



**Kansas Hospital
ASSOCIATION**

TO: House Judiciary Committee

FROM: Audrey Dunkel, Vice President of Government Relations
Tara Mays, Vice President of State Legislative Relations

Date: January 13, 2021

RE: Continuation of 2020 HB 2016 Legislation

The Kansas Hospital Association (KHA) appreciates the opportunity to provide comments in support of continuing the provisions of 2020 HB 2016 beyond January 26, 2021.

Kansas hospitals continue to serve on the frontlines in responding to the COVID-19 pandemic. The flexibilities implemented in 2020 HB 2016 have allowed hospitals to address staffing shortages, maintain safe access to care for patients, and make necessary adjustments to the provision of care to keep patients safe without fear of legal repercussions. Our hospitals are grateful for the support you provided to the healthcare community last spring. Unfortunately, since you last passed HB 2016 in June, the COVID-19 situation has not improved. Continued regulatory flexibility and liability protections remain critically important as we continue on the path toward pandemic recovery.

Of particular importance to Kansas, hospitals are the limited but necessary liability protections for health care providers. A significant portion of non-urgent medical care has been delayed or not provided during the last ten months in an attempt to protect patients and ensure that supplies, beds, and staff would be available to address a COVID-19 surge. The protections included in the prior bill were limited and narrowly constructed to allow healthcare providers to make decisions addressing the pandemic while protecting patients from acts that constitute gross negligence or willful misconduct.

Additionally, there are regulatory flexibilities that have been allowed under 2020 HB 2016 hospitals have found invaluable for addressing the most recent surges in COVID-19 cases and hospitalizations. The provisions allowing for physician flexibilities in assessment and evaluation requirements related to telemedicine have been of particular importance by allowing physicians under quarantine to conduct assessments and administer prescriptions, maintaining access to care. Other provisions have allowed hospital staff to use non-hospital space, including off-campus areas to perform testing, triage, and patient care will continue to be important as vaccine distribution continues. Further provisions have allowed less acute patients to move to smaller facilities to open beds at facilities for patients needing a higher level of care. As staffing has become more challenging, hospitals have utilized several flexibilities related to emergency licensure and healthcare students where appropriate to maintain services for Kansans across the state.

We have been fortunate that Kansas has not seen COVID-19 hit us as it did New York. That is due, in large part, to the flexibilities allowed in HB 2016. Their continuation is vital to a successful 2021.

Thank you for your continued support of Kansas hospitals.