

Executive Administrator Report

Carol Moreland, MSN, RN

March 2023

Upcoming 2023 NCSBN Meetings

- NCSBN NLC Midyear Meeting—March 27 in Seattle
- NCSBN Midyear Meeting—March 28—30 in Seattle
- APRN Roundtable—April 11—*Virtual*
- NCSBN Discipline Case Management Conference—May 22—24 in Greenville, SC
- Executive Officer Summit—June 21—23 in Newport Beach, CA
- NLC Annual Meeting—August 15 in Chicago
- NCSBN Annual Meeting—August 16—18 in Chicago
- NCLEX Conference—September 21

Board Member Terms:

- Julianna Rieschick (7/01/18 to 6/30/25—*second term*)
- Rebecca Sander (7/1/16 to 6/30/24—*second term*)
- Andrea Watson (7/1/20—6/30/24—*first term*)
- Adri Gouldsmith (7/1/19—6/30/23—*first term*)
- Giovannie Gone (7/1/20—6/30/24—*first term*)
- Lori Owens (7/1/21—6/30/25—*first term*)
- Melissa Oropeza (7/1/20—6/30/25—*first term*)
- Michaela Hysten (9/8/2022—6/30/2023—*first term appointed to complete a four-year term*)
- 1 Vacant RN position
- Brenda Sharpe (12/5/2022—6/30/2023—*first term appointed to complete a four-year term*)
- Michelle Terry (12/5/2022—6/30/2026—*first term*)

Information about Board Member vacancy added to newsletter

Regulation Revisions:

- CNE regulations draft revision - public hearing scheduled for 4/7/23 at 10 am)
- Revision to K.A.R. 60-2-103 is waiting for a public hearing to be scheduled

FY 23, 24 and FY 25 Budgets:

- Governor's budget recommendations are included in the Finance Committee packet.
- Governor's budget recommendations were approved in the Senate Ways and Means Committee and the House Appropriations Committee

S Sub for HB 2279 implementation:

- APRN Committee is working on the approval process for national certification agencies—is to be implemented on July 1, 2023
- Continue to work on getting accurate communication out regarding the content of the bill and the timelines

2023 Legislative Session:

- HB 2171—Fiscal note submitted
- HB 2239—Fiscal note submitted
- HB 2258—Fiscal note submitted
- HB 2337—Fiscal note submitted
- HB 2388—Testimony (*neutral*) and fiscal note submitted

Requiring that licensing bodies provide verified electronic credentials to credential holders, including military servicemembers and others receiving Kansas credentials based on their credentials from other jurisdictions, and use centralized electronic credential data management systems with instantaneous credential verification and an auditable record—*Passed favorably from the House Commerce, labor and Economic Development Committee with an amendment to exempt peace officers*

- SB 171—Fiscal note submitted
- SB 112—Testimony (*proponent*) and fiscal note submitted

Amending the scope of practice for registered nurse anesthetists to allow independent practice within the scope of the licensee's education and qualifications—*Passed favorably from the Senate Public Health and Welfare Committee*

Projects:

- Member of KBOR Healthcare/Nursing Task Force
- Developed one-page information sheets about KSBN
- Member of the CE Broker implementation team
- Submitted information for the next edition of the newsletter
- Covering CNE and IV Therapy due to vacant position

Meetings attended:

- Testimony to Special Committee on Mental health Beds—Nov. 28, 2022
- Re-approval site visit to Osawatomie State Hospital for Mental Health Technician program
- KCPNE and KCADN Program Administrators meeting—Dec. 12, 2022
- Board Task Force Meeting—Dec. 19, 2022
- Special Committee on Mental Health Beds Roundtable—Dec. 21, 2022
- NLC Commission Meeting (virtual) Jan. 10, 2023
- Board Task Force Meeting—Jan. 17, 2023
- Non Cabinet Agencies leadership Meeting - Jan. 26, 2023
- Testimony at Budget hearings: Senate Transparency & Ethics Committee and House Social Services Committee Budget Hearings—Feb. 1, 2023
- ArkCase Kick-off Meeting Feb. 2, 2023
- SPARK Office of Recovery—State Efficiency and Modernization Webinar—Feb. 8, 2023
- Testimony on CNE Reg. revisions at Joint Committee on Administrative Rules and Regulations—Feb. 10, 2023
- New Board Member orientation—Feb. 14, 2023

Five Year Legislative Review:

77-440. Rules and regulations subject to five-year review; requirements; schedule for review; identifiable purpose required. (a) All rules and regulations adopted by state agencies under the provisions of K.S.A. [77-415](#) et seq., and amendments thereto, shall be reviewed every five years in accordance with this section.

