

## LEGISLATIVE UPDATE

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### **Moving Toward Turnaround**

Thursday marks “turnaround,” the official halfway point in the regular legislative session. It’s called “turnaround,” because most bills must pass from their first chamber – House or Senate – and turnaround to the second chamber for hearings.

Monday, committees will complete work on bills they intend to advance this session. The remainder of the week will be dedicated to debating bills in full chamber sessions. Any bills not originating in an “exempt” committee or run through an exempt committee “blessing” by leadership will die. Exempt committees include House and Senate Federal and State Affairs, House Appropriations, Senate Ways and Means, House Taxation, and Calendar and Printing. Any bills introduced in or referred to these committees remain eligible for action until the end of the 2020 session.

### **Physicians, APRNs Make Case in House Committee**

The chair of the House Health and Human Services Committee, Rep. Brenda Landwehr (R-Wichita), reset the proverbial dial on APRN legislation – now contained in HB 2412 – by holding a roundtable that included three family physicians, two physician assistants, four APRNs, and a national APRN lobbyist.

APRNs, of course, have been battling for years to pass legislation allowing them independent and unlimited scope of practice. Rep. Landwehr said her hope in holding the roundtable is to get the opposing sides to begin hammering out a compromise. While a lot was said in the Wednesday roundtable, the APRNs stated their continued unwillingness to make any compromises on their proposed legislation.

Doctors Jen Bacani-McKenney (Fredonia), LaDona Schmidt (Lawrence), and Kevin Hoppock (Wichita) participated on behalf of physicians. Dr. Hoppock coordinated discussion and major talking points for the physicians and PAs. All physicians participating tried to distinguish the significant differences between the practice of medicine and nursing practice in the state.

APRNs seemed to argue two ways against this, saying both that they should remain under the Board of Nursing because they are practicing as nurses and also indicating they see themselves as interchangeable with family physicians.

Dr. McKenney addressed medical care in rural Kansas and responded to the APRN ascertainment that allowing them independent practice will fix the rural health care provider shortage. She said she values the APRNs she works with but insisted the current team approach provides the best care and safety for patients. While she said she would love to see more APRNs practicing in rural areas, APRNs are free to do that now under a collaborative physician agreement. APRN national lobbyist responded that passing HB 2412 would cause more APRNs to want to practice in Kansas’s rural areas.

Dr. McKenney also attempted to distinguish for House Health and Human Services Committee members and APRNs the significant differences in education and clinical training between the professions. The APRN response was interesting in that they admitted they didn’t have the same level of training but said their certification in specialty areas would allow them to practice as competently as physicians.

Dr. Schmidt provided a unique perspective, as she was an APRN before becoming a family physician. She explained that she “didn’t know what she didn’t know” as an APRN, until she went to medical school. APRNs obliquely responded that they do know what they know and that their specialty “certifications” provide the necessary regulatory guidance on their practice. Even when pressed by committee members, they seemed unable to comprehend the very real differences between their training and that of physicians.

Two physician assistants supported physicians on the panel by stating there are very real differences in education and training between physicians and mid-level practitioners, and that they believe the Board of

Healing Arts is the entity that should continue to regulate the practice of medicine in Kansas. Again, APRNs seemed to argue they want to practice medicine independently, but that they would only practice at the highest level of their nursing training and should be, therefore, regulated by the Board of Nursing.

Some committee members strongly urged APRNs to work toward a compromise on this bill and said they failed to comprehend why the group comes back year after year with the very same legislative proposal but remains unwilling to seek a compromise with physicians. Chairman Landwehr added to that concern, saying it seemed totally proper to insist that the Board of Healing Arts regulate APRNs, as well as any other entity practicing medicine in Kansas.

HB 2412 has not had a hearing this session and remains tied up by the House's reticence to forward any health-related bill that could be amended with Medicaid expansion language – which is precisely what happened to the APRN legislation last year.

### **Action (or not) on Two Key Bills**

[HB 2563](#), which would codify the federal government's recent action to raise the age of purchasing cigarettes, e-cigarettes, and other tobacco products to 21, was amended and passed by the House Federal and State Affairs Committee on Thursday.

