

Approved: February 15, 2005

Date

## MINUTES OF THE HOUSE HEALTH AND HUMAN SERVICES COMMITTEE

The meeting was called to order by Chairman Jim Morrison at 1:34 P.M. on February 14, 2005, in Room 526-S of the Capitol.

### Committee members absent:

Representative Judy Showalter- excused

Representative Nancy Kirk- excused

### Committee staff present:

Melissa Calderwood, Kansas Legislative Research Department

Mary Galligan, Kansas Legislative Research Department

Renae Jefferies, Revisor of Statutes' Office

Gary Deeter, Committee Secretary

### Conferees appearing before the committee:

Debra Billingsley, Executive Secretary, Kansas State Board of Pharmacy

Sharon Green, President, State Board of Examiners in Optometry

Gary Robbins, Executive Director, Kansas Optometric Association

### Others attending:

See attached list.

The minutes for February 9 and 10 were approved.

Staff gave a briefing on **HB 2156**, saying that the registration of pharmacy technicians was a recent development and that the bill was intended to streamline a cumbersome process of the Board in revoking a member's registration.

The Chair opened the hearing on **HB 2156**.

Debra Billingsley, Executive Secretary, Kansas State Board of Pharmacy, spoke a proponent, saying that of the 2700 pharmacy technicians registered since October 2004, revocation was indicated for six technicians who diverted drugs from their employers, but that the statute's current language required an emergency meeting of the Board to do so. ([Attachment 1](#)) Answering a question, Ms. Billingsley said the bill made only one change in the statute.

The hearing was closed on **HB 2156**.

A motion was made, seconded and passed to work bill.

A motion was made and seconded to pass the bill favorably and place it on the Consent Calendar. The motion passed unanimously.

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Staff gave a briefing on [HB 2336](#), citing previous changes in the optometry licensure statutes: biennial renewal, creating a new category of practice, and raising the statutory maximum for fees. She said the bill creates a level licensure structure, requiring that all optometrists must meet all four levels of practice, including therapeutic licensure by May 31, 2007, and glaucoma licensure by May 31, 2009.

The Chair opened the hearing on [HB 2336](#).

Sharon Green, President, State Board of Examiners in Optometry, spoke as a proponent of the bill. ([Attachment 2](#)) She said that, as a doctor of optometry, she supported level licensure, a standard of practice current in five other states and being considered in two more. She observed that the present four levels of licensure have become an administrative nightmare—confusing to insurance companies and difficult to for the Board to confirm a doctor’s status. She noted that of the 469 practicing optometrists in Kansas, 98% held a therapeutic license and most were working to upgrade their licenses to the 4<sup>th</sup> level. She stated that the bill would have no economic impact on the state general fund and would have limited impact on optometrists.

Gary Robbins, Executive Director, Kansas Optometric Association, testified in favor of the bill, saying that he continually encouraged members to upgrade their licenses. ([Attachment 3](#)) He also recommended an amendment to the bill updating the definition of oral drugs, explaining that new categories of drugs are regularly brought to market, requiring frequent amendments to the statute. He said his proposed amendment, developed in collaboration and agreement with the Kansas Medical Society and the Kansas State Ophthalmologist Society, would provide flexibility in dealing with new drugs. He also noted that the inter-professional advisory committee would become active again through the bill and its amendment.

Committee members’ questions elicited the following responses from conferees:

Amy Campbell, Executive Director, Kansas State Ophthalmologist Society, confirmed the Society’s agreement on the amendment, saying it was a result of thorough discussion and solid consensus. She also commented that the bill and amendment would revitalize the inter-professional advisory committee and assure that Kansans have a proper standard of care.

The chair commented that the bill may cause some optometrists to lose their licenses, but that the bill will improve patient care, noting that the bill does not expand the scope of practice, but requires that patients be treated by properly trained individuals.

The hearing on [HB 2336](#) was closed.

A motion was made, seconded, and passed to work the bill and to add the amendments as proposed by Mr. Robbins.

During discussion on the motion, Dr. Green said that the therapeutic level required 100 hours of course work and the glaucoma level involved a two-year management period, but that optometrists could meet the

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requirements in the time allotted.

A motion was made and seconded to pass out the bill favorably as amended.

During discussion, a member stated that the bill appeared to be good for the people of Kansas. Staff commented that the new sections in the bill were not referenced and needed clarification.

The motion passed unanimously.

Staff provided a briefing on three bills:

**HB 2178**—the bill amends the Senior Care Act to include programs for in-home senior care services. Ms. Calderwood noted that the list of consolidated services did not include a definition for preventative health-care services or physical training activities.

**HB 2208**—enacts a new statute creating a 13-member task force, eight from the Kansas Department of Health and Environment (KDHE), four legislators, and one member appointed by the Governor, with KDHE designating the chair and vice-chair of the task force and providing staffing. The bill requires the task force to hold at least three public meetings in various locations in the state and to prepare a report to be submitted to the Governor and the legislature on January 15, 2007. Ms. Galligan stated that on page 1, the term “local development agency” is not defined and is not used elsewhere in Kansas statutes; that “communities with a high incidence of obesity” is not established; that on page 2, lines 2 and 7, the word “board” is used rather than the term “task force”; that continuing duties of the task force are not given; that there is no ending date for the task force nor any ongoing responsibilities; and that the language regarding health insurance rules on page 3, line 6, is not clearly referenced. Ms. Galligan also noted that there are currently several other bills on obesity.

**HB 2330**—the bill amends the Radiologic Technologist Practice Act by delaying the implementation of the act until October 1, 2005, and by acknowledging various specialty titles within the scope of licensure. Ron Hein, representing the Kansas Society of Radiologic Technologists, said the term was an umbrella that includes several titles; the bill did not prohibit the designation of technician.

A motion was made, seconded and passed with a modicum of opposition to work **HB 2204**.

A motion was made and seconded to pass the bill out of committee favorably.

An extended discussion ensued. Members made the following comments:

A short-term benefit of the bill will be to encourage physical activity; a longer-term benefit will be to keep more Kansans physically active, thus saving on health-care costs.

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While the bill has some merit, there are other things that are more deserving of an exemption to promote fitness and that would benefit more low-income Kansans.

The argument of promoting health and fitness with a sales-tax exemption for membership fees appears specious on its face, especially since most affluent members would not be motivated by the minimal savings.

The problem of obese children was not acceptably addressed by conferees, since most children do not go to health clubs.

An exemption for health clubs is a matter of fairness, since the alternative—YMCA—is not-for-profit and tax-exempt.

As a policy statement, the committee can endorse the bill that exercise is a value to promote.

By passing this bill, the committee makes a statement to encourage physical activity; further, it seems inappropriate for the state to tax physical activity.

This bill as constructed will not increase physical exercise.

The reason the bill was referred to this committee was for us to decide if it has the potential for good public policy. We should support a venture such as this.

By a vote of 11 to 7, the motion passed.

The meeting was adjourned at 2:47 p.m. The next meeting is scheduled for Tuesday, February 15, 2005.