Approved:_	3-24-03
	Date

# MINUTES OF THE HOUSE HEALTH AND HUMAN SERVICES COMMITTEE.

The meeting was called to order by Chairperson Jim Morrison at 1:35 p.m. on March 18, 2003, in Room 243-N of the Capitol.

All members were present except Representatives Landwehr and Flaharty, both of whom were excused.

# Committee staff present:

Bill Wolff, Kansas Legislative Research Department Renae Jefferies, Kansas Revisor of Statutes' Office Gary Deeter, Committee Secretary

# Conferees appearing before the committee:

Senator Jim Barnett

Jim Murphy, Assistant to the Secretary, Kansas Department of Health and Environment Sally Finney, Executive Director, Kansas Public Health Association Christina Collins, Director of Government Affairs, Kansas Medical Society

Others attending: See Attached Guest List

Representative Bethell chaired the hearing on <u>SB 106</u>, welcoming Senator Jim Barnett, who spoke in support of the bill. (<u>Attachment 1</u>) He provided examples of the value of science-based data collection regarding health issues. Answering a question, he said Healthy People 2010 is a national initiative to improve the health of American citizens.

Jim Murphy, Assistant to the Secretary, Kansas Department of Health and Environment (KDHE), testified in support of the bill, saying the bill will encourage a collaborative response to serious health issues. (Attachment 2) He said Healthy People 2010, which Healthy Kansans 2010 will reflect, will enable the major health gains of the past decade to continue. Answering questions, Mr. Murphy said the \$165,000 cost would be absorbed within the KDHE budget and would likely open federal funding sources. He said Healthy Kansans 2000 identified trends ten years ago which, through the Bureau of Health Promotion, enabled the agency to tap federal funds to assist in meeting health needs. He said the initiative of the past decade caused KDHE to reorganize; the agency is now taking the lead in working with communities to deal with health issues. He noted that although Healthy Kansans 2010 can be accomplished by executive order, the program will have more significance if the legislature is also a stake-holder.

Paula Marmet, KDHE staff, gave specific results of Healthy Kansans 2000, through which KDHE coordinated strategies to assist health groups to work together .

Sally Finney, Executive Director, Kansas Public Health Association, spoke in support of the legislation, emphasizing the importance of science-based data for establishing priorities, developing strategies, and writing federal grants. (Attachment 3)

Chris Collins, Director of Government Affairs, Kansas Medical Society, related how helpful Healthy

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Kansans 2000 has been in providing accurate data in order to develop wise health-care policies; she commended KDHE for providing leadership for and coordination of health-care efforts. (Attachment 4)

The Chair asked Gina Poertner, Assistant to Senator Barnett, to share her experience with the Healthy People project; she stated that the data produced by KDHE through this project enable communities to identify and address local health issues and provide a definitive foundation for reports and grants.

The Chair closed the hearing on **SB 106**.

Staff Bill Wolff briefed members on three bills:

He said <u>Sub for SB 204</u>, an act preventing lead poisoning in children, extends the sunset provision of the bill from July 1, 2004, to July 1, 2010. Answering a question, he said that if the act is not extended, KDHE will lose federal funds.

Regarding <u>SB 151</u>, Dr. Wolff said the bill addresses two sections of statutes, one relating to county hospitals, the other to district hospitals, changing both areas of the statutes to allow joint enterprises for county and district hospitals, further allowing them to expend hospital funds toward these joint ventures. He noted that the term "majority control" by a hospital might be a sticking point.

Dr. Wolff explained <u>SB 225</u>, an act which moves physical therapists from registration to licensure. He identified key points of the bill:

Section 1 defines and protects not only the title of physical therapist, but the practice that a physical therapist performs. He noted the examples of words that have application to other practices—physiological (occupation therapists, chiropractors), manual therapy (chiropractors), massage (cosmetologists, barbers), fabrication (dentists, optometrists), orthotics (dentists, occupational therapists), airway (emergency medical technicians), saying that these overlapping words open the door for conflict with other practices.

Advisory groups are changed to advisory councils, which assist physical therapists in carrying out the intent of the law.

Sections of the bill clean up language, such as authorizing temporary permits, listing fees, and meeting national examination standards.

The section dealing with exemptions allows all other persons whose licensed, registered or certified practice overlaps that of physical therapists to continue in their practice even though they may be doing the same things that physical therapists do.

Dr. Wolff referred to a letter from the Kansas Attorney General's office regarding **SB 225**. (Attachment 5) He also suggested some language to allay concern about the scope of practice granted by the bill. (Attachment 6) He commented that the 22 exemptions listed in the bill exceed those of any other health-care list.

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Completing his comments on the bill, Dr. Wolff said the Senate added a requirement for physical therapists to carry liability insurance. Answering questions, he said nearly always (except for last year's licensure of occupational therapists) the elevating of a health-care practice to licensure creates turf battles. He noted that the bill does not give physical therapists independent practice.

The Chairman announced that the hearing for <u>SB 225</u> had been set for Thursday, March 20. The meeting was adjourned at 2:59 p.m. The next meeting is scheduled for Wednesday, March 19.