

MINUTES OF THE PUBLIC HEALTH AND WELFARE COMMITTEE

The meeting was called to order by Chairman Vicki Schmidt at 1:00 p.m. on February 14, 2011, in Room 546-S of the Capitol.

All members were present.

Committee staff present:

Nobuko Folmsbee, Office of the Revisor of Statutes  
Katherine McBride, Office of the Revisor of Statutes  
Melissa Calderwood, Kansas Legislative Research Department  
Iraida Orr, Kansas Legislative Research Department  
Carolyn Long, Committee Assistant

Conferees appearing before the Committee:

Dr. Robert Moser, Acting Secretary, Department of Health and Environment  
Peter Kimble, ND  
Alicia Johnson, ND  
Mehdi Khosh, ND  
Lori Blankinship, ND  
Sarah Lee  
Robert Reeves  
Jerry Slaughter, Kansas Medical Society  
Bob Williams, Kansas Association of Osteopathic Medicine  
Mary Blubaugh, Kansas State Board of Nursing  
Sarah Tidwell, Kansas Advanced Practice Registered Nurse Task Force

Others attending:

See attached list.

The Chair opened the confirmation hearing for Dr. Robert Moser, secretary-designee for the Department of Health and Environment (Attachment #1). Dr. Moser gave a brief history of his qualifications and his commitment to a robust focus on service. He feels that the resources of KDHE could be incredibly effective when utilized prospectively to help Kansans protect and improve health and environmental outcomes (Attachment #2). After being asked if there was any indication that the Department of Health would be a separate entity from Environment and responding that there has been no conversation concerning that topic at this time, Senator Kelsey moved and Senator Steineger seconded that the committee recommend the confirmation of Robert Moser as Secretary of the Department of Health and Environment. Motion carried.

The Chair opened the hearing on **SB 88—Concerning naturopathic medicine and the prescription, recommendation, or administration of natural medicine.** This bill would allow naturopathic doctors to prescribe, recommend, or administer certain drugs or substances controlled by prescription. In addition, it would allow naturopathic doctors to administer immunizations and intramuscular, subcutaneous or intravenous vitamins, minerals, and homeopathic preparations. Finally it would eliminate both the requirement for a written protocol between the naturopathic doctor and a person licensed to practice medicine and surgery and the requirement to provide notice of this relationship to the Board of Healing Arts.

Peter Kimble, ND, spoke in favor of **SB 88** by saying that in addition to the explanation given by staff, the bill would not affect the large majority of patients who never see an alternative practitioner. Patients have a right to choose their health care provider and they would like to be able to use every tool available which would be appropriate to their education and training (Attachment #3).

Alicia Johnson, ND, also in favor of the legislation, added that naturopathic doctors have unique training that allows them to utilize bio-identical hormones to customize treatments for patients who otherwise have nowhere to turn (Attachment #4).

Also in favor of **SB 88** was Mehdi Khosh, ND, Indicated that he had been using a wide range of intravenous vitamin and mineral since 2001 with a positive clinical result without any adverse effects but stressed that IV treatments do not take the place of having a primary care doctor (Attachment #5).

## CONTINUATION SHEET

The minutes of the Senate Public Health and Welfare Committee on February 14, 2011 at 1:00 p.m.

Lori Blankenship, ND, gave brief descriptions of the Association of Accredited Naturopathic Medical Colleges, the Council on Naturopathic Medical Education, the clinical education program, and the clinical requirements ([Attachment #6](#)).

Sarah Lee gave testimony on the ways in which naturopathic medicine and bio-identical hormone therapy were beneficial for her health ([Attachment #7](#)) and Robert Reeves talked about his diagnosis of Lyme disease and how his weekly regimen of intravenous vitamin C has greatly improved his overall health ([Attachment #8](#)).

Ruth Redenbaugh submitted written testimony in support of **SB 88** sharing that her experience with a naturopathic doctor was exemplary ([Attachment #9](#)).

Speaking in opposition to **SB 88**, Jerry Slaughter from the Kansas Medical Society stated that naturopaths have introduced legislation which goes well beyond what is believed their education and training would justify. This bill would allow naturopaths to prescribe what is today a “prescription-only” drug under our pharmacy laws, which blurs the distinction between truly prescription-only drugs and those that can be “prescribed” by naturopaths ([Attachment #10](#)).

Bob Williams, Kansas Association of Osteopathic Medicine (KAOM), presented testimony in opposition to this bill. The KAOM feels that by removing the required protocol with a physician, physicians are removed from the patient care loop and an important safe-guard is eliminated ([Attachment #11](#)). Carolyn Gaughan, Executive Director of the Kansas Academy of Family Physicians, presented written testimony in opposition to the bill ([Attachment #12](#)).

There being no further discussion, the hearing on **SB 88** was closed.

The hearing on **SB 134—Creating the licensure role of advanced practice registered nurse** was opened. Staff informed the committee that this legislation would amend current law regarding the Advanced Practical Nurse classification by changing the title from Advanced Registered Nurse Practitioner to Advanced Practice Registered Nurse and would require the NPRN classification to complete continuing education in advance of practicing nursing.

Mary Blubaugh, representing the Kansas State Board of Nursing, provided testimony in support of the bill stating that there were five (5) proposed changes requested in this bill. They were: (1) Title change from Advanced Registered Nurse Practitioner (ARNP) to Advance Practice Registered Nurse (APRN), establishing uniformity with other states; (2) change certificate of qualification to licensure; (3) change categories of APRN to roles; (4) require a masters or higher degree in an APRN role to align Kansas with other states; and (5) continuing education in the APRN role and grandfather any ARNP who is registered to practice prior to the date of this bill ([Attachment #13](#)).

Also in favor of this legislation was Sarah Tidwell, representing the Kansas Advanced Practice Registered Nurse Task Force, stating that this bill moves Kansas toward the consistency in licensure, accreditation, certification and education of advanced practice nurses ([Attachment #14](#)).

There being no further conferees, the hearing on **SB 134** was closed.

Chairman Schmidt called for final action on **SB 134—Creating the licensure role of advanced practice registered nurse**. Senator Haley moved, Senator Kelly seconded, to recommend SB 134, with technical amendments, for passage. Motion carried.

The next meeting is scheduled for February 15, 2011. The meeting was adjourned at 2:21 p.m.

CONTINUATION SHEET

The minutes of the Senate Public Health and Welfare Committee on February 14, 2011 at 1:00 p.m.