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Healthy People Build Strong Communities

Testimony of the Kansas Association of Local Health Departments (KALHD) to the

Senate Committee on Judiciary

Neutral for SB 273 • February 25, 2021

Chairwoman Warren and Members of the Committee:

Thank you for the opportunity to supply written, neutral testimony on Senate Bill 243 which deals with the Kansas Emergency Management Act (KEMA). KALHD is a nonprofit association dedicated to strengthening local health departments for the purpose of improving and protecting the health of all Kansans.

While KALHD understands the desire to do a number of these KEMA updates, we do have several concerns with this bill. Namely:

- Sec. 13: The bill adds a requirement for the KDHE secretary to maintain a public registry of all public health orders, including those under K.S.A. 65-201 and 65-202. Given even individual isolation and quarantine orders would appear to be subject to this, we are very concerned about both the workload of this request during times like a pandemic and displaying individual names in such a public registry as essentially confirming their disease status (if isolated) or exposure (if quarantined).
- Sec. 16: This modifies K.S.A. 65-201 to mandating commissioners review/amend/revoke local health officer orders, rather than making it voluntary. Again, this is a major workload concern, especially considering just how many individual orders solely related to isolation and quarantine can happen during a pandemic, and how time-consuming this process is versus relying on the expertise of the local health officer and only intervening when the commission feels it is warranted. Also, we have concerns about the ability for anyone to demand a commission meeting within 72 hours upon request of anyone aggrieved. Those most seriously impacted via an official isolation or quarantine order already have legal recourse per K.S.A. 65-129c.
- Sec. 17: This modifies K.S.A. 65-202, with our main area of concern being the limits on a local health officer's order authority. Mandating no ability to burden or inhibit religious gatherings could be a direct threat to public health and appears to have no exceptions for scientific reasons as most of the other limitations do. This would be a serious threat to the public's health. That said, the other changes in this section could also hamper the ability to control disease spread and should be carefully considered if they are in the best interests of Kansans.

Thank you for the opportunity to submit this neutral testimony.

Respectfully,

Dennis Kriesel

Executive Director, Kansas Association of Local Health Departments