

Corrected May 26, 2020
SESSION OF 2020

**SECOND CONFERENCE COMMITTEE REPORT BRIEF
SENATE SUBSTITUTE FOR HOUSE BILL NO. 2054**

As Agreed to May 21, 2020

Brief*

Senate Sub. for HB 2054 would create and amend law and make appropriations regarding the governmental response to the 2020 COVID-19 pandemic in Kansas, as follows.

Coronavirus Relief Funds

The bill would appropriate the Coronavirus Relief Fund (CRF) in the Legislative Coordinating Council (LCC) to provide relief for the effects of coronavirus in the state of Kansas in both FY 2020 and FY 2021. The bill would transfer all moneys and obligations upon the current Coronavirus Relief Fund – Federal Fund of the Office of the Governor into the newly created fund in the LCC. The bill would abolish the current Coronavirus Relief Fund – Federal Fund in the Office of the Governor.

Prior to expenditures or transfers from the CRF, Kansas state agencies would submit expenditure requests to the Director of the Budget, who would present the requests to the Legislative Budget Committee (LBC). The LBC would meet and review each request and make recommendations regarding the agency requests to the LCC. The expenditures would be approved upon an affirmative vote of five members of the LCC. The bill would also permit the LCC to continue

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approving such requests during the Legislative Session. If approval is granted, the Director of Accounts and Reports would appropriate any funds necessary and transfer the moneys in the CRF to either existing or newly appropriated funds.

In addition to the CRF funds, the bill would apply the same approval process described above to any federal funds received under the federal Coronavirus Aid, Relief, and Economic Security (CARES) Act, the Families First Coronavirus Response Act (Families First Act), the Paycheck Protection Program and Health Care Enhancement Act, and any other federal law that provides moneys to the state for aid for coronavirus relief.

The bill would render the provisions of the 2019 and 2020 appropriations bills that provide general authority for the Governor to approve expenditure of federal funds as null and void, as it relates to aid received for the purposes of federal coronavirus relief.

State of Disaster Emergencies, Kansas Emergency Management Act, and Authority of Local Officials

The bill would create and amend law related to state of disaster emergencies and the Kansas Emergency Management Act (KEMA), including the following provisions.

Ratification and Limitation of 2020 State of Disaster Emergencies

The bill would create a new section of law ratifying the COVID-19-related state of disaster emergency declared by the Governor on March 12, 2020, and ratified and continued by concurrent resolution through May 1, 2020. The bill also would ratify and continue through May 31, 2020, the state of disaster emergency declared by the Governor on April 30,

2020, and extended by the State Finance Council through May 26, 2020.

This section also would prohibit the Governor from proclaiming any new COVID-19-related state of disaster emergency during 2020, unless the Governor makes specific application to the State Finance Council and such action is approved by an affirmative vote of at least six legislative members. If the Governor proclaims a new state of disaster emergency, the Governor would be required to make specific application to the State Finance Council, and an affirmative vote of six of the legislative members would be required, to order the closure or cessation of any business or commercial activity.

Closure or Cessation of Business or Commercial Activity

The bill would create a section of law applicable during any state of disaster emergency declared under KEMA, allowing the Governor to order the closure or cessation of any business or commercial activity in response to any or all conditions necessitating the declared state of disaster emergency for 15 days. Upon specific application by the Governor to the State Finance Council, and an affirmative vote of at least six legislative members of the council, the closure or cessation of business or commercial activity may be extended for specified periods not to exceed 30 days each.

Any order violating or exceeding these restrictions would not have force and effect of law during the period of a state of disaster emergency and would be null and void.

The provisions of this section would expire on January 26, 2021.

Amendments to KEMA

The bill would amend the section of KEMA allowing the Governor to declare a state of disaster emergency to specify this power is subject to the specific limits provided above regarding a COVID-19 new state of disaster emergency in 2020. The bill would add a provision stating the COVID-19 state of disaster emergency declared on April 30, 2020, shall terminate on May 31, 2020, except when the Legislature is not in session and upon specific application by the Governor to the State Finance Council and an affirmative vote of at least six legislative members of the Council, this state of emergency may be extended for specified periods not to exceed 30 days each, and no such extension shall continue past the fifteenth day of the 2021 Legislative Session.

