



***KHA's Capitol Comments***  
**March 26, 2024**

**House Debate Bills, Including Transparency Bill, Not Recommended for Passage**

Today, both the House and Senate debated bills before them. The work before the House included debate on the following bills:

[House Bill 2825](#) requires hospitals to provide online pricing information for certain items and services; enacts consumer protection related to the Hospital Price Transparency Act; deems noncompliance with such act to receive monetary penalties and makes it impossible to collect from patients or insurers. The bill was carried by Rep. Bill Sutton (R-Gardner). The committee saw an amendment to allow hospitals to collect from patients or payers but leave in if out of compliance. Next, they would have to refund the patient and the payer. The amendment was added on a voice vote. The committee saw a further amendment stating the attorney general would send a letter needing compliance by July 1, adding the attorney general would need to work with the Kansas Insurance Department to ensure non-compliance. That amendment was added on a voice vote. The House saw an amendment brought by Rep. Tory Blew (R-Great Bend) mirroring the federal language related to insurance compliance and penalty. Rep. Sean Tarwater (R-Stillwell) challenged the germaneness of the amendment. The amendment was ruled germane.

Rep. Sean Tarwater (R-Stillwell) said the insurance portion doesn't matter and encouraged the body to pose the amendment.

Rep. Cindy Neighbor (D-Shawnee) suggested the amendment is fine but expressed hesitation on the bill.

Rep. Melissa Oropeza (D-Kansas City) discussed that providers see a lot of questions about insurance and said it increases transparency for patients.

Speaker Dan Hawkins (R-Wichita) suggested this isn't right for the bill. He suggested that in 2016 and 2017, the Kansas Legislature worked on a right-to-shop and transparency bill for hospitals. During that time, and the federal government passed a transparency bill. It asks hospitals to be transparent in pricing. Speaker Hawkins suggested insurance carriers are transparent with their prices. Insurance is based on where you go and how the policy applies to the procedure. Speaker Hawkins suggested hospitals set prices, others don't, and suggested the insurance piece doesn't help.

Rep. Sutton suggested he is open to the idea but suggested the amendment doesn't mirror the federal language. He suggested this needs more committee work.

Rep. Kirk Haskins (D-Topeka) asked if the amendment needed updated fiscal notes. He said the cost needs to be discussed and mentioned this is likely the only opportunity to see details around prior authorization, which is very problematic.

The amendment failed on a voice vote.

Rep. Susan Ruiz (D-Shawnee) highlighted there is no hospital in Kansas out of compliance.

Rep. Bill Clifford (R-Garden City), mentioned he found all hospitals and to be in compliance. He highlighted the confounding part is the insurance piece and encouraged those in the body to vote in their district.

Rep. Cindy Neighbor (D-Shawnee) emphasized this is a political issue and not a policy issue.

Rep. Chuck Smith (R-Pittsburg) said he doesn't want to raise hospital bills. He shared a story of his grandson who needed emergency care. The hospital gave him stitches and then they came out and asked if he needed a brain scan. He received a bill for \$5,000, and said it would have been nice to have transparency.

Rep. Paul Waggoner (R-Hutchinson) shared this is duplicate legislation and highlighted the committee's nine to seven vote. The federal government has a decent process for ensuring compliance. The Centers for Medicare & Medicaid Services has an in-depth process and 734 warning notices. He highlighted that as a small business owner, it aligns with how other federal agencies communicate. If you again don't comply, then you get a civil penalty. He highlighted Kansas has 130 Critical Access Hospitals. The federal government is audited and have processes already in place. He suggested having the Kansas Department of Health and Environment give compliance notice. He highlighted how the federal government has increased seeking hospitals not in compliance. The enforcement of compliance is highlighted on page 2, lines 18 and 19, the cause of action allows lawsuits. This is overregulation.

Rep. Ken Collins (R-Mulberry) highlighted he's for less government, not more government and emphasized we should try to work with hospitals. He highlighted the fiscal note of \$345,000 per year.

The motion failed on a voice vote. The bill will now be below the line and could come up in the future.

[House Bill 2834](#) transfers officers, employees, powers, duties and functions relating to the state health care benefits program and the state Workers' Compensation Self-Insurance Fund from the division of the state employee health benefits plan of the Department of Administration to the insurance department; establishes the commissioner of insurance as the chairperson of the Kansas State Employees Health Care Commission; provides all management functions of such commission be administered by the commissioner and eliminates a pilot program regarding employer contributions for certain children.

[House Sub for House Sub for Senate Bill 96](#) establishes child care licensing requirements relating to license capacity and staff-to-child ratios; eliminates certain license fees and training requirements; creates a process for daycare facility licensees to apply for a temporary waiver of certain statutory requirements; and authorizes the secretary to develop and operate pilot programs to increase child care facility availability or capacity; transfers certain child care programs to the Kansas Office of Early Childhood; and separates licensing duties between the secretary of the Kansas Department of Health and environment and the executive director of early childhood.

Also the House took final votes on the following:

[House Bill 2510](#) concerns the code of civil procedure; relates to litigation funded by third parties; limits discovery and disclosure of third-party agreements in certain circumstances; requires reporting of such agreements to the Judicial Council and a Judicial Council Committee to study third-party agreements; requires the clerk of the Supreme Court to develop a form for reports; exempts such reports from the Open Records Act. The bill passed the House on a vote of [83-39](#).

