and national criminal history record check. The fingerprints shall be used to identify the person and to determine whether the person has a record of criminal history in this state or other jurisdiction. The state board of healing arts is authorized to submit the fingerprints to the Kansas bureau of investigation and the federal bureau of investigation for a state and national criminal history record check. The state board of healing arts may use the information obtained from fingerprinting and the criminal history for purposes of verifying the identification of the person and in the official determination of the qualifications and fitness of the person to be issued or to maintain a license, registration, permit or certificate.

- (b) Local and state law enforcement officers and agencies shall assist the state board of healing arts in taking and processing of fingerprints of applicants for and holders of any license, registration, permit or certificate and shall release all records of adult and juvenile convictions, adjudications, expungements and nonconvictions to the state board of healing arts.
- (c) The state board of healing arts may fix and collect a fee as may be required by the board in an amount necessary to reimburse the board for the cost of fingerprinting and the criminal history

Senate Public Health and Welfare committee Attachment #1 January 11, 2007

record check. Any moneys collected under this subsection shall be deposited in the state treasury and credited to the healing arts fee fund.

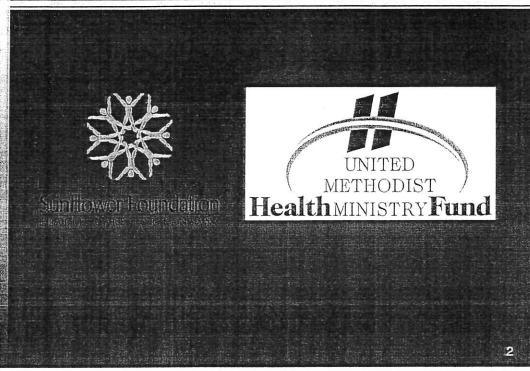
Sec. 2. This act shall take effect and be in force from and after its publication in the statute book.



Senate Public Health and Welfare Attachment #2 January 11, 2007



Acknowledgements





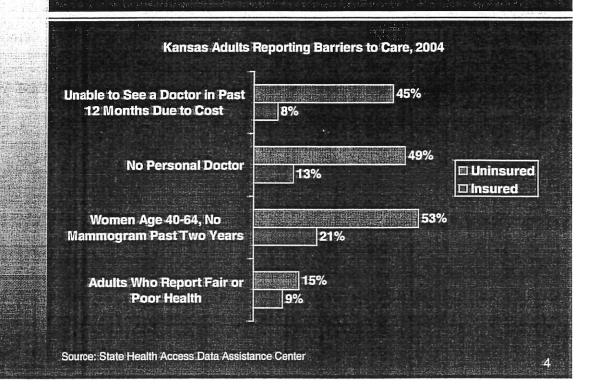
Why is Health Insurance Important?

- Health insurance provides protection from the financial burden of costly illness or injury
- Kansans with health insurance have better access to services and are healthier than uninsured Kansans

3

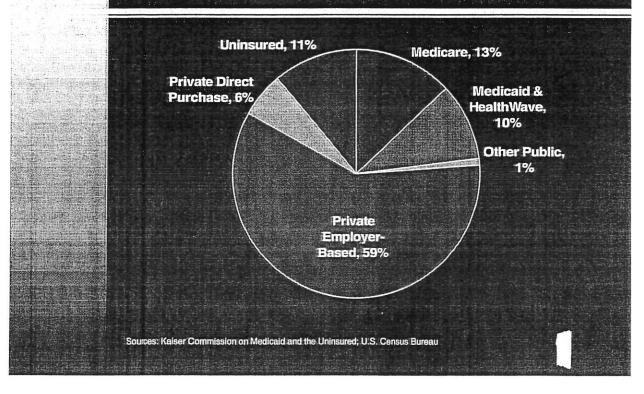


Kansans with Health Insurance Have Better Access to Services and are Healthier than Uninsured Kansans