The bill would amend the section of KEMA governing the powers of the Governor during a state of disaster emergency to:

- Specify the orders the Governor may issue are to exercise the powers conferred in this section;
- Specify these orders may be issued during the state of disaster emergency ratified by the bill;
- Require the Governor to call a meeting of the State Finance Council within 24 hours of the issuance of any such order, for the purposes of reviewing the order;
- Replace a provision allowing such orders to be ratified by concurrent resolution of the Legislature with a provision declaring such orders null and void after the period of a state of disaster emergency has ended;
- Remove references to proclamations;

- Amend a provision allowing the Governor to perform and exercise other functions, powers, and duties to specify these must be in conformity with the *Kansas Constitution* and *Bill of Rights* and with the statutes of the state of Kansas, except any regulatory statute specifically suspended under the authority of this section;
- State the Governor shall not have the power or authority to temporarily or permanently seize, or authorize seizure of, any ammunition, or to suspend or limit the sale, dispensing, or transportation of firearms or ammunition pursuant to this section's listing of powers or any other executive authority;
- Require each order issued under the authority of this section to specify the provision or provisions by specific reference to each paragraph of subsection(c) that confers the power under which the order was issued, and
- Allow the Board of County Commissioners of any county to issue an order relating to public health that contains provisions that are less stringent than the provisions of a statewide executive order issued by the Governor. Any Board of County Commissioners issuing such an order would be required to make a finding, based upon advice from the local health officer or other local health officials, that the scope of provisions in the Governor's executive order are not necessary to protect the public health and safety of the county to be implemented in the county.

The bill also would make technical amendments to this section to ensure consistency in statutory references.

The bill would amend the KEMA section making violation of KEMA or of any rule and regulation or lawful order or proclamation made pursuant to it a class A misdemeanor to:

- Remove a “knowing and willful” intent requirement;
- Change the penalty from a class A misdemeanor to a civil penalty of up to \$2,500 per violation, which may be assessed in addition to any other penalty provided by law;
- Direct enforcement of the section through an action brought under Chapter 60 of the *Kansas Statutes Annotated*, by the Attorney General or the county or district attorney in the county in which the violation took place, with any civil penalties recovered by a county or district attorney to be paid into the general fund of the county where the proceedings were instigated; and
- Allow the Attorney General or any county or district attorney to bring an action to enjoin, or to obtain a restraining order, against a person who has violated, is violating, or is otherwise likely to violate KEMA.

Authority of Local Officials

The bill would amend a statute governing states of local disaster emergency to require any state of local disaster emergency declaration be approved by the Board of County Commissioners or the governing body of the city, respectively, at the next meeting of the governing body.

The bill would amend statutes regarding county boards of health and local health officers to clarify and standardize phrasing and to require any order issued by the county health officer, including orders issued as a result of an executive order of the Governor, and orders on behalf of a county regarding the remediation of any infectious disease, be

approved by the Board of County Commissioners of the county affected by such order at the next meeting of the board. Any such approval would be required to include an expiration date set by the Board of County Commissioners and could be revoked at an earlier date by a majority vote of the board. The bill would remove provisions requiring payment of compensation out of the county treasury and allowing removal of the local health officer by the Secretary of Health and Environment. The bill would amend a statute governing home rule powers to prohibit counties from exempting from or effecting changes in these statutes.

***COVID-19 Response and Reopening for Business
Liability Protection Act (Act)***

The bill would create the COVID-19 Response and Reopening for Business Liability Protection Act (Act), as follows.

Definitions

The bill would define the following terms: “COVID-19,” “COVID-19 claim,” “COVID-19 public health emergency,” “disinfecting or cleaning supplies,” “healthcare provider,” “person,” “personal protective equipment,” “product liability claim,” “public health guidance,” and “qualified product.”

Healthcare Provider Immunity

The bill would state, notwithstanding any other provision of law, a healthcare provider is immune from civil liability for damages, administrative fines, or penalties for acts, omissions, healthcare decisions, or the rendering of or the failure to render healthcare services, including services that are altered, delayed, or withheld, as a direct response to any COVID-19 state of disaster emergency under the KEMA.

This immunity would apply to any claims for damages or liability arising out of or relating to acts, omissions, or healthcare decisions occurring during any state of disaster emergency pursuant to KEMA, related to COVID-19.

This immunity would not apply to civil liability when it is established that the act, omission, or healthcare decision constituted gross negligence or willful, wanton, or reckless conduct. This immunity also would not apply to healthcare services not related to COVID-19 that have not been altered, delayed, or withheld because of the COVID-19 public health emergency.