(b) (1) Each state agency that has adopted rules and regulations shall submit a report to the joint committee on administrative rules and regulations on or before July 15 of the year that corresponds to such state agency under paragraph (2). Such report shall contain a summary of such state agency's review and evaluation of rules and regulations adopted by such state agency, including a statement for each rule and regulation as to whether such rule and regulation is necessary for the implementation and administration of state law or may be revoked pursuant to K.S.A. [77-426\(d\)](#), and amendments thereto.

c) For any state agency not listed in subsection (b)(2) that adopts rules and regulations that become effective on or after July 1, 2022, such state agency shall submit a report to the joint committee on administrative rules and regulations in accordance with subsection (b)(1) on or before July 15 of the fifth year after such rules and regulations become effective and every fifth year thereafter.

(d) Notwithstanding any other provision of law, a rule and regulation may be adopted or maintained by a state agency only if such rule and regulation serves an identifiable public purpose to support state law and may not be broader than is necessary to meet such public purpose.

2025 and every fifth year thereafter:

Board of Nursing

Kansas State Board of Nursing
Landon State Office Building
900 SW Jackson St., Suite 1051
Topeka, KS 66612-1230



Phone: 785-296-4929
Fax: 785-296-3929
www.ksbn.org

Carol Moreland, MSN, RN
Executive Administrator

Kansas State Board of Nursing

Laura Kelly, Governor

The mission of the Board of Nursing is to assure the citizens of Kansas safe and competent practice by nurses and mental health technicians

Date: February 16, 2023

To: Senate Public Health and Welfare Committee
Senator Beverly Gossage, Chair

From: Carol Moreland, MSN, RN
Executive Administrator
Kansas State Board of Nursing

Subject: SB 112

Position: **Proponent (Written)**

The Kansas State Board of Nursing (KSBN) provides this written testimony in support of SB 112 that concerns registered nurse anesthetists; authorizing independent practice and the prescribing of drugs; amending K.S.A. 65-1165. The mission of the Board of Nursing is to assure the citizens of Kansas safe and competent practice by nurses and mental health technicians. KSBN regulates registered nurse anesthetists and there are currently 1,256 licensed registered nurse anesthetists in Kansas.

SB112, if passed would change the practice of registered nurse anesthetists (RNAs). They could practice as an independent advanced practice registered nurse to the full extent of the licensee's education and qualifications. They could prescribe, procure, select, order, and administer any drug consistent with such licensee's education and qualifications.

Registered nurse anesthetists obtain specialized education for their role. RNA educational programs in Kansas prepare the student for graduation with a Doctor of Nurse Anesthesia Practice. Requirements for admission include licensure as a Registered Nurse, certification in Basic Life Support, Advanced Cardiac Life Support, Pediatric Advanced Life Support. CCRN certification, a specialized certification for nurses who provide care to acutely/chronically ill patients, is preferred. The applicant must have a minimum of 1-year full-time practice in a critical care unit and have a bachelor's degree.

RNA programs consist of 36 months of didactic and clinical education to assist the student to acquire the knowledge, skills and competence required for their role. The classroom instruction includes courses in anatomy, physiology, pathophysiology, biochemistry, chemistry, physics, and pharmacology. The clinical education includes a variety of anesthesia techniques and procedures for all types of surgery and obstetrics. Types of anesthesia included in clinical include general, regional and pain management. Clinicals include over 1000 anesthetic cases with over 2050 hours of direct anesthesia. Special cases include geriatric, pediatric (2 – 12 years), pediatric (<2 years), neonatal (<4 weeks), trauma, obstetrics, and pain management. Anatomic categories included in clinical include intra-abdominal, intracranial (open and closed), oropharyngeal, intrathoracic, open heart (with and without cardiopulmonary bypass), closed heart, intrathoracic (lung and other), and neck.

