

MINUTES OF THE SENATE PUBLIC HEALTH AND WELFARE COMMITTEE

The meeting was called to order by Chairman Jim Barnett at 1:30 p.m. on January 22, 2009, in Room 136-N of the Capitol.

All members were present.

Committee staff present:

Nobuko Folmsbee, Office of the Revisor of Statutes
Doug Taylor, Office of the Revisor of Statutes
Kelly Navinsky-Wenzl, Kansas Legislative Research Department
Terri Weber, Kansas Legislative Research Department
Jan Lunn, Committee Assistant

Conferees appearing before the committee:

Gina Maree, Director of Health Care Finance and Organization, Kansas Health Institute
Richard Morrissey, Interim Director, Division of Health, Kansas Department of Health and Environment

Others attending:

See attached list.

Senator Barnett moved introduction of a bill relative to tanning facilities and restriction of using that device for minors age 18 and under; Senator Schmidt seconded the motion. The motion carried.

Chairman Barnett recognized Senator Julie Lynn who requested introduction of a bill that would continue the work of the Autism Task Force for one additional year. Upon a motion by Senator Wysong and a second by Senator Kelsey to approve introduction of the autism task force bill, the motion carried.

Senator Barnett recognized Gina Maree, Director of Health Care Finance and Organization for the Kansas Health Institute, who spoke about the importance of the Safety Net system (Attachment 1). Reasons for Safety Net systems were reviewed; the Kansas Safety Net system was described. Ms. Maree indicated there are a variety of services and providers included in the Safety Net System including federally qualified health centers, private providers, hospitals, emergency rooms, rural health centers, school-based serviced, and federally funded programs such as Medicaid. Ms. Maree elaborated on the fact that not all services are guaranteed by providers and some services are not provided unless the recipient is Medicaid eligible.

Ms. Maree reported on challenges in the current safety net system, and steps to move toward a true Safety Net system including expanding network providers, increasing charity care, designing approaches to physical space limits, increasing FQHCs, and developing a strategic plan. She briefly described approaches currently utilized by other states, and concluded that issues involving medically underserved Kansans will not be solved by safety net clinics alone, Medicaid and safety net clinics are important components within the system, and it is critical to develop a "system approach."

Chairman Barnett recognized Dick Morrissey, Interim Director, Division of Health, Kansas Department of Health and Environment, who provided a historical review (Attachment 2) of the community-based primary care clinic program in Kansas. KDHE is designated as the Primary Care Office and receives federal funding to coordinate local, state, and federal resources that contribution to workforce development and service delivery to underserved populations. Mr. Morrissey provided graphics detailing the 2009 Primary Care Clinic Grant Awards, Primary Care Clinic Program Funding and Funded Clinics by Year, State-funded Clinic Sites by County, State-Funded Dental Clinics by County, Dental Hub and Spokes Projects, and Patient Demographics for State-Funded Primary Care Clinics. In addition, primary care clinic patients by percentage of federal poverty level and insurance status of primary care clinic patients were discussed.

Senator Kelly requested that information showing State-Funded Primary Care and Rural Health Clinic Sites by County would be helpful, especially when considering future growth and locations for additional facilities/resources. Mr. Morrissey indicated that information would be provided to committee members. Mr. Morrissey concluded his agency stands ready to participate in the Safety Net Clinic process.

CONTINUATION SHEET

Minutes of the Senate Public Health And Welfare Committee at 1:30 p.m. on , in Room 136-N of the Capitol.

At the meeting on January 21, 2009, Chairman Barnett had requested that Ms. Harding return on January 22nd to discuss a Kansas Access Plan - Process for Development for the Safety Net System. Ms. Harding requested that Ms. Gina Maree present the plan in her absence (due to illness). Ms. Maree distributed a short- and long-term plan (Attachment 3) which describes strategy development within the first five years and includes evaluation and sustainability from the fifth year through the tenth year. The plan includes stakeholders and work groups to develop access plans. Ms. Maree indicated that within the next several weeks, it is possible to develop recommendations for possible 2009 legislative action.

Senator Schmidt indicated her interest in developing distribution hubs for unused medications in Kansas. In addition, Senator Schmidt asked for clarification relative to KDHE budget reductions (3%) coming from safety net clinics. Ms. Kang clarified budget cuts will be performed according to the governor's direction.

Following discussion, it was the consensus of the Public Health and Welfare Committee that the Access Plan presented should be submitted to the Health Policy Oversight Committee. Senator Kelly requested that Department of Commerce Office of Rural Policy be included in any Access Plan work group/stakeholder meetings to ensure continuity as that entity discusses healthcare issues and potential actions specific to rural communities.

Senator Barnett adjourned the meeting at 2:31pm. The next meeting is scheduled for Monday, January 26, 2009.