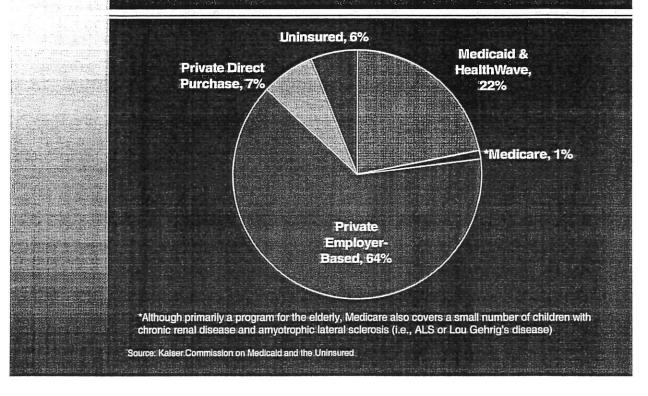


Sources of Health Insurance for Kansans, 2004-2005



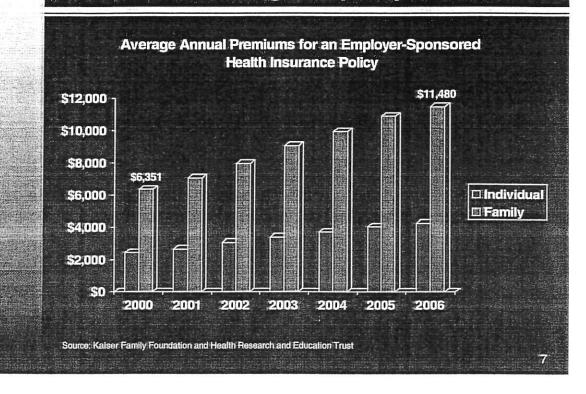


Sources of Health Insurance for Kansas Children, 2004-2005





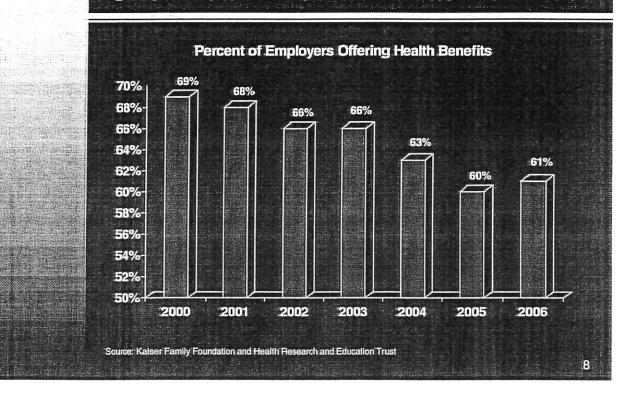
The Cost of Health Insurance is Rising Rapidly





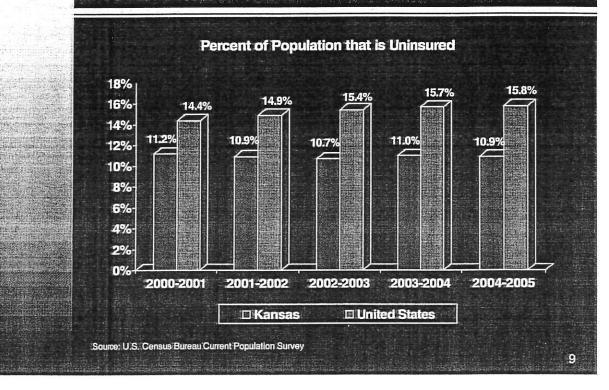
(1/1/

The Percentage of Employers that Offer Health Insurance has Declined





The Uninsurance Rate in Kansas is Lower than the U.S. Rate





Problems Persist Despite the Low Uninsurance Rate in Kansas

- The number and rate of uninsured Kansas children increased in 2004-2005
 - 71% of uninsured children are eligible for Medicaid or HealthWave
- Young adult Kansans are uninsured at relatively high rates
- Racial/ethnic minorities are more likely to be uninsured than non-Hispanic White Kansans

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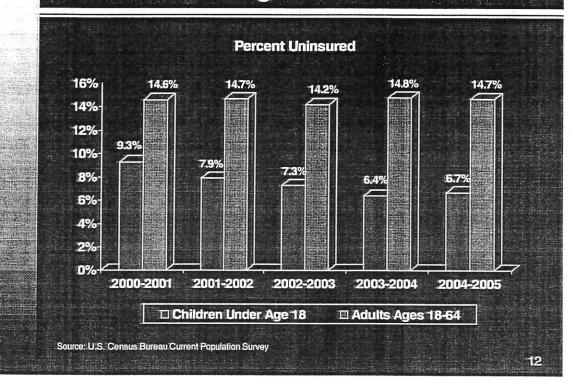
Problems Persist Despite the Low Uninsurance Rate in Kansas (continued)

- Low income Kansans and those who live in poverty are more likely to be uninsured than higher income Kansans
- Most of the counties with the highest uninsurance rates are located in southwest Kansas
- There are about 300,000 uninsured Kansans