The House Federal and State Affairs Committee amended the bill in several ways and advanced it to debate in the full House. Those amendments include:

- Aligning the flavors and e-cigarettes language to conform with federal guidelines. The bill retains the ban on flavors, excepting menthol, which aligns with the feds. It also adds “alternative nicotine products” to the regulation;
- Imposing a penalty on youth caught possessing these products of \$25 and a mandatory court appearance;
- Reducing the retail dealers' regulatory fee from \$100 to \$25, which is the current fee; and,
- Delaying implementation to July 1, 2021, to allow a smoother transition for retailers.

Another amendment would ban smoking in casinos and will likely not survive floor debate. Casinos are currently exempted from the Kansas Clean Indoor Air Act.

KAFP testified in support of HB 2563, but recommended removing the menthol flavor exemption. While not supportive of that exemption and some of the bill's amendments, the Academy continues to recognize this legislation as a decisive step in helping curb teen vaping and nicotine addiction.

[HB 2601](#), which would weaken the authority of the KDHE secretary to mandate vaccinations, is unlikely to advance in this legislative session – at least, not anytime soon.

The bill set up a strident battle between those believing vaccines to be potentially harmful and/or believing parents should have full authority over the vaccinations of their children, and public health professionals, who maintain the authority should remain with KDHE, where it is not as likely to be controlled by political whims and persuasions.

While the House Education Committee chairman stated strongly that he believes the KDHE secretary should work more cooperatively with the Legislature, the bill does not appear to have the support of a majority needed to pass this committee.

### **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.

Appreciation goes out to the following members, who provided FDOD care this past week: **Dr. Michael Engelken**, Topeka; **Dr. Kimberly Krohn**, Wichita; **Dr. Chad Johanning**, Lawrence; and **Dr. Erin Locke**, Topeka. Thank you for your gift of service!

### **KAFP Priority Bills**

- [HB 252](#) – bipartisan bill expanding Medicaid to 138% FPL and implementing a health plan reinsurance program *Status: discussions & possible amendments in S-Public Health & Welfare on 2/20*  
**KAFP provided proponent testimony**
- [SB 350](#) - Amending healthcare stabilization fund coverage requirements and membership on the board of governors and providing for the dissolution of the fund, should the Supreme Court rule that caps on non-economic damages in medical cases is unconstitutional. This is a proactive response to the Hilburn ruling.  
*Status: referred to S-Public Health & Welfare*  
**Bill introduced at request of KMS**
- [SB 381](#) – Authorizing medical student and residency loan assistance to encourage the practice of obstetrics and gynecology in medically underserved areas of the state (separate fund from primary care MSLP)  
*Status: passed by S-Education; on S-General Orders*  
**KAFP provided neutral testimony, with recommendation to ensure it does not interfere with MSLP for primary care**
- [HB 2412](#) – a bill providing independent and expanded scope of practice to APRNs  
*Status: referred to H-Health & Human Services; roundtable discussion on 2/19*
- [HB 2450](#) – a bill request by the Kansas Attorney General to add electronic cigarettes (vapes) to the Clean Indoor Air Act  
*Status: passed favorably in H-Judiciary; on H-General Orders*
- [HB 2563](#) - Increasing the minimum age to purchase or possess cigarettes and tobacco products from 18 to 21; prohibiting cigarette vending machines and flavored vaping products  
*Status: hearing in H-Federal & State Affairs on 2/13*  
**KAFP provided proponent testimony, with recommendation to remove menthol exemption**
- [HB 2570](#) – Limiting certain Schedule II, III and IV opioid prescriptions to a seven-day supply, with certain exceptions, and allowing pharmacists right to refuse any prescriptions of more than seven days  
*Status: referred to H-Health & Human Services*
- [HB 2601](#) - Specifying the required childhood immunizations for childcare facility and school attendance; more limited control by KDHE  
*Status: hearing in H-Education on 2/13*  
**KAFP provided opponent testimony**

Note: many of the bill weblinks go to their fiscal notes, rather than the actual bill, as these notes provide more brief and clear descriptions of the bills.

### **Week of February 24<sup>th</sup>**

Committees will meet on Monday to take action on any non-exempted bills they wish to advance this session. The balance of the week will be devoted to debate on the House and Senate floors.