After graduation from the RNA program, the graduate must become nationally certified through the National Board of Certification and Recertification of Nurse Anesthetists (NBCRNA). The purpose of the National Certification Examination is to assess the knowledge, skills, and abilities necessary for entry-level nurse anesthesia practitioners. NBCRNA credentialing assures the public that the certified registered nurse anesthetist has met objective, predetermined qualifications to provide nurse anesthesia services. Each RNA who fulfills the requirements for certification and continued professional certification by NBCRNA may use the initials "CRNA" after their name. CRNA stand for certified registered nurse anesthetist. The continued professional certification (CPC) program covers eight years, which includes two four-year compliance cycles. Each four-year cycle has a specific set of requirements that include Class A continuing education, Class B professional development activities, core modules and CPC assessment. This CPC assessment assesses the critical core knowledge needed to practice the art and science of nurse anesthesia.

RNAs have the specialized knowledge, skills, and competency to practice independently to the extent of their education and qualifications. They have the education and qualifications to prescribe, procure, select, order, and administer any drug consistent with their role. The Kansas State Board of Nursing supports SB 112 and encourages passage of the bill.

Kansas State Board of Nursing
Landon State Office Building
900 SW Jackson St., Suite 1051
Topeka, KS 66612-1230



Phone: 785-296-4929
Fax: 785-296-3929
www.ksbn.org

Carol Moreland, MSN, RN
Executive Administrator

Kansas State Board of Nursing

Laura Kelly, Governor

The mission of the Board of Nursing is to assure the citizens of Kansas safe and competent practice by nurses and mental health technicians

Date: February 16, 2023

To: House Commerce, Labor and Economic Development Committee
Representative Sean Tarwater, Chair

From: Carol Moreland, MSN, RN
Executive Administrator
Kansas State Board of Nursing

Subject: HB 2388

Position: **Neutral (Verbal)**

The Kansas State Board of Nursing (KSBN) provides this verbal neutral testimony for HB 2388. The mission of the Board of Nursing is to assure the citizens of Kansas safe and competent practice by nurses and mental health technicians. KSBN regulates mental health technicians, licensed practical nurses, registered nurses, and advanced practice registered nurses. KSBN has appr. 70,000 licensees. HB 2388 includes language that requires licensing bodies to provide verified electronic credentials in addition to paper-based credentials. This bill also requires licensing bodies to use centralized electronic credential data management that can provide instantaneous credential verification, mandating that such systems maintain an auditable record.

National Council of State Boards of Nursing (NCSBN) is an independent, not-for-profit organization through which nursing regulatory bodies act and counsel together on matters of common interest and concern affecting public health, safety, and welfare, including the development of nursing licensure examinations known as the NCLEX. NCSBN is composed of all 50 state boards of nursing, the District of Columbia, and four U.S. territories, and works closely with other nursing organizations, healthcare providers, and government agencies to promote the safe and competent practice of nursing. NCSBN is recognized as a leader in the regulation of nursing practice and its work is an important factor in ensuring public protection and promoting the health and well-being of patients.

Central electronic verification system

The Coordinated Licensure Information System (CLIS), otherwise known as Nursys®, is a License Verification database and verification system for the 5+ million licensed nurses in the United States. It provides a centralized repository of nurse licensure and discipline information from participating state boards of nursing and allows licensed nurses to verify their licensure status quickly and easily 24 hours a day, 7 days a week and provides state-to-state licensure verifications. Nursys® provides an online platform where licensed nurses can receive automated notifications of license renewals and updates. The system is a joint effort of NCSBN and its member boards and helps to ensure public protection by providing accurate and up-to-date information about licensed nurses. Nursys® is the only national

database for verification of nurse licensure, discipline, and practice privileges for RNs and LPN/VNs licensed in participating boards of nursing, including all states in the Nurse Licensure Compact (NLC). Nursys.com provides online verification for endorsement to a nurse requesting to practice in another state and anyone who wants to verify a nurse license.

The Nurse Licensure Compact (NLC) is an agreement among participating states in the United States that allows licensed registered nurses (RNs) and licensed practical nurses (LPNs) to have one multistate license, with the ability to practice in their home state and other NLC states. The NLC is also known as the "Interstate Nurse Licensure Compact." The license is issued by their primary state of residence and allows the nurse to practice in other compact states without having to secure an additional license. Currently there are 39 states that are members of the NLC. Kansas has been a member state since 2019 and has 14,605 RNs and 1,776 LPNs with multistate licenses.

