

MINUTES OF THE HOUSE HEALTH AND HUMAN SERVICES COMMITTEE

The meeting was called to order by Chairman Jim Morrison at 1:30 p.m. on February 16, 2004, in Room 526-S of the Capitol.

All members were present except Representative McLeland, who was 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:

Marla Rhoden, Director, Health Occupations Credentialing, Kansas Department of Health and Environment  
Ron Hein, Kansas Society of Radiologic Technologists (KSRT)  
Doug Billings, Past President, KSRT  
Dr. James Owen, diagnostic radiologist  
Jerry Slaughter, Executive Director, Kansas Medical Society  
Priti Lakhani, DPM, Kansas Podiatric Medical Association  
Deborah Stern, Kansas Hospital Association  
Rebecca Rice, Kansas Chiropractic Association  
Larry Buening, Executive Director, Kansas Board of Healing Arts  
Veronica Messer, Radiology Director

Others attending:

See Attached List.

The Committee minutes for February 11 and February 12 were approved.

For purposes of the hearing on **HB 2698**, Representatives Scott Schwab and Mario Goico served as chair. Representative Schwab opened the hearing on **HB 2698** - licensure for radiologic technologists.

Marla Rhoden, Director, Health Occupations Credentialing, Kansas Department of Health and Environment, spoke as a proponent. ([Attachment 1](#)) She reported that the radiologic technologists had followed the established procedures for credentialing, meeting all 10 criteria outlined in the statute, noting that the technical review committee and the Secretary for the department had concurred in recommending their licensure. Answering a question, she said the x-ray technicians were included in the bill as registered.

Ron Hein, Kansas Society of Radiologic Technologists (KSRT), outlined the facets of the bill. ([Attachment 2](#)) Commenting on the staff briefing from a previous meeting, he stated that the radiologic technologists were willing to consider suggested changes and friendly amendments, noting that the bill establishes minimum examination requirements for those using x-rays for diagnostic purposes on humans.

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He said radiologic technologists include three groups: radiographers, radiation therapists, and nuclear medicine technologists. He reviewed earlier attempts at licensure, citing last year's **HB 2274**, which, he said, was strictly a licensing act. However, in responding to the objections of various groups, he said the present bill offers many compromises:

- It automatically includes all those presently using x-ray technology;
- It makes allowances for those in rural areas to meet lesser requirements;
- It offers to eliminate rural hospitals;
- It provides a simple form of registration for x-ray technicians, which exempts them from the licensing requirements, but does not limit their practice.

Mr. Hein said the goal of the bill is to provide education for all who utilize x-ray technology, prevent mis-diagnoses, and minimize a person's lifetime exposure to radiation. Answering questions, he said that physicians are trained to interpret x-rays, but not to operate the machines. He said dentists were exempt because their x-ray work is limited to one procedure.

Doug Billings, past president, KSRT, explained that radiology and nuclear medicine are a dynamic science that requires continuing education to maintain and increase skills, noting that proper x-ray technique requires a variety of adjustment to obtain an accurate picture with a minimum of radiation exposure. ([Attachment 3](#)) He related stories of incompetent and ignorant technicians who provided unreadable x-rays that often overexposed a patient to radiation or resulted in mis-diagnosis, creating needless trauma to patients. Answering questions, he said that x-radiation is cumulative over a person's lifetime, and thus over-exposure is difficult to measure except over time.

Dr. James Owen, diagnostic radiologist, spoke as a proponent. ([Attachment 4](#)) He said there are three components to radiologic technology: the condition of the x-ray machine, the generation of the x-ray, and the interpretation of the x-ray film, noting that the 1<sup>st</sup> and 3<sup>rd</sup> are regulated by the state, but the 2<sup>nd</sup> is not, creating an uneven level of quality depending on the person operating the machine. He said physicians are not trained to supervise x-ray technicians. When untrained personnel operate the x-ray machines, the resulting film is often unreadable and the patient is often exposed to far more radiation than necessary, noting that mis-diagnoses and unnecessary further examinations often occur because of poor quality x-rays. He stated that 37 other states already provide for more regulation than this legislation, placing Kansas in a distinct minority and its citizens at risk.

