

2017-2018 KANSAS LEGISLATIVE SESSION HIGHLIGHTS

July 19, 2017

Bills Approved by the Governor with Impact on Bureau of Family Health

- **SB 83. Regulating abortion practice; requiring certain physician information to be provided under the women's-right-to-know act.** (includes language from SB 98 and HB 2319) Amends K.S.A. 65-6709. Requires specific information to be provided to woman prior to an abortion concerning the physician under women's-right-to-know, including formatting of information. Approved June 7, 2017.
- **S Sub for HB 2304. Child care facilities background check and sleeping area.** (original HB 2304 pertained to sleeping equipment and sleeping areas; background check language was originally in SB 126 and HB 2187) Amends K.S.A. 65-508 concerning requirements for safe sleep for children. For children under 12 months of age in child care, the child can only sleep on a surface and in area approved by KDHE, and the sleep surface is required to be free from soft or loose bedding, including blankets, bumpers, and pillows, as well as toys. Child care facilities are required to ensure that children over 12 months of age are placed to sleep only on a surface and in an area approved by KDHE. **AND** Amends K.S.A. 65-516 concerning restrictions on persons maintaining, residing, working, or volunteering in a child care facility by expanding the list of existing prohibitions to comply with new federal requirements for background checks found in the federal Child Care and Development Block Grant Act of 2014. Approved April 12, 2017.
- **Sub SB 85. Healthcare and information requirements concerning the withholding of cardiopulmonary resuscitation from minors.** (similar to HB 2307 without the language that no facility, physician, etc., shall withhold life-sustaining measures without parent consent) "Simon's law" – addresses instituting do-not-resuscitate (DNR) and similar physician's orders; requires disclosures of policies by facilities and physicians. DNR order shall not be instituted unless at least one parent or legal guardian has been informed of physicians' intent to institute such order. Approved April 12, 2017.
- **HB 2030. Pharmacist, pharmacy student or intern, administration of any vaccine to a person six years of age or older.** (includes language from HB 2121) Amends K.S.A. 65-1635a. Changes the minimum age for a person to whom a pharmacist, pharmacy student, or intern working under the direct supervision and control of a pharmacist is authorized to administer a vaccine, other than the influenza vaccine, from 18 to 12 years of age. Also requires that, on and after July 1, 2020, physicians and other persons authorized to administer vaccines report the administration of a vaccine to the state registry maintained by KDHE. Allows the person vaccinated or, if the person is a minor, the parent or guardian to opt out of the registry reporting requirement. Approved April 12, 2017.

Bills Introduced, Not Passed with Potential to Impact Bureau of Family Health*

- **HB 2244. Establishing the maternal mortality review committee.** Would establish the Maternal Mortality Review Committee within KDHE for the purpose of reviewing and preventing maternal deaths. The committee would identify maternal death cases; review medical records and other relevant data; contact family members and other affected or involved persons to collect additional relevant data; consult with relevant experts to evaluate the records and data; make determinations regarding the preventability of maternal deaths; develop recommendations for the prevention of maternal deaths; and disseminate findings and recommendations to policy makers, health care providers, health care facilities and the general public. Reports shall be distributed to health care providers and facilities and others necessary to reduce the maternal death rate. Still in House committee.
- **HB 2077. Limiting civil liability for certain persons performing inspection, installation or adjustment of a child safety seat or providing education regarding the installation or adjustment of a child safety seat.** Certain trained persons who provide services or education regarding proper use of child safety seats would be immune from liability for any acts or omissions during the inspection, installation, adjustment, or education services. The bill would not apply to cases of gross negligence or willful misconduct. Still in House committee.
- **HB 2103. Providing insurance coverage for amino acid-based elemental formula.** Would amend K.S.A. 40-2,103 and 40- 19c09 and require that after July 1, 2017, all individual or group health insurance policies that provide medical, surgical or hospital expense coverage be required to provide coverage for amino acid-based elemental formula for the diagnosis or treatment of food protein-induced enterocolitis syndrome, eosinophilic disorders, or short bowel syndrome. Still in House committee.
- **HB 2021. Providing insurance coverage for hearing aids.** Would amend K.S.A. 40-2,103 and 40-19c09. Would require every insurer that issues individual or group policies of accident and sickness insurance providing medical, surgical or hospital expenses delivered, amended or renewed after July 1, 2017, to provide coverage for hearing instruments. Would include batteries and repairs and be subject to the same annual deductibles, copayments, or coinsurance limits as all other benefits. Still in House committee.
- **HB 2205. Vaccinations for meningitis required.** Would add to K.A.R. 28-1-20(b), the list of required vaccinations, a requirement for vaccinations for meningitis. House committee in February 2017 amended the bill to add “but no earlier than age 11 with a booster at age 16 or later”. Still in Senate committee.
- **HB 2031. Establishing the advisory council on palliative care and quality of life and palliative care education program.** Would create the Palliative Care and Quality of Life Interdisciplinary Advisory Council and State Palliative Care Consumer and Professional Information and Education Program within KDHE. The Council would be responsible for developing recommendations and advising KDHE on the establishment, maintenance, operation, outcomes evaluation of palliative care initiatives and effectiveness of the Program. Would require KDHE to implement its provisions related to both the Council and the Program within the limitations of existing monies and resources. Still in Senate committee.

* This is the first year of the two-year legislative session. These bills may be considered in 2018.