Business Liability

The bill would state that, notwithstanding any other provision of law, a person (or agent of such person) conducting business in Kansas shall not be held liable for a COVID-19 claim if the act or omission alleged to violate a duty of care was mandated or specifically and affirmatively permitted by a federal or state statute, regulation, or executive order passed or issued in response to the COVID-19 pandemic and applicable to the activity at issue at the time of the alleged exposure. The bill would state this provision would apply retroactively to any cause of action accruing on or after March 12, 2020.

Product Liability

The bill would state that, notwithstanding any other provision of law, a person who designs, manufactures, sells, distributes, provides, or donates a qualified product in response to the COVID-19 public health emergency shall not be liable in a civil action alleging a product liability claim involving the product if any of the above actions were taken at the specific request of or in response to a written order or other directive finding a public need for a qualified product, issued by the Governor, Adjutant General, or Division of

Emergency Management, and the damages are not occasioned by willful, wanton, or reckless disregard of a known, substantial, and unnecessary risk that the product would cause serious injury to others. The bill would state this provision would apply retroactively to any cause of action accruing on or after March 12, 2020.

Other Provisions

The bill would state that nothing in the Act creates, recognizes, or ratifies a claim or cause of action of any kind; eliminates a required element of any claim; affects workers' compensation law, including the exclusive application of such law; or amends, repeals, alters, or affects any other immunity or limitation of liability. The bill would state this provision would apply retroactively to any cause of action accruing on or after March 12, 2020.

Validity of Notarial Acts

The bill would create a new section of law, outside the Revised Uniform Law on Notarial Acts (RULONA), stating that notarial acts performed by a Kansas notary public while the personal appearance requirements are suspended pursuant to an executive order or other state law, shall be valid as if the individual had met the personal appearance requirement, even if the individual failed to do so, as long as the notarial act fulfills all requirements prescribed by the executive order or other state law and all other requirements not relating to personal appearance.

First Responder Notifications

The bill would create a new section requiring, during a COVID-19-related state of disaster emergency declared under KEMA, each county health officer to work with first responder agencies operating in the county to share

information indicating where a person testing positive for, or under quarantine or isolation due to, COVID-19 resides or can be expected to be present. The bill would require the information include the person's address and duration of any quarantine, isolation, or expected recovery period, as determined by the county health officer, and only be used for the purpose of allowing the first responders to be alert to the need for utilizing appropriate personal protective equipment during the response activity.

The bill would require the above information be provided to the 911 call center serving the address provided and would limit the 911 call center to disseminating the information only to first responders responding to the listed address.

The information would not be a public record and would not be subject to the Kansas Open Records Act (KORA). This records provision would expire on July 1, 2025, unless the Legislature reviews and reenacts the provision pursuant to the applicable section of KORA.

Adult Care Homes

The bill would create a new section of law requiring the Kansas Department for Aging and Disability Services (KDADS) to take the following actions with regard to adult care homes:

- Promptly, and no later than 30 days following the effective date of the bill, make or cause to be made infection control inspections;
- Provide the necessary personal protective equipment, sanitizing supplies, and testing kits appropriate to the needs of each facility on an ongoing basis, based upon:
 - Current number of residents;

- Current number of full-time and part-time staff members;
 - Number of residents and staff who have tested positive for COVID-19 in the last 14 days;
 - Ability to separate residents with COVID-19 from non-COVID-19 residents; and
 - Any other factors deemed relevant by the Secretary for Aging and Disability Services; and
- Ensure that infection prevention and control best practices and recommendations based upon guidance from the U.S. Centers for Disease Control and Prevention and the Kansas Department of Health and Environment (KDHE) are adopted and made available publicly.

Health Care

Telemedicine

The bill would create a section of law addressing telemedicine, including the following provisions.

The bill would allow a physician to issue a prescription or order administration of medication, including a controlled substance, for a patient, without conducting an in-person examination of the patient.

A physician under quarantine, including self-imposed quarantine, would be allowed to practice telemedicine.

A physician licensed in another state could practice telemedicine to treat patients in Kansas, if the physician advises the Board of Healing Arts (Board) of such practice in writing and in a manner determined by the Board and the physician holds an unrestricted license to practice medicine

and surgery in the other state and is not the subject of any investigation or disciplinary action by the licensing agency. The Board would be allowed to extend this provision to other healthcare professionals licensed and regulated by the Board as deemed necessary by the Board to address the impacts of COVID-19 and consistent with ensuring patient safety.

