



KPHA E-NEWS UPDATE



February 7, 2005

Questions? director@kpha.us

Table of Contents

[KPHA Legislative Update for the Week of February 2](#)

[Workshop for Health Care Professionals](#)

[FINAL REMINDER: APHA Call for Abstracts Deadlines Approaching](#)

[First Pay for Performance Initiative for Physicians Under the Medicare Program](#)

KPHA Legislative Update for the Week of February 2



We learned this week that the state's tax-only revenues for January were above the expectations by \$39 million which brought-Nov. 3 tax-only revenues up \$33.8 million. (This may mean more revenue either for ending balances in the state budget or more money that can be put into some form of school finance proposal to substitute for new taxes.)

With a vote of 86-37, the House, Wednesday morning, approved placing a proposed constitutional resolution banning same-sex marriages on the April 5 election ballot. The House Public Health Committee introduced a bill to allow advanced registered nurse practitioners to prescribe drugs without a sign-off by a physician; another would allow a doctor to order an extension of hospitalization for a patient, regardless of health insurance policy limits or diagnostic related groups. KPHA testified at a hearing on HB 2137, requiring vending machines in high schools to contain health foods and beverages. There were more opponents than opponents, but the bill has a way to go to become law.

In the Senate, Sen. Phil Journey, R-Haysville, introduced a bill that would prohibit post-16-week abortions at any place but an acute care hospital or an ambulatory surgical center. Another Senate bill would have the State Board of Education prescribe nutritional standards for all food and drink available to students in public schools and local school boards would have to follow the state standards.

KPHA's Legislative Committee continues to study and determine which bills we will support, oppose, monitor or remain neutral upon. Chairman Kim Richter is establishing a program at KUMC that will continue to build upon her legacy to Public Health in Kansas, including being a past being President of KPHA in 2004, and the originator of the Poster Abstracts at the Annual Meetings. As a part of their educational process, four of Dr.Richter's students will be here to intern this month and are helping with the 2005 KPHA legislative "watch" and practical aspects of legislative

health policy in Kansas. They will be a welcome addition and it will hopefully be a very good learning experience for the students. This will become an ongoing option to medical students at KU as a capstone project.

It would take too long to read all of the bills introduced in the legislature, so far, that may pertain to public health, so here are just a few bills with the "meat" of what they do:

SB 75 - This bill would enact the Obesity Frivolous Lawsuit Act, and would preclude civil liability for claims arising out of weight gain, obesity or health conditions arising out of weight gain or obesity. If enacted, however, the bill would not preclude civil liability where the claim of weight gain, obesity, or health condition associated with weight gain or obesity, or other generally known condition allegedly caused by or allegedly likely to result from long-term consumption of food is based on: (1) A material violation of an adulteration or misbranding requirements prescribed by statute and regulations, and the claimed injury was proximately caused by such violation; (2) any other violation of federal and state law applicable to the manufacturing, marketing, distribution, advertising, labeling, or sale of food, provided that such violation is knowingly and willfully committed and the claimed injury is proximately caused by such violation. The provisions of this bill shall apply to all covered claims pending on July 1, 2005, and all claims filed thereafter.

HB 2110 - This bill would allow the Commissioner of Insurance to appoint a medical review panel to act as an expert advisory panel for the purpose of hearing complaints against health care providers prior to commencing action in court. The panel's decision shall be without administrative or judicial authority and shall not be binding on any party. The opinion reached by the panel shall be admissible as evidence in any action subsequently brought by the claimant in state or federal court. However, any amount recommended by the panel in settlement of the claim shall be inadmissible. Panel members shall have absolute immunity from civil liability as a result of their participation. [Back to top](#)

Workshop for Health Care Professionals

These two trainings will have differing subject matters and will be a valuable opportunity for all clinic and healthcare staff.

The information presented in these trainings regarding smoking cessation can be applied to all patient populations.

Participating clinics (Saline County only) will be given the opportunity to apply for mini-grants of up to \$1000.

Participants will receive a free CD-ROM in-service program, entitled "*Smoking Cessation for Pregnancy and Beyond.*" The CD-ROM program has been approved for continuing education hours for physicians, nurses, and social workers.

