

## MINUTES OF THE HOUSE HEALTH AND HUMAN SERVICES COMMITTEE

The meeting was called to order by Chairman Jim Morrison at 2:00 p.m. on March 17, 2004, in Room 526-S of the Capitol.

All members were present except:

Representative Brenda Landwehr- excused  
Representative Joe McLeland - excused

Committee staff present:

Dr. William Wolff, Legislative Research Department  
Rena Jefferies, Office of Revisor of Statutes  
Gary Deeter, Secretary

Conferees appearing before the committee:

Lawrence Buening, Executive Director, Kansas Board of Healing Arts  
Chris Collins, Director of Government Affairs, Kansas Medical Society  
Elizabeth Phelps, Attorney, Osawatomie State Hospital  
Dr. James Owens, psychiatrist, Larned Mental Health Correctional Facility  
David Lake, Director, Board of Emergency Medical Services  
Tuck Duncan, Attorney, American Medical Response  
John Hayworth, Operations Director, American Medical Response

Others attending:

See Attached List.

The Minutes for the March 16 meeting were approved.

The Chair opened the hearing on [SB 426](#), which creates an institutional license under the Board of Healing Arts.

Lawrence Buening, Executive Director, Kansas Board of Healing Arts, testified as a proponent. ([Attachment 1](#)) He said current statutes for obtaining an institutional license require that an individual be a graduate of a medical school and be employed by a Kansas institution, stating that the bill increases the requirements to receive a license, but once those requirements are met, the bill allows continuous renewal. He commented that the institutional license is not a new concept; a similar idea has been around since 1969, when it was introduced as a fellowship license, and has been modified periodically. He said presently there are 18 licensees, 15 of these in state institutions, noting that the bill protects institutions from unnecessary turnover.

Chris Collins, Director of Government Affairs, Kansas Medical Society, testified in support of the bill. ([Attachment 2](#)) She said that institutional licenses have been expanded the past few years, and normally the Kansas Medical Society opposed such expansion. However, to ensure that doctors currently practicing are able to continue their practice, the Society is supporting the bill, especially since most of those licensed provide an important role in positions that are difficult to fill.

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Elizabeth Phelps, Attorney, Osawatomie State Hospital, representing Kansas Social and Rehabilitative Services, spoke as a proponent. ([Attachment 3](#)) She said state institutions had 3100 admissions in FY 2003, and adhering to a two-year limit for institutional licenses is an unnecessary disqualifier for those who are otherwise doing their jobs well.

Dr. James Owens, psychiatrist, Larned Mental Health Correctional Facility, spoke in support of the bill. ([Attachment 4](#)) He said he received an institutional license in 2001 from the Board of Healing Arts and served various state facilities as a contract employee and is presently providing psychiatric services at Ellsworth and Larned. He commented that even though he received outstanding evaluations, the institutional license has expired, which will force him to resign because there is no provision for renewal.

The Chair closed the hearing on [SB 426](#) and opened the hearing on [HB 2832](#), a bill addressing emergency medical services attendant temporary certification.

David Lake, Director, Board of Emergency Medical Services, explained the provisions of the bill. ([Attachment 5](#)) He said the bill amends the current statute regarding obtaining a Kansas EMT (emergency medical technician) certification, whether such certification is permanent or temporary, changing the length of time an applicant can apply to mirror the National Registry requirement of two years. He stated that the bill establishes criteria for a temporary license (valid for two years), eliminating the stipulation that an employer must request the temporary license; he noted that if an applicant is currently registered on the national registry or is licensed/certified in another state, the Board will grant a temporary license.

Tuck Duncan, Attorney, representing the American Medical Response, testified as an opponent. ([Attachment 6](#)) He said his company is the largest ambulance service in the United States and provides services in rural and urban areas of Kansas. He commented that the bill appears to be simple, but carries pitfalls for those coming from other states to work in Kansas by changing the educational requirements after the temporary license has expired. He quoted from the EMS Board's proposed rules and regulations, which will require that paramedics must have either an associate degree or have completed 15 college hours in designated areas. He said an EMT could have been practicing for years in another state, be listed on the national registry, but after the 2-year temporary license expired, would be considered unqualified to practice in Kansas unless he/she completed the educational requirements, noting that the national registry is presently recognized as sufficient for certification in 44 other states.

Mr. Duncan offered two proposals: The first was to kill the bill. The second was a suggested amendment to [K.S.A. 65-6129](#), (1) (A) (2) adding after the end of section (2) the words *or is registered for the clarification of attendant certificate for which application is made by the National Registry of emergency medical technician*.

Answering questions, Mr. Duncan commented that one motive for the new regulations might be to increase attendance at certain schools. He suggested a better way would be to create levels of credentialing. He replied to another question that raising the standards would further exacerbate the EMT

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shortage, concluding that if an out-of-state person was listed on the national registry, he or she should be eligible for reciprocal credentialing.

John Hayworth, Operations Director, American Medical Response, also spoke as an opponent. ([Attachment 7](#)) He began by answering a member's question about the impact of the bill on rural areas, saying that ambulance services and fire departments are competing for personnel and that many fire departments who rely on volunteers will find it difficult to certify volunteer staff if the educational requirements are raised. He said that validation by the national registry should be sufficient.

The Chair closed the hearing on **HB 2832**.

Staff Bill Wolff reviewed [SB 529](#), saying that the bill adds two groups who are authorized to approve the initiation of physical therapy treatment—licensed physician assistants and advanced registered nurse practitioners.

A motion was made to consider **SB 426** and to recommend it as favorable for passage. The motion was seconded and passed.

The meeting was adjourned at 2:54 p.m. The next meeting is scheduled for Thursday, March 18, 2004.