The bill would require a physician practicing telemedicine under this section to conduct an appropriate assessment and evaluation of the patient's current condition and document the appropriate medical indication for any prescription issued.

The bill would specify this section would not supersede or otherwise affect the provisions of statutes governing performance of abortions or prohibition of abortions delivered *via* telemedicine.

The section would define "physician" and "telemedicine." The section would expire on January 26, 2021.

Hospitals and Medical Care Facilities

The bill would create a new section of law regarding hospital and medical care facility usage, including the following provisions.

The section would allow a hospital to admit patients in excess of its number of licensed beds or inconsistent with its licensed classification of beds, to the extent the hospital determines is necessary to treat COVID-19 patients and to separate COVID-19 patients and non-COVID-19 patients. A hospital admitting patients in this manner would be required to notify KDHE as soon as practicable, but prior authorization would not be required.

The section would allow a hospital to use non-hospital space, including off-campus space, to perform COVID-19 testing, triage, quarantine, or patient care, to the extent the

hospital determines is necessary to treat COVID-19 patients and to separate COVID-19 patients and non-COVID-19 patients. The KDHE could impose reasonable safety requirements on such use to maximize the availability of patient care, and non-hospital space used in this manner would be deemed to meet the requirements of a statute governing provision of services by a hospital consisting of more than one establishment. A hospital using non-hospital space in this manner would be required to notify the KDHE as soon as practicable, but prior authorization would not be required.

The section would allow a medical care facility to permit healthcare providers authorized to provide healthcare services in Kansas to provide healthcare services at such medical facility without becoming a member of the facility's medical staff.

“Hospital” and “medical care facility” would have the same meanings as in statutes governing hospital and related facility licensing, inspection, and regulation.

The section would expire 120 calendar days after the expiration or termination of the state of disaster emergency proclamation issued by the Governor in response to the COVID-19 public health emergency, or any extension thereof.

Temporary Emergency License

The bill would create a new section of law allowing the Board to grant a temporary emergency license to practice any profession licensed, certified, registered, or regulated by the Board to an applicant with qualifications the Board deems sufficient to protect public safety and welfare, within the scope of professional practice authorized by the temporary emergency license, for the purpose of preparing for, responding to, or mitigating any effect of COVID-19.

The section would expire on January 26, 2021.

Temporary Licensure Measures for Additional Healthcare Providers

The bill would create a new section of law, notwithstanding any applicable law to the contrary, allowing physician assistants (PAs) to provide healthcare services appropriate to such provider's education, training, and experience within a designated healthcare facility at which the PA is employed or contracted to work as necessary to support the facility's response to the COVID-19 pandemic without a written agreement with a supervising physician, and would not be liable in any criminal prosecution, civil action or administrative proceeding arising out of the lack of such written agreement.

The bill also would allow advanced practice registered nurses (APRNs) and nurse anesthetists to provide healthcare services appropriate to each provider's education, training, and experience within a designated healthcare facility at which the provider is employed or contracted to work as necessary to support the facility's response to the COVID-19 pandemic without direction and supervision from a responsible physician. APRNs and nurse anesthetists providing health care under the provisions of this section would not be liable in any criminal prosecution, civil action, or administrative proceeding arising out of a lack of direction and supervision from a responsible physician.

Licensed practical nurses (LPNs) would be allowed to provide healthcare services appropriate to such provider's education, training, and experience within a designated healthcare facility at which the LPN is employed or contracted to work as necessary to support the facility's response to the COVID-19 pandemic without direction from a registered professional nurse (RN) and would not be liable in any criminal prosecution, civil action, or administrative proceeding arising out of such LPN's lack of supervision from an RN. The bill would allow an RN or LPN to order the collection of throat or nasopharyngeal swab specimens from individuals

suspected of being infected by COVID-19 for purposes of testing.

The bill would allow licensed pharmacists to provide care for routine health maintenance, chronic disease states, or similar conditions appropriate to such pharmacist's education, training, and experience within a designated healthcare facility at which the pharmacist is employed or contracted to work as necessary to support the facility's response to the COVID-19 pandemic without a collaborative practice agreement with a physician and would not be liable in any criminal prosecution, civil action, or administrative proceeding arising out of such pharmacist's lack of collaborative practice agreement with a physician.