11



Working Age Kansas Adults are Uninsured at a Higher Rate than Children







The Number and Percentage of Uninsured Kansas Children Increased in 2004-2005 After Several Years of Decline

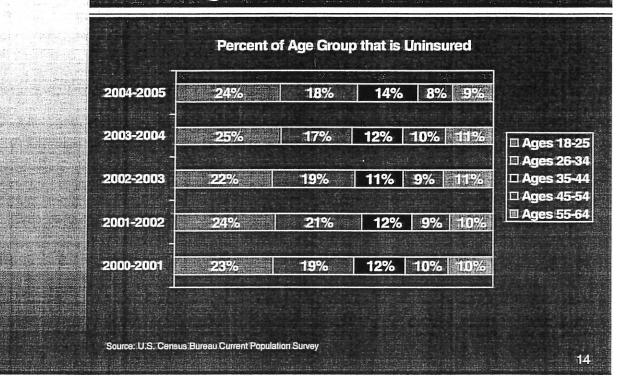
	2000- 2001	2001- 2002	2002- 2003	2003- 2004	2004- 2005
Number of uninsured children	61,350	53,059	51,319	44,617	46,115
Percentage of children who are uninsured	9.3%	7.9%	7.3%	6.4%	6.7%

Source: U.S. Census Bureau Current Population Survey

13

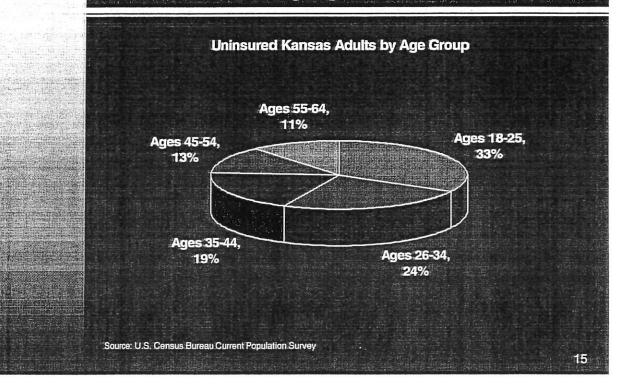


Young Adult Kansans are Uninsured at a Higher Rate than Older Adults



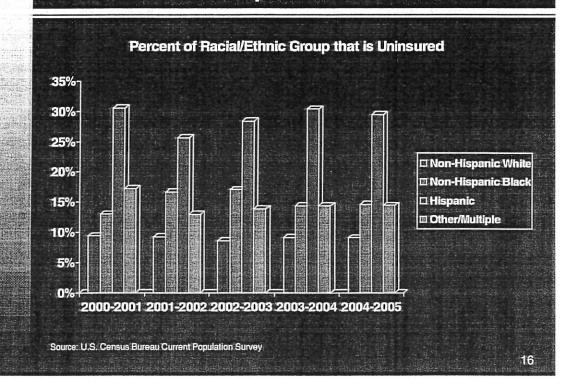


Young Adults Comprise One-Third of Uninsured Working Age Kansans, 2004-2005



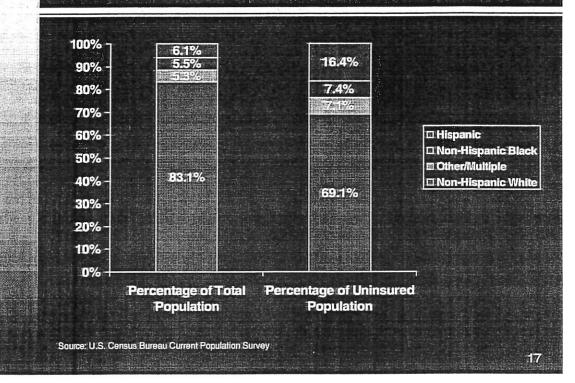


Racial/Ethnic Minority Kansans are More Likely to be Uninsured than Non-Hispanic Whites



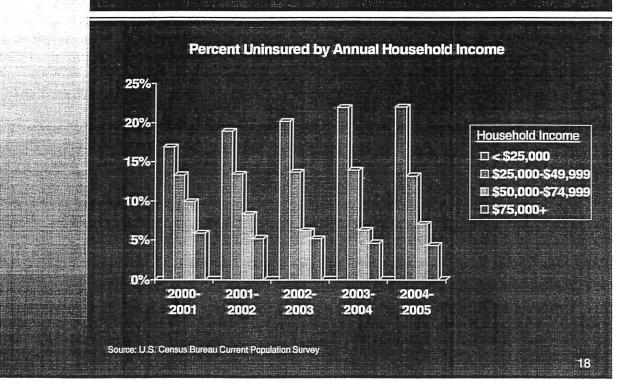


Racial/Ethnic Minority Kansans are Uninsured at Rates Disproportionate to Their Presence in the Population, 2004-2005



