

Legislative Update
February 16 2018
Prepared by: Dodie Wellshear, Ad Astra Government Relations

Moving Toward Turnaround

This week was spent with most non-exempt committees finalizing bill hearings and moving bills out, if they are to advance this legislative session. Next Thursday, February 22nd, marks the official mid-point in the regular session, often referred to as “turnaround” at the Statehouse.

Turnaround represents the point in the session when most bills must pass from the chamber (House or Senate) of origin, in order to advance. The exception is any bill that is introduced in or referred to a committee exempted from the turnaround rule. Those exempt committees include Appropriations, Ways and Means, Federal and State Affairs, House Taxation, and Calendar and Printing.

The health committees are not exempt committees, so most of their bills must be completed in their chambers of origin to move on in the 2018 session.

KanCare Expansion Hearing in the Senate

The Senate Public Health and Welfare Committee on Wednesday held a public hearing on [SB 38](#), which would extend Medicaid health care coverage to an estimated 120,000 Kansans. These are individuals who are too “rich” to qualify for Medicaid, but too poor to afford traditional health plans. In most cases, they are employed in lower wage jobs and in jobs that do not offer health insurance.

Dr. Rob Freelove, a KAFP member who practices in Salina and heads the Smoky Hill Residency Program, again this year provided impassioned testimony supporting the bill. He spoke of how SB 38 would support hospitals, especially in rural areas, but, more, he spoke of actual patients who had experienced adverse outcomes for serious – but treatable – diseases, because they lacked health insurance coverage.

Dr. John Feehan, KAFP’s president, delivered written testimony on behalf of the Academy, stressing not only facts, but also sharing his personal experiences caring for populations that could be impacted by this legislation.

A woman who would be impacted by the legislation testified and caught the attention of all who were there. She is the mother of two, a business owner, and volunteer firefighter who talked about her struggle with cancer treatment, while trying to continue working full-time and being in and out of insurance coverage throughout. Her treatment left her in massive debt and she didn’t qualify for bankruptcy. She clearly demonstrated the “type” of people who could benefit from KanCare expansion – mostly people who are working, but cannot afford insurance. She noted many of these are small business owners and farmers.

Opponents focused mostly on the potential financial burden KanCare expansion could have on the state, but, in cases, provided distinctly erroneous information or were thin on factual statistics. They did, however, hit on a fear of some legislators that this could eventually stretch the state budget to the point that other critical state services are harmed.

The committee is expected to take action on the bill Monday, February 19th, and forward it to the Senate for debate.

Telemedicine Legislation

The replacement telemedicine bill, [HB 2674](#), had a brief hearing on Monday, in the House Health and Human Services Committee. The bill establishes telemedicine definitions, guidelines, and insurance coverage parity. The bill was introduced this session as a result of talks and interim public hearings

between legislative health leaders, KMS, insurers, and hospitals. Last week's update noted that this bill replaced the former HB 2512 and differed primarily by removing HB 2512's section relating to abortion.

On Thursday, the committee began its action on the bill, seeking to pass it favorably out of committee for House debate prior to turnaround. [Note: HB 2674, because it was introduced in the House Taxation Committee, is exempted from the turnaround deadline.] Most of Thursday's discussion was focused on an amendment to restore the abortion section to the bill. The amendment was added on a close vote of the committee.

Final committee work on the bill is scheduled on Monday, where it is expected to be passed and ready for House debate later in the week.

Family Doctor of the Day

KAFP is again sponsoring the [Family Doctor of the Day \(FDOD\) program](#) during the Kansas legislative session. Licensed physicians, including residents, volunteer to provide mostly-minor health needs to legislators and their staff. The Legislature highly values and appreciates access to these services, especially when so many are away from their hometown primary care physicians.

This week, one physician – **Jennifer Koontz, MD**, Newton – provided this service at the Capitol. Please consider signing up for one of the slots still open in the 2018 session.