The bill would allow an RN or LPN who holds a license that is exempt, inactive, or has lapsed within the past five years from the effective date of the bill to provide healthcare services appropriate to the nurse's education, training, and experience and would not be liable in any criminal prosecution, civil action, or administrative proceeding arising out of such nurse's exempt, inactive, or lapsed license.

The bill would authorize a designated healthcare facility, as necessary to support the facility's response to the COVID-19 pandemic, to:

- Allow a student who is enrolled in a program to become a licensed, registered, or certified healthcare professional to volunteer for work within such facility in roles that are appropriate to such student's education, training, and experience;
- Allow a licensed, registered, or certified healthcare professional or emergency medical personnel who is serving in the military in any duty status to volunteer or work within such facility in roles that are appropriate to such military service member's education, training, and experience; and

- Allow a medical student, physical therapist, or emergency medical services provider to volunteer or work within such facility as a respiratory therapist extender under the supervision of a physician, respiratory therapist, or APRN. Such respiratory therapist extender would be allowed to assist respiratory therapists and other healthcare professionals in the operation of ventilators and related devices and provide other healthcare services appropriate to such provider's education, training, and experience, as determined by the facility in consultation with such facility's medical leadership.

The bill would allow a healthcare professional licensed and in good standing in another state to practice such profession in the state of Kansas. A license that has been suspended or revoked or a licensee who is subject to pending license-related disciplinary action would not be considered to be in good standing. Any license that is subject to limitation in another state would be subject to the same limitation in the state of Kansas. Such healthcare professional would not be liable in any criminal prosecution, civil action, or administrative proceeding arising out of such healthcare professional's lack of licensure in the state of Kansas.

The bill would allow, subject to any terms and conditions established by the Secretary of Health and Environment, a designated healthcare facility to use a qualified volunteer or qualified personnel affiliated with any other designated healthcare facility as if such volunteer or personnel was affiliated with the facility using such volunteer or personnel.

The bill would allow a healthcare professional to be licensed, certified, or registered or to have such license, certification, or registration reinstated within five years of lapse or renewed by the applicable licensing agency of the

state of Kansas without satisfying the following conditions of licensure, certification, or registration:

- An examination, if such examination's administration has been canceled while the state of disaster emergency proclamation issued by the Governor in response to the COVID-19 pandemic is in effect;
- Fingerprinting;
- Continuing education; and
- Payment of a fee.

The bill would provide that a professional certification in basic life support, advanced cardiac life support, or first aid shall remain valid if such professional certification is due to expire or be canceled while the state of disaster emergency proclamation issued by the Governor in response to the COVID-19 pandemic is in effect.

Fingerprinting of individuals would not be required as a condition of licensure and certification for any hospital, adult care home, county medical care facility or psychiatric hospital.

The bill would state "appropriate to such professional's education, training and experience," or words of like effect, shall be determined by the designated healthcare facility in consultation with such facility's medical leadership and would define "designated healthcare facility."

The provisions of the section would expire on January 26, 2021.

Critical Access Hospitals

The bill would amend the definition of “critical access hospital” in a statute governing rural health networks to add a provision stating that, prior to June 30, 2021, to the extent a critical access hospital determines is necessary to treat COVID-19 patients or to separate COVID-19 patients and non-COVID-19 patients, the hospital would not be limited to 25 beds, and a facility with an approved swing bed agreement would not be limited to a combined total of 25 extended care and acute care beds or limited to providing acute inpatient care for a period of time that does not exceed, on an annual average basis, 96 hours per patient.

The bill also would make technical amendments to this statute to ensure consistency in statutory phrasing.

Court Videoconferencing

The bill would amend a provision enacted in 2020 House Sub. for SB 102 to allow the Chief Justice of the Kansas Supreme Court to issue an order authorizing the use of two-way electronic audio-visual communication (videoconferencing) in any court proceeding, when the Chief Justice determines such action is necessary to secure the health and safety of court users, staff, and judicial officers, by removing language limiting application of this provision to periods during any state of disaster emergency under KEMA. [Note: Under continuing law, the provisions of this section would expire on March 31, 2021.]