RSVP by February 11, 2005 to: Jill Montgomery, Director, Saline County Tobacco Use Prevention Program at 785-825-6224 or jmontgomery@c-k-f.org.

**Workshop Presented by:
Cecelia A. Gaffney, M.Ed.
Dartmouth Medical School
February 24, 2005
Salina Country Club, Main Dining Room**

Agenda

8:30-11:00 a.m.	Implementation of Best Practices for Treating Tobacco Use Among Pregnant Women (Continental Breakfast Provided)
11:30a.m.-1:00 p.m.	Research on Interventions in Treating Tobacco Use Among Pregnant Women (Lunch Provided)

The presentation and meal are sponsored by the Salina County Tobacco Use Prevention Program and the Salina/Salina County Health Department.

[Back to top](#)

FINAL REMINDER: APHA Call for Abstract Deadlines Approaching



This is a final reminder that the APHA Call for Abstract deadlines are this week. We encourage you to submit your abstract as soon as possible. After the deadlines have been reached no additional submissions will be accepted.

NOTE: If you submit one to APHA consider sending your submission to KPHA for our Spring Training or Fall Annual Conference to director@kpha.us.

2005 Call for Abstracts

APHA 133rd Annual Meeting & Exposition
November 5-9, 2005 New Orleans, LA

The American Public Health Association is announcing the Call for Abstracts for the 2005 Annual Meeting to be held November 6-10, in New Orleans, LA. The theme of the meeting is "*Evidence-Based Policy and Practice*." We encourage abstracts in all areas of public health and are also interested in abstracts that focus on the Annual Meeting theme. Abstracts should be no more than 250 words and must include learning objectives.

All abstracts must be submitted online. An easy to use online form will walk you through the process step-by-step. You can link directly to the abstract submission form through the APHA website at <http://www.apha.org/meetings> or <http://apha.confex.com/apha/133am/oasys.epl>.

Authors must provide complete and accurate contact information in order to be notified via email by June 1. You do not have to be a member of APHA to submit an abstract, however, if your abstract is accepted, presenting authors must become an Individual member as well as register for the Annual Meeting.

The deadlines for submission of abstracts range from February 7-12 depending on the Section, SPIG or Caucus to which you wish to submit. All submissions will end at 11:59 pm (Pacific Standard Time) on the due date listed on the Call for Abstracts.

We welcome your submission and look forward to your contribution at the APHA 133rd Annual Meeting in New Orleans, LA.

Donna Wright
APHA Program Planner
donna.wright@apha.org
202/777-2477
202/777-2530 (fax)

133rd APHA Annual Meeting and Exposition
November 5-9, 2005
New Orleans, LA
www.apha.org/meetings

[Back to top](#)

First Pay for Performance Initiative for Physicians Under the Medicare Program



CMS announced that ten large physician groups across the U.S. will participate in the first pay-for-performance initiative for physicians under the Medicare program. The Physician Group Practice demonstration gives physician groups an opportunity to demonstrate that improving care in a proactive and coordinated manner also saves money.

During the three-year Physician Group Practice project, CMS will reward ten physician groups in various communities across the nation that improve patient outcomes by coordinating care for chronically ill and high cost beneficiaries in an efficient manner.

CMS will assess both quality performance and quality improvement under the demonstration. The quality measures that will be used focus on common chronic illnesses in the Medicare population, including congestive heart failure, coronary artery disease, diabetes mellitus, hypertension, as well as preventive services, such as influenza and pneumococcal pneumonia vaccines and breast cancer and colorectal cancer screenings.

Under the demonstration, physician groups will continue to be paid on a fee-for-service basis. Physician groups will implement care management strategies designed to anticipate patient needs, prevent chronic disease complications and avoidable hospitalizations, and improve quality of care. Depending on how well these strategies work in improving quality and avoiding costly complications, physician groups will be eligible for performance payments.

Further information on the demonstration [click here](#). [Back to top](#)

Copyright 2004. Kansas Public Health Association. All rights reserved.