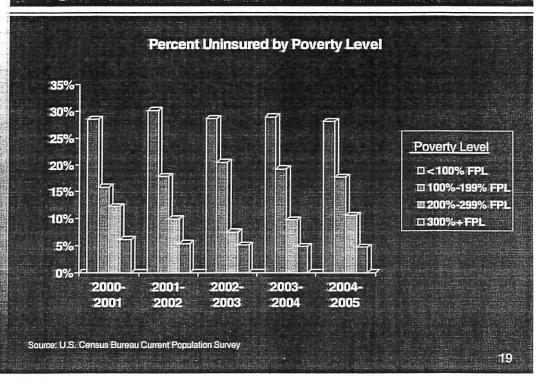


The Uninsurance Rate is Higher at Lower Levels of Household Income



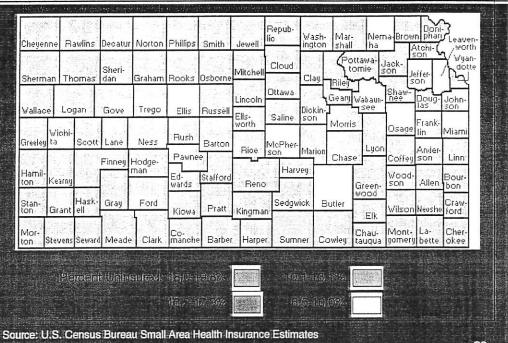


The Uninsurance Rate is Higher at Higher Poverty Levels

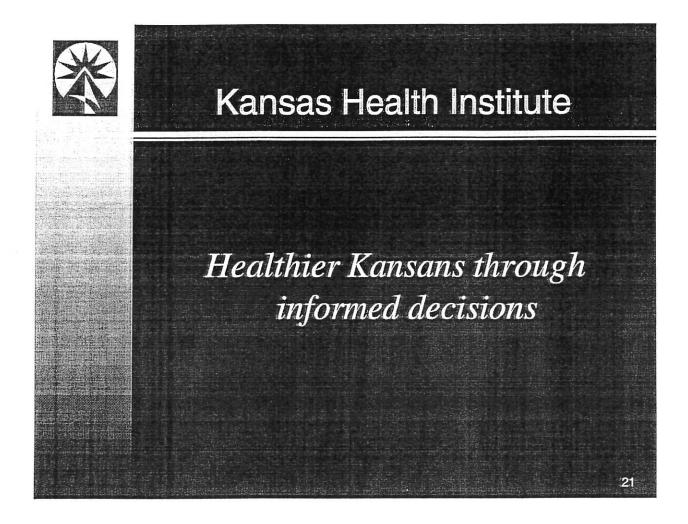


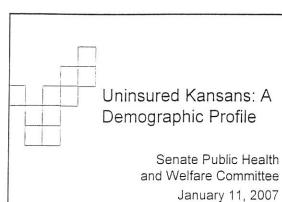


Percent of County Population Without Health Insurance Coverage, 2000



20





Research Grants Support

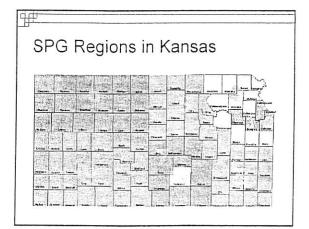
- 2000 State Planning Grant awarded to the Kansas Insurance Department
- 2003 State Planning Grant Supplement to KID
- 2004 Commonwealth Fund/Sunflower Foundation/United Methodist Health Ministries Fund to KUMC
- 2004 State Planning Grant Pilot Project to KID
- 2005 State Planning Grant Supplement to KID

2000 STATE PLANNING GRANT PROJECT OBJECTIVES

- Identify policy-significant characteristics of uninsured Kansans
- Use this information to develop alternative strategies for access to affordable health coverage
- Assess which of these strategies are most likely to be effective among which subpopulations of the uninsured
- Estimate likely enrollment and public costs under alternative strategies