Sale of Alcoholic Liquor

The bill would amend the statute governing removal of unconsumed alcoholic liquor from premises of a club or drinking establishment to allow legal patrons to remove from the licensed premises one or more containers of alcoholic

liquor not in the original container, subject to the following conditions:

- It must be legal for the licensee to sell the alcoholic liquor;
- Each container of alcoholic liquor must have been purchased by a patron on the licensed premises;
- The licensee or the licensee's employee must provide the patron with a dated receipt for the alcoholic liquor; and
- Before the container of alcoholic liquor is removed from the licensed premises, the licensee or the licensee's employee must place the container in a transparent bag that is sealed in a manner that makes it visibly apparent if the bag is subsequently tampered with or opened.

These provisions would expire on January 26, 2021.

[*Note:* The above paragraph is revised to update the expiration date from “the date on which the federal major disaster declaration (DR-4504) declared on March 29, 2020, is terminated” to “January 26, 2021.”]

Unemployment Compensation

The bill would make a number of temporary changes to the state unemployment compensation system in response to the COVID-19 pandemic.

The bill would include a policy statement that Kansas is committed to maintaining and strengthening access to its unemployment compensation system.

The bill would provide that a claimant is not ineligible for benefits on the basis of not actively seeking work during a

disaster emergency proclaimed by the Governor and in response to the spread of COVID-19 and the State has temporarily waived the work search requirement in compliance with the Families First Act.

Additionally, the bill would waive the waiting week requirement for new claims filed from April 5, 2020, through December 26, 2020, in accordance with the Families First Act and the CARES Act.

The bill would require employers to provide any notifications to individuals in the service of the employer as required by the Secretary of Labor pursuant to the Families First Act.

For calendar year 2021, the bill would limit unemployment contribution rates for employers to the standard rate schedule and prohibit an additional solvency adjustment.

The bill would provide that benefits paid as a result of employees being discharged by an employer directly impacted by COVID-19 in accordance with the Families First Act would not be charged to the account of the contributing employer.

Under the bill, payments of unemployment compensation that are wholly reimbursed to a reimbursing employer by the federal government shall be charged for the purpose of such reimbursement under the CARES Act.

The bill also would eliminate the prohibition of negative account employers participating in shared work plans, but would provide that shared work plans may be approved only if the Secretary of Labor determines the contributing employer does not adversely impact the State's eligibility under Section 2108 of the CARES Act, which provides for federal reimbursement of certain shared work plan payments.

Severability Clause

The bill would include a severability provision, stating if any portion of the act or application thereof to any person or circumstance is held unconstitutional or invalid, such invalidity would not affect other portions that can be given effect without the invalid portion or application, and such other portions would remain valid and enforceable.

Effective Date

The bill would be in effect upon publication in the *Kansas Register*.

Conference Committee Action

The second Conference Committee agreed to remove the contents of Senate Sub. for HB 2054, as it entered conference, regarding credit union field-of-membership requirements and deduction of certain net interest income.

The second Conference Committee then agreed to add the following provisions related to the governmental response to the 2020 COVID-19 pandemic:

- Language taken from Senate Sub. for HB 2396, as recommended by Senate Committee, regarding:
 - CRF appropriations and oversight;
 - Ratification of state of disaster emergencies (with a date change);
 - Limits on business closure or cessation (modified by the Conference Committee);
 - First responder notifications;
 - KDADS duties regarding adult care homes;

- Telemedicine, hospital space use, and temporary licensing of certain health care professionals;
- Unemployment insurance; and
- Amendments to KEMA (modified by the Conference Committee);
- Language taken from Senate Sub. for HB 2244, as recommended by Senate Committee, regarding healthcare and business liability (modified to remove premises owner liability provisions);
- A provision regarding court videoconferencing;
- A provision ratifying certain notarial acts;
- Additional temporary licensing of healthcare professionals;
- A provision regarding sale of alcoholic liquor;
- Provisions regarding authority of local officials; and
- A severability provision.

Background

The second Conference Committee agreed to remove the contents of Senate Sub. for HB 2054, as it entered conference, regarding credit union field-of-membership requirements and a deduction of certain net interest income for financial institutions subject to the Kansas Financial Institutions Privilege Tax. [Note: These topics were addressed in Senate Sub. for HB 2619.]

Many of the provisions added by the second Conference Committee related to the governmental response to the 2020 COVID-19 pandemic were drawn from or based upon language in Senate Sub. for HB 2396 (COVID-19

governmental response) and Senate Sub. for HB 2244 (healthcare and business liability).

