**Senate Committee Hears Link Between Expansion and Abortion**

The Senate Public Health and Welfare Committee, chaired by Senator Gene Suellentrop (R-Wichita), met this morning to hear how states are spending their 10 percent match to the federal Medicaid expansion funding. While the discussion touched slightly on how abortions might be funded by state funds, the main focus was on the constitutional amendment related to abortion, Senate Concurrent Resolution No. 1613. Proponents of the constitutional amendment spoke for the entire meeting, laying out the potential legal implications in Kansas if the amendment is not passed – namely that the state could be forced to fund abortions with state only funds. At issue with the amendment is the timing of the vote – supporters are asking the amendment be put before the voters in August during the primaries. Committee members asked specifically about moving the vote to November when more Kansans would come out to vote as a possible compromise on the amendment. Supporters stressed that in the primary, the same number of Kansans had the opportunity to vote if they choose to do so. The chairman closed the discussion by indicating there would be no more action on Senate Bill 252, the Medicaid expansion bill, until further notice.

**House Committee Hears Mental Health Treatment Bill**

The House Insurance Committee heard testimony on House Bill 2459 known as the Kristi L. Bennett Mental Health Parity Act. This legislation requires health insurers to provide in-network treatment without prior authorization, concurrent reviews, retrospective reviews or other utilization reviews for 14 days of covered inpatient treatment. In addition, the bill requires 180 days of outpatient treatment for persons experiencing suicidal ideation, those actively suicidal, or those suffering from substance use disorders. The insurance carrier would be required to provide network exceptions to ensure the patient was admitted to an inpatient treatment facility within 24 hours when no in-network facility was immediately available. Medical necessity would be determined by the treating provider and the patient, not the insurance carrier.
Those testifying in favor of the bill included the director of clinical services and behavioral health at AdventHealth Shawnee Mission, the sister of Kristi Bennett and a mother who represented 26 mothers whose children took their own life, including her own son. Other proponents included representatives from the Kansas Mental Health Coalition, the Kansas Association of Community Mental Health Centers and the Kansas Association of Social Workers. The Kansas Hospital Association provided written testimony supporting House Bill 2459. Proponents told story after story of desperate family members and patients who sought treatment for mental and behavioral health issues only to be repeatedly denied coverage by their insurance carrier. Opponents of House Bill 2459 were Blue Cross and Blue Shield of Kansas, the Kansas Chamber of Commerce and the National Association of Commercial Health Insurers. Blue Cross cited the cost of the proposed treatment mandates and estimated covering just state employees would cost $3 million of taxpayer money per year. Committee members instructed opponents to meet with proponents, develop other options and present them to the committee. The chairman closed the meeting without taking action on the bill.

**House Committee Begins KDHE Budget Hearings**

The House Social Services Budget Committee, chaired by Representative Will Carpenter (R-El Dorado), met yesterday afternoon to begin discussions of the Kansas Department of Health and Environment Division of Health and Healthcare Finance budget. The focus was primarily on presentations by the agency and legislative staff. The division budget is funded 60 percent from federal funds, 25 percent from state funds, with the rest coming from a mix of fee funds, interagency transfers, trusts and the Children’s Initiatives Fund. Aid and assistance, which includes the Medicaid program, makes up 88 percent of the agencies expenditures. Testimony was provided in support of funding the KDHE Posture Seating Program, which provided custom wheelchairs for people with disabilities who cannot use a standard wheelchair. There were several requests for additional funding by advocates that included $1.9 million for aid to local health departments, $150,000 to create a state-driven oral health plan, $11.1 million to increase the protected income level for those with disabilities on Medicaid from $1,177 per month to 300 percent of the federal poverty level ($3,190), and the funding of Medicaid expansion in Kansas.

**Introduction of Bills**

**House Bill 2618** – Concerning broadband deployment; relating to the Kansas Department of Commerce, Kansas Office of Broadband Development; establishing the Kansas Broadband Deployment Grant Program. By the Committee on Energy, Utilities and Telecommunications.

**House Bill 2629** – Concerning health and health care; relating to the Kansas Department for Aging and Disability Services; regulation of supplemental nursing services agencies. By the Committee on Children and Seniors.

**House Bill 2630** – Concerning health professions and practices; relating to the regulation of dentists; Kansas Dental Board; disciplinary action; licensure; updating certain provisions of the Kansas Dental Practices Act. By the Committee on Health and Human Services.
**House Bill 2631** – Concerning insurance; relating to pharmacy benefits managers; the federal 340B Drug Pricing Program; prohibiting disparate treatment of certain pharmacies and pharmaceutical services providers. By the Committee on Health and Human Services.

**House Bill 2633** – Concerning insurance; relating to health benefit plans that provide dental services; health insurers that directly offer dental services; establishing requirements relating to information disclosure, claims processing and reimbursement. By the Committee on Health and Human Services.

**Senate Bill 407** – Concerning the Kansas Department for Aging and Disability Services; relating to psychiatric care; requiring the department to operate acute inpatient psychiatric beds for children in certain locations. By the Committee on Ways and Means.

**Senate Bill 409** – Concerning skilled nursing care facilities; relating to the quality care assessment imposed on such facilities; making such assessment permanent. By the Committee on Ways and Means.