Sample Design

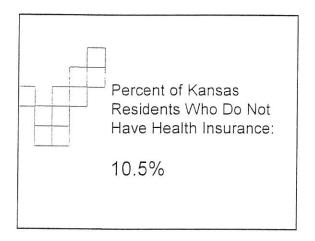
- Target: 8,000 interviews
- State divided into 10 regions
- Oversampled for Blacks, Hispanics, lowincome households
- ± .6 percentage points at the 95% confidence interval for statewide estimates

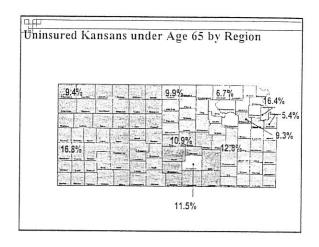


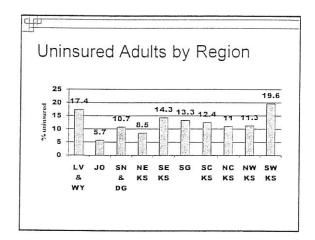
The Survey Process

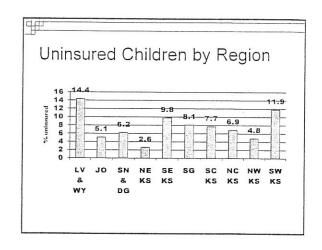
- Conducted from March-June 2001
- Interviewed 8,004 households
- Data on 22,694 individuals
- Completed interviews in every county in the state
- Conducted in both English and Spanish

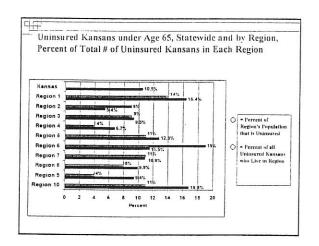
senate Public Health and Welfare Attachment #3 committee January 11, 2007



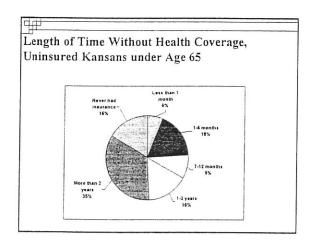


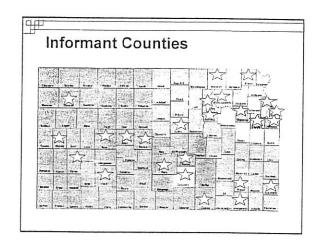






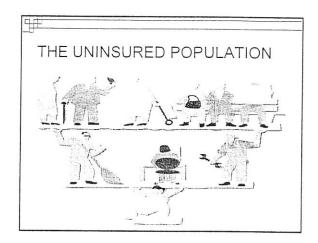
opuiati	on Estimates				
	Percent of Region's Population that is Uninsured	Number of Uninsured People- in Region*	Percent of all Uninsured Kansans who Live in Region*		
Kansas	10.5%	244,880	100%		
Region 1	16.45-	33,011	14%		
Region 2	5,41-	21,925	9%		
Region 3	9.3*•	22.180	9:-		
Region 4	6.7*-	10.402	42.		
Region 5	12.x*.	27.790	11*-		
Region 6	11.5**	46,149	19*.		
Region 7	10.95-	26,354	111-		
Region 8	9.91.	19,347	x		
Regun 9	9.4%	10,437	45.		
Region III	16,1:.	27,623	115.		

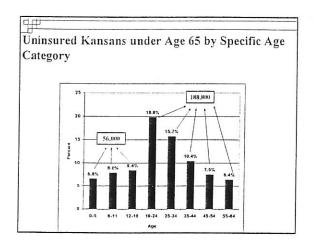


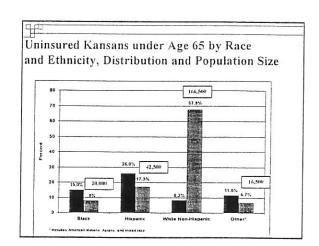


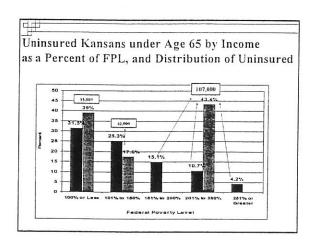
Primary Themes

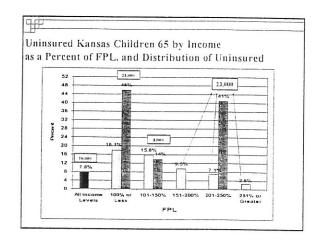
- Holes in the safety net
- Downward spiral into disaster
- Gamble with their health
- Bargain for healthcare
- Value health insurance