Senate Sub. for HB 2396 (COVID-19 Governmental Response)

As passed by the House in 2019, HB 2396 would have amended criminal sentencing law regarding drug abuse treatment programs and probation violation sanctions. These provisions were subsequently enacted in 2019 SB 18.

On May 19, 2020, the Senate Committee on Judiciary held an informational hearing on the topic of the Governor's state of disaster emergency responsibilities and powers pursuant to the KEMA. Conferees testifying before the Committee included the Kansas Attorney General; the Governor's chief of staff; a representative of the Kansas Association of Chiefs of Police, Kansas Peace Officers Association, and Kansas Sheriffs Association; representatives of Advanced Baseball / Fast Pitch Academy, Billy's Ayr Lanes, Cornerstone Data, Inc., Luke's Barber Shop, Patterson Sports Academy, Rapid Fit Health Club, and Summit Counseling; and a private citizen.

Four private citizens and representatives of the following businesses and organizations submitted written-only testimony on the topic: Burtis Motor Co., Drive 5 Sports Center, Eric Fisher Salon, Kansas Licensed Beverage Association, Kansas Policy Institute and Kansas Justice Institute, Kansas State Bowling Proprietors Association, Legal Shield, Midwest Sports Productions, Natural Baseball Academy, PARISI Speed School, Salon Knotty, Westurban Baseball, and Wichita Sports Forum.

On May 21, 2020, the Senate Committee recommended a substitute bill for HB 2396, replacing the language of the bill as introduced with COVID-19-related provisions regarding telemedicine, hospital and medical care facilities, temporary emergency licensure for regulated healthcare professionals,

critical access hospitals, unemployment compensation (based upon language adopted by the Senate Committee on Commerce in Senate Sub. for HB 2154), creation and oversight of the Coronavirus Relief Fund, state of disaster emergencies, limitation on the Governor's powers under KEMA, first responder notifications, and KDADS responsibilities for adult care homes.

No fiscal note was available for Senate Sub. for HB 2396 at the time of the Senate Committee action.

Senate Sub. for HB 2244 (Healthcare and Business Liability)

As passed by the House in 2019, HB 2244 would have enacted "Claire and Lola's Law," regarding possession of certain cannabidiol treatment preparations. Provisions based on this language were enacted in 2019 SB 28.

On May 18, 2020, the Senate Committee on Judiciary held an informational hearing on the topic of COVID-19 liability concerns and possible legislation. At the hearing, a representative of the Kansas Medical Society (KMS) and Kansas Hospital Association (KHA) presented draft legislation addressing liability protections for healthcare providers, as well as provisions from 2020 SB 493 regarding the Health Care Stabilization Fund. A representative of the Kansas Chamber of Commerce discussed draft legislation, later provided to the Committee, regarding business liability protections. A representative of the Kansas Livestock Association expressed support for limiting liability for COVID-19-related medical conditions within the agricultural industry. A representative of the Kansas Trial Lawyers Association stated the civil justice system works, even in times of crisis, and special laws, exceptions, and immunities from negligence are not needed to assure that justice prevails. A representative of the Kansas Bar Association (KBA) stated the KBA opposes blanket immunity for COVID-19-related claims against business and healthcare institutions.

Representatives of the following organizations submitted written-only testimony regarding the topic: AARP Kansas; American College of Obstetricians and Gynecologists; American Tort Reform Association; Cowley College; InterHab; Kansas Academy of Family Physicians; Kansas Advocates for Better Care; Kansas AFL-CIO; Kansas Association of Community College Trustees; Kansas Association of Technical Colleges; LeadingAge Kansas; League of Kansas Municipalities; National Federation of Independent Business; and Working Kansas Alliance.

On May 20, 2020, the Senate Committee recommended a substitute for HB 2244, replacing the language of the bill as passed by the House with language based upon the draft bill submitted by KMS and KHA, without the provisions regarding the Health Care Stabilization Fund, and the draft bill submitted by the Kansas Chamber of Commerce.

No fiscal note was available for Senate Sub. for HB 2244 at the time of the Senate Committee action.

COVID-19; Coronavirus Relief Fund; telemedicine; hospital and medical care facilities; temporary emergency licensure for healthcare professionals; critical access hospitals; unemployment compensation; state of disaster emergencies; Kansas Emergency Management Act; first responder notifications; adult care homes; sale of alcoholic liquor; local health boards; local health officers; court videoconferencing; business liability; healthcare liability

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