[Senate Bill 384](#) concerns health and health care; relates to emergency medical services; staffing of ambulances; and authorizes the Kansas Board of Emergency Medical Services to grant certain permanent variances from rules and regulations. The bill previously passed the Senate on a vote of 39-0. The House saw an amendment scrapping much of the agreed language stating the Board of EMS shall not require any vehicle providing emergency medical services in a city with a population of less than 50,000 or any county with a population of less than 50,000, to operate with any additional personnel other than the minimum personnel required. The amended bill passed the House on a vote of [119-4](#).

[Senate Bill 434](#) concerns public health, relates to the practice of cosmetology; exempts the practice of hair removal by sugaring from the definition of cosmetology. The bill previously passed the Senate on a vote of [38-1](#). The House passed the bill on a vote of [71-52](#).

[House Substitute for Senate Bill 287](#) concerns health and health care; relates to children and minors; prohibits a health care provider from administering any drug or diagnostic test or conducting behavioral health treatment to a minor in a school facility without parental consent. The bill previously passed the Senate on a vote of 40-0. The bill was amended in the House. The bill, as amended, passed the House on a vote of [85-37](#).

[House Substitute for Senate Bill 143](#) concerns elevators; relates to the Elevator Safety Act; redefines the term elevator; modifies the requirements for licensure, inspections and testing of elevators and the adoption of rules and regulations by the state fire marshal; permits inspections by insurance companies; requires notification to the state fire marshal of certain elevator accidents; prohibits the use of elevators following such accidents until approved by the state fire marshal; provides for the use of labels by the state fire marshal to affix to elevators not authorized for use; provides that failure to notify the state fire marshal of an accident; removing an affixed label or operating an elevator in violation of an affixed label constitutes class A nonperson misdemeanors; removes requirements that licensed elevator inspectors conduct inspections and provides that licensed elevator mechanics or the employees of licensees may conduct such inspections. The bill previously passed the Senate on a vote of 38-0. The House passed the bill on a vote of [107-15](#).

### **Senate Takes Final Votes and Debates Bills**

Today the Senate is slated to debate the following, among their work before them:

[House Bill 2483](#) concerns audits, eliminates the requirement for such division to conduct a recurring 911 implementation audit and others. The bill previously passed the House on a vote of 120-0.

[House Bill 2690](#) concerns abolishing the 911 Coordinating Council, transfers power and duties to the state 911 Board and allows them to appoint an executive director and employees to carry out duties. The bill previously passed the House on a vote of [117-3](#).

[House Bill 2715](#) changes certain fees under the responsibilities of the commissioner of insurance. The bill previously passed the House on a vote of 119-0.

[House Bill 2648](#) concerns rules and regulations, provides agency adjudications shall not be used to establish policies governing future private conduct that have the force of law; requires the director of the budget to review economic impact statements related to rules and regulations. The legislation previously passed the House on a vote of [82-36](#).

[House Bill 2547](#) authorizes schools to maintain an emergency medication kit for certain life-threatening conditions. The bill previously passed the House on a vote of [116-4](#).

[House Bill 2754](#) allows counties to be exempt from the requirement to perform school safety inspections. The bill previously passed the House on a vote of [114-5](#).

Also, today the Senate took final votes on the following bills:

[Senate Bill 488](#) concerns the attorney general; relates to the office of the inspector general and the powers, duties and responsibilities thereof; expands the power of the inspector general to investigate and audit all state cash, food and health assistance programs. The Senate passed on a vote of 22-18.

[House Bill 2749](#) concerns abortion; relates to reports on abortions performed in this state; requires the reporting of the reasons for each abortion performed at a medical care facility or by a health care provider. The bill previously passed the House on a vote of [81-39](#). Passed the Senate on a vote of 27-13.

[House Bill 2484](#) concerns the Kansas Behavioral Sciences Regulatory Board; relates to social work; enacts the Social Work Licensure Compact to provide interstate practice privileges; requires applicants for social work licensure to submit to a criminal history record check; authorizes the Kansas Behavioral Sciences Regulatory Board to establish a fee for a license with compact practice privileges. The bill previously passed the House on a vote of [118-2](#). Passed the Senate on a vote of 35-5.

[House Bill 2353](#) concerns the Care and Treatment Act for Mentally Ill Persons, increases the time allowed for an initial continued treatment order; adds criteria to determine when outpatient treatment may be ordered. The bill previously passed the House on a vote of 119-0. Passed the Senate on a vote of 40-0.

### **Health Conference Meets and Agrees to Changes**

Today, conferees that include chair, vice-chair and ranking minority members from both health committees discussed [Senate Bill 233](#). The legislation restricts the use of state funds to promote gender transitioning, prohibits health care providers from treating children whose gender identity is inconsistent with the child's sex, authorizes a civil cause of action against health care providers for providing such treatments, requires professional discipline against a health care provider who performs such treatment, prohibits professional liability insurance from covering damages for health care providers providing gender transition treatment to children and adds violation of the act to the definition of unprofessional conduct for physicians and nurses. The committee reviewed the House-made changes that moved the effective date for those who had started treatment to April 1, 2024, rather than when the bill is printed in the state statute book. The Senate agreed to the House changes.

### **Senate Financial Institutions and Insurance Adds Prior Authorization Language**

Today, the Senate Financial Institutions and Insurance Committee, chaired by Senator Jeff Longbine (R-Emporia), added language raised by the Kansas Hospital Association and agreed to with interested stakeholders, requiring each utilization review entity to implement and maintain a prior authorization application surface in compliance with federal law by Jan. 1, 2028. The amendment, like the federal language, does not include coverage of drugs.

The committee added that language to [Senate Bill 553](#), and recommended the bill favorably as amended. The legislation will now go before the full Senate.