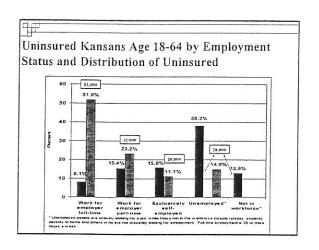


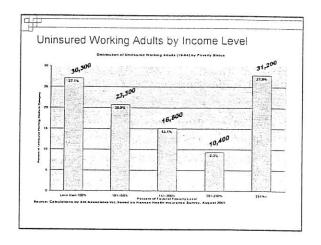


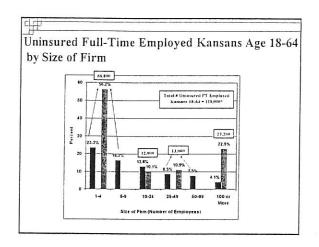


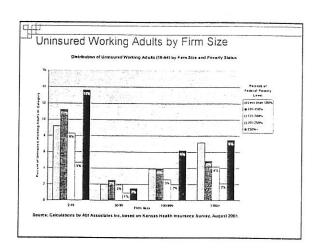


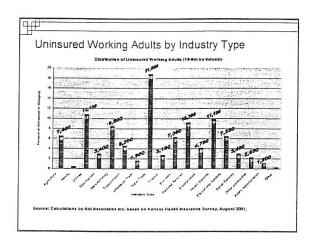


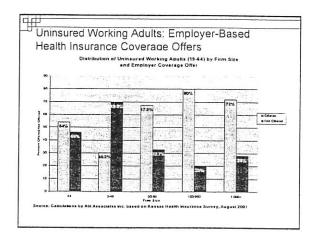


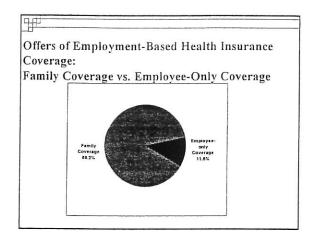


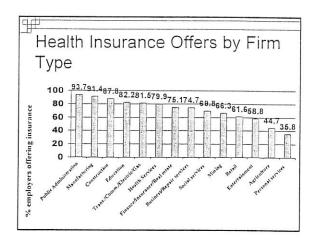


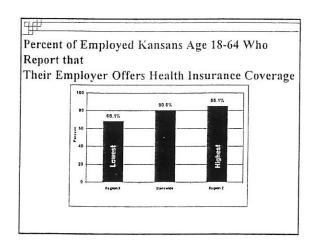


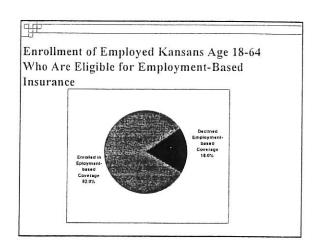


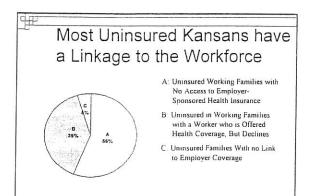






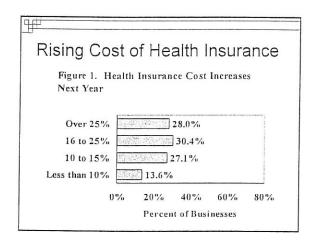


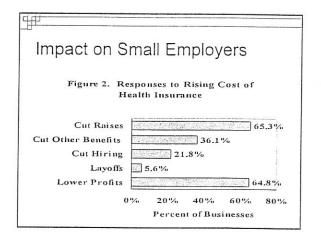




Survey Finding	75	
<u>carrer</u> mann	Offered	Did Not Offer
# Employees *	15.3	7.8
Avg FT Salary *	\$26,788	\$22,549
Avg Age Employee	41.1	41.2
Female %	45.3	44.1
Hispanic %	4.5	7.3
African-American %	2.4	2.5
Short-term %	25.0	31.2
College Req. % *	27.4	9.4
HS not Reg. % *	9.2	20.6

ad





Firms Offering Health Insurance

- 51.4% of small employers pay full premium for employee
- 95% of small employers pay more than \$100/employee/month
- 75% of employers indicate that the employee premium share is \$100 or less per month

Firms Not Offering Health Insurance

- 68% said that employers should offer
- 66% indicated that cost was the main reason they did not offer
- 36% would pay up to \$100/month/employee for health insurance