



KHA's Capitol Comments
April 4, 2024

Nurse Staffing Agency Subcommittee Makes Recommendations

Today, the Subcommittee of Appropriations members studying the issue of supplemental nurse staffing agencies met. The committee, chaired by Rep. Les Mason (R-McPherson) heard the following recommendations:

- An interim committee should examine this issue more closely, including privatization of state hospitals, contract nursing, how Kansas supervisor models and requirements differ from those of other states, and pipeline challenges
- In the Promise Act, carving out a segment that would include additional Allied Health Programs such as occupational therapists, respiratory therapists and behavioral health specialists
- An Omnibus funding program to include the Allied Health Service Scholarship Program and more investments in the Nursing Service Scholarship Program and the Nurse Initiative Grant
- Adding tech platforms to those supplemental nurse staffing agencies that would need to register and report to the Kansas Department for Aging and Disability Services
- Taking a second look at House Bill 2265 during the interim committee
- Allowing state hospitals to pay retention and new hire bonuses and raises

The committee recommendations are likely to be discussed in the Omnibus budget session and the next legislative session as the interim committee makes additional recommendations.

House and Senate Pass Conference Committee Reports

Today, the House and Senate took up conference committee reports, which are straight up or down votes on the following:

[CCR on SB 356](#) updates certain terms, definitions and conditions relating to the requirements of certain insurance reports, examinations and transactions; requires that insurance examiner per diem amounts and expenses, outside consulting and data processing fees and pro rata funding for examination equipment and software be reasonable; establishes a tiered fee structure for examinations of insurance companies and societies based on gross premiums; increases the deadline for submission of audited financial statements of certain group-funded insurance pools from 150 to 180 days after the end of the fiscal year; updates the version of risk-based capital instructions in effect; requires certain utilization review entities to implement a prior authorization application programming interface; permits a plan sponsor to authorize electronic delivery of plan documents and identification cards for certain insured individuals covered by a health benefit plan; allows title insurance agents to submit escrow, settlement and closing funds through certain real-time or instant payment systems. Passed the House on a vote of 118-5.

[CCR on HB 2498](#) increases transfers from the State Highway Fund to the Public Use General Aviation Airport Development Fund (Aviation Fund) from \$5.0 million to \$15.0 million annually, starting July 1, 2024. Continuing law authorizes the Secretary of Transportation to use the Aviation Fund to provide grants to public-use general aviation airports for planning, constructing, reconstructing or rehabilitating facilities. The bill passed the House on a final vote of [117-4](#) and the Senate on a final vote of [34-5](#).

[CCR on S Sub for HB 2036](#) reduces the top marginal individual income tax rate, exempt social security income from individual income tax, increases the standard deduction amounts, increases the child and dependent care tax credit, reduces privilege tax rates, abolishes the Local Ad Valorem Tax Reduction Fund and County and City Revenue Sharing Fund, increases the amount of the appraised value of residential property exempt from the statewide uniform school finance levy, reduces the mill levy, and accelerates the elimination of the state sales and compensating use tax rate on food and food ingredients. The CCR passed on a vote of [38-1](#).

Late yesterday, the House and Senate Local Government Conference Committee agreed to a compromise on [Senate Bill 384](#). The compromise language allows the Kansas Board of Emergency Medical Services to issue an indefinite exemption to minimum staffing requirements. They added language indicating facility-to-facility transfers by ambulance, based in counties less than 30,000, would only need a driver and an EMT or above without the need for a variance. That conference committee report will now run in both chambers. The bill is included in the CCR on Senate Bill 384, which passed the House on a vote of 122-1.

The chambers are likely to continue to take votes on conference committee reports into tomorrow.