The purpose of the NLC is to provide greater mobility and access to care for patients, while maintaining public protection through consistent standards for nursing practice and regulation. The NLC provides a framework for cooperation and coordination among state boards of nursing and helps to streamline the process for nurses who wish to practice in multiple states.

The Compact "**requires**" state nursing boards to participate in the Nursys® License Verification database and is a requirement of the NLC membership agreement. This allows states to securely share information for verification of nurse licensure, discipline, and practice privileges.

Paper Licenses and Verifications:

Paper licenses are susceptible to several fraud risks that can compromise public protection. Some of the most significant fraud risks associated with paper licenses include:

1. **Counterfeiting:** Paper licenses can be easily counterfeited or altered, making it difficult for licensing authorities and employers to verify the validity of a license. This can result in unlicensed or disqualified individuals being able to practice as licensed professionals.
2. **Tampering:** Paper licenses can also be easily tampered with or altered to change information such as name, address, or qualifications, making it difficult for licensing authorities to track the history and credentials of licensed professionals.
3. **Lost or Stolen:** Paper licenses can be easily lost or stolen, making it difficult for licensing authorities and employers to verify the identity of individuals claiming to be licensed professionals.
4. **Inaccurate Information:** Paper licenses can be easily altered to include false or inaccurate information, making it difficult for licensing authorities and employers to verify the qualifications and competencies of licensed professionals.

To mitigate the fraud risks associated with paper licenses, licensing authorities are increasingly moving to electronic licensure systems that use secure, tamper-evident licenses that can be easily verified and tracked. These systems can help to ensure the authenticity and accuracy of licenses and can provide additional safeguards against fraud, such as real-time updates, secure authentication mechanisms, and alerts for suspicious activity. KSBN stopped issuing printed license cards July 1, 2010. That had an estimated savings of \$16,000 per year at the time. The licensee may continue to print a licensure card

for free, with basic licensure information such as name, state, profession, and type. However, it includes information how to verify the authenticity of the license and expiration date for free, 24x7, via the KSBN electronic verification system. KSBN continues to send via USPS mail a printed wall certificate suitable for framing to all new grads to highlight their accomplishment that notes their name and profession.

Fiscal and Risk Considerations of a Centralized Licensing System:

The average cost of an occupational licensing computer system can vary widely depending on the size and complexity of the system, as well as the features and functions it provides. Some of the factors that can affect the cost of an occupational licensing computer system include the number of licenses being managed, the number of users, and the level of integration with other systems. These integrations and factors are not only other state agencies, but also with other federal systems such as the National Practitioner Data Bank, professional associations such as NCSBN and other third-party systems such as CE Broker, just to name a few. The need for custom development could be substantial.

On average, the cost of an occupational licensing computer system can range from tens of thousands of dollars for a very basic system to tens of millions of dollars for a more complex and comprehensive systems. A large board of nursing might need to invest more than \$500,000 to \$2m, or more, for a system that can handle a large volume of applications, renewals, workflow, document imaging and other transactions. Consideration would also need to be given for web services system-to-system communications as well as conversion of data from the old system to the new. Other costs, such as staffing, support, and maintenance, can also be significant, and must be considered when evaluating the total cost of an occupational licensing system.

Consolidating occupation licensing computer systems can have some benefits, such as improved data sharing amongst state agencies. However, there are also substantial risks associated with consolidation that must be considered and addressed. It would be important to carefully consider the costs and weight the substantial operational and cybersecurity risks of placing all state occupational regulatory licensee information into one single repository

Some of the risks associated with consolidating occupational licensing computer systems include:

1. Data security and privacy: When multiple licensing systems are consolidated into one repository, there is a risk that sensitive information, such as personal and financial data, could be compromised. Having “all your eggs in one basket” has its defined risks. Should a single system be compromised, that single board operation may be potentially impacted. If a centralized system is impacted, “all” occupational licensing information would be compromised, not just the single instance. The expense for identity theft coverage and potential offline operations would be felt by all occupational licensees.
2. Technical issues: Consolidating multiple systems into one can be a complex and technical process that can result in technical issues, such as system downtime, errors, and bugs. Without dedicating substantial resources and staff and having a solid plan in place prior to such an endeavor, it could have adverse effects on the licensing and investigative processes.
3. Implementation and adoption: Consolidating multiple systems into one can be a time-consuming and resource-intensive process that requires careful planning, preparation, and execution. There is also a risk that stakeholders, such as licensees, licensing boards, and other government agencies, may resist the transition to a new system if disagreements or system issues occur.