Ron Hein summarized the bill by saying that radiologic technologists would be licensed, x-ray technicians, registered, the latter which meant only filling out a form in order to document who in the state was taking x-rays.

Veronica Messer, Radiology Director, testified as a proponent, saying that a quality x-ray is crucial to diagnosis, relating that her mother died because of a mis-diagnosed x-ray. ([Attachment 5](#)) Answering a question, she explained that radiation over-exposure speeds up genetic vulnerabilities, making individuals

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more susceptible to disease.

Jerry Slaughter, Executive Director, Kansas Medical Society, spoke as an opponent, stating that, although he was concerned with quality and did not oppose licensure, he was aware of physicians in rural areas for whom the bill would be burdensome and unworkable because x-ray technicians were not available. ([Attachment 6](#)) He said that in small hospitals and rural physicians' offices, registered nurses or other medical staff were trained to take x-rays. He commended the registration concept, but expressed concern that the Board of Healing Arts was given latitude that could impose increasingly burdensome regulations on x-ray technicians, noting that current law places responsibility for x-ray quality on supervising physicians, which he considered an adequate safeguard. Answering questions, Mr. Slaughter acknowledged the possibility for online education and training for x-ray technicians. A member commented that even though the physician is officially responsible for x-ray technicians, any radiation damage would not be evident for years, making it impossible to hold a physician accountable.

Priti Lakhani, DPM, Kansas Podiatric Medical Association, spoke as an opponent. ([Attachment 7](#)) She questioned why dentists are exempt and podiatrists are not, since podiatrists, like dentists, restrict x-rays to four basic procedures, noting that an x-ray in her office is \$75, but if she is required to send the patient to the hospital, the cost is \$250. Answering questions, she repeated the refrain that the bill could open the door for increasingly intrusive regulation and higher cost to the patient.

Larry Buening, Executive Director, Board of Healing Arts, said that the Board had worked diligently to help craft a bill acceptable to all parties, but had been unsuccessful. ([Attachment 8](#)) He noted that the final report of the credentialing review committee recommended licensure, stating that the bill has two unique features: x-ray technicians are not only given registration, but a scope of practice; and licensed practitioners are not allowed to delegate radiologic procedures to anyone who is not licensed or registered. He suggested several amendments to the bill that would make it easier for the Board to administer.

Rebecca Rice, Kansas Chiropractic Association, said the association had no opposition to the bill, but they were not promoting it either. ([Attachment 9](#)) She expressed gratitude to Mr. Hein for his diligence in trying to accommodate the concerns of various groups.

Deborah Stern, Kansas Hospital Association, said her association was also neutral. ([Attachment 10](#)) She said some association members were concerned about possible additional regulatory burdens in the future and that many rural hospitals cross-trained staff for radiologic work. She said the bill might create regulatory barriers in some parts of the state and suggested adding further exceptions, noting that the registration provision of the bill might provide more flexibility.

Not appearing before the committee, but providing written testimony, were the following:

Proponents:

- Randy Stucky, KSRT. ([Attachment 11](#))

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- Linda Croucher, faculty member, Washburn University radiologic technologists program ([Attachment 12](#))
- Ron Casey, registered radiologic technologist ([Attachment 13](#))
- Libby and Brian Johnson, nationally registered radiologic technologist ([Attachment 14](#))

### Opponents:

- Carolyn Gaughan, Executive Director, Kansas Academy of Family Physicians ([Attachment 15](#))
- Chip Wheelen, Executive Director, Kansas Association of Osteopathic Medicine ([Attachment 16](#))
- David Saidian, certified nuclear medicine technologist ([Attachment 17](#))
- Jacque Amspacker, Executive Director, Johnson-Wyandotte County Medical Society ([Attachment 18](#))

A fiscal note from the Division of Budget is included in the minutes. ([Attachment 19](#))

The Chair closed the hearing on **HB 2698**.

The meeting was adjourned at 2:14 p.m. The next meeting is scheduled for Tuesday, February 17, 2004.