4. Cost: There would be significant upfront costs associated with the consolidation process, including the cost of the new system, staff training, and any necessary updates or changes to existing systems, including data conversion.
5. Loss of customization and functionality: When multiple systems are consolidated into one, there is a risk that some of the unique features and functions of each system may be lost, which could have negative impacts on operations as well as acceptance by the licensees, employers, staff, and the public.

KSBN supports the need for a licensing body to have an electronic, secure licensure verification system that is available 24/7 for licensees, employers, and the public to verify licensure. KSBN supports that licensure bodies shall utilize an electronic record system to issue, revoke, suspend and maintain oversight of electronic credentials. KSBN does not support that there should be one central electronic record system for all licensing bodies in the state to use and the requirement for the issuance of paper licenses. KSBN remains neutral on this bill and requests there be further discussion and clarification regarding if a regulatory body may continue to utilize a national verification database for the different disciplines they regulate, instead of a central state verification database and possible change of the requirement of a paper-based licensure card. The paper licensure card could be optional and at the discretion of the regulatory body if there is an effective electronic licensure verification system in place that meets the needs of the licensees, employers, public, and the regulatory body.

Thank you for your time. I will stand for questions at the appropriate time.

2023 Session

KANSAS STATE BOARD OF NURSING (KSBN)



Mission: Assure the Citizens of Kansas safe and competent practice by nurses and mental health technicians

GOVERNED BY *11-member Board*

6 registered nurses (one licensed as an advanced practice registered nurse), 2 licensed practical nurses, and 3 public members



Regulates the following disciplines:

licensed practical nurses, registered nurses, advanced practice registered nurses, and licensed mental health technicians



License count that includes all disciplines is appr.

70,000
LICENSEES

Registered Nurse -
Multi-State

14387

Registered Nurse -
Single-State

38026

Licensed Practical Nurse -
Multi-State

1739

Licensed Practical Nurse -
Single-State

7441

Licensed Mental
Health Technician

36

Clinical Nurse
Specialist

380

Nurse Midwife

97

Nurse Practitioner

6760

Registered Nurse
Anesthetist

1258

Agency is fee funded
and receives no state
general funds

FY 23 APPROPRIATED
BUDGET:

\$3,519,910



Agency includes 27
FTEs that cover the
divisions of regulation

FY 22 PERFORMANCE DATA INCLUDES:



Licensing:

- Issued 7,459 licenses
- Issued 28,082 license renewals
- Reinstated 711 licenses



Education *(approval of Kansas nursing programs and approved continuing education providers):*

- 52 nursing programs that include all levels of nursing
- 1 LMHT program
- 93 continuing education providers
- 266 LPNs became certified in IV therapy (expanded role for LPNs)



Legal

- 498 complaints received
- 88 KORA requests received
- Contract with Kansas Nurses Assistance Program as the board approved monitoring program for chemical dependence and mental health issues
- 274 participants

Publishes an annual report, 3-year strategic plan and 3-year IT plan

<https://ksbn.kansas.gov/wp-content/uploads/2022/12/KSBN-FY-22-Annual-Report.pdf>

<https://ksbn.kansas.gov/wp-content/uploads/Misc/StrategicPlan.pdf>

3-YEAR STRATEGIC PLAN INCLUDES THE FOLLOWING PRIORITIES:

Priority #1:

Promoting Nursing and
Allied Health Standards; safe
nursing through education,
licensure, and regulation

Priority #2:

Fiscal and Human Resources
Responsibilities

Priority #3:

Maintain quality Customer
Service

Contact Carol Moreland, MSN, RN, Executive Administrator, for questions or further information:

ksbn.kansas.gov

[785-633-6101](tel:785-633-6101)

carol.moreland@ks.gov