

Agency Mission: To assure the citizens of Kansas safe and competent practice by nurses and mental health technicians.

**Kansas Board of Nursing  
Landon State Office Building, Room 509  
APRN Committee Agenda  
September 12, 2023**

**NOTE: The audience may attend in person or via Zoom. Link to access meeting to follow agenda.**

**Time: 2:00 p.m. – 3:00 p.m.**

**Committee Members:**

Melissa Oropeza, DNP, APRN-BC, CGRN, Chair  
Rebecca Sander, MSN, RN, V-Chair  
Jamie Harrington, DNP, APRN, CNM, FNP-BC  
Dawn Gosnell, MSN, APRN, CNS, CCRN  
Benjamin Cochran, DNP, APRN, NP-C  
Josie Bell, MHS, DNAP, CRNA  
Shannon Gregg, APRN-C - KTRACS

**Staff:** Carol Moreland, MSN, RN – Executive Administrator  
Jill Simons – Executive Assistant

- I. Quorum (minimum of 4 members present) – Yes or No
- II. Call to Order
- III. Review of on-site packet
- IV. Additions/Revisions to the agenda
- V. Announcements
- VI. Approval of minutes – June 13, 2023
- VII. Unfinished Business
  1. Prescription Monitoring Program (PMP) Committee Report – Shannon Gregg
  2. Update on CNM-I Regulations
  3. Licensure Types – RN & APRN
  4. Five Year Statue Review
    - a. K.S.A. 65-1153 – Temporary authorization to practice
    - b. K.S.A. 65-1154 – Application; fees; deposit of moneys
    - c. K.S.A. 65-1163 – Application of act
  5. New Regulations Review Process
    - a. K.A.R. 60-11-106 – Functions of Nurse Anesthetist
    - b. K.A.R. 60-13-112 – License Renewal
- VIII. New Business
  1. KANA SB 112 Discussion – Mitch DePriest
  2. Report on APRN Programs approved for licensure
  3. Graduate Preceptor Qualifications – K.A.R. 60-17-104
  4. Clinical Hours Requirement – Draft K.A.R. 60-17-105 Revision

5. New Regulation Review Process
  - a. K.A.R. 60-11-101 – Definition and limitations
  - b. K.A.R. 60-11-102 – Roles of advanced practice
  - c. K.A.R. 60-11-104 – Educational requirements

IX. Agenda for December 2023 Committee meeting

X. Adjourn

**Committee Responsibilities:**

**To review and recommend revisions to statutes and regulations for approval of APRN and RNA programs in collaboration with the Education Committee.**

Please note: Additional items which have come to the attention of the Board or Committee will be handled as time permits. Agenda is subject to change based upon items to come before the Board. Handouts or copies of materials brought to the Board or Committee for discussion by Committee Members or visitors must be submitted to staff 30 calendar days prior to start of the meeting. Any items received after the 30<sup>th</sup> calendar day may be addressed at the meeting at the discretion of the President of the Board or Chairperson of the Committee.

Please click the link below to join the webinar:

<https://us02web.zoom.us/j/89036057987?pwd=amNBUDBIamZlMEM3S0pXQ3pmQ3JWQT09>

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Or One tap mobile :

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+1 646 931 3860 US  
+1 689 278 1000 US  
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## Licensure Types

Statue/Regulation	Discipline	License Type	Practice
K.S.A. 65-1115	RN	Active	
K.S.A. 65-1115 K.A.R. 60-3-112	RN	Exempt	Not regularly engaged in the practice of professional nursing in Kansas, but volunteers professional nursing service or is a charitable health care providers as defined by K.S.A. 75-6102 and has been licensed in Kansas for the five years previous to applying for an exempt license.
K.S.A. 65-1115 K.A.R. 60-3-106a	RN	Temporary Permit	Temporary permit to practice nursing as a RN for a period not to exceed 120 days. May be issued to an applicant for licensure as a RN who is a graduate of a professional school of nursing in a foreign country after verification of licensure in that foreign country and approval of educational credentials
K.S.A. 65-1117 K.A.R. 60-3-111	RN	Inactive	No longer engaged in the active practice of nursing and state this by affidavit. CNE shall not be required while on inactive status. Will remain on inactive status

			until filing an application and meeting all the requirements for reinstatement.
K.S.A. 65-1117 K.A.R. 60-3-105	RN	Reinstatement	May apply for reinstatement when failed to secure a renewal license by the expiration date.
K.S.A. 65-1131 K.A.R. 60-11-118	APRN	Temporary Permit	One-time temporary permit to practice as an APRN for a period of not more than 180 days pending completion of the application for a license.
K.S.A. 65-1131 K.A.R. 60-11-121	APRN	Exempt	Not regularly engaged in advanced practice registered nursing in Kansas but volunteers advanced practice registered nursing services or is a charitable healthcare provider as defined by K.S.A. 75-6102. An exempt license will be renewed biennially. An APRN who has been granted an exempt license shall be exempt from the requirements of K.S.A. 40-3402 and 40-3404. Must have been licensed for the five years previous to applying for an exempt license.
K.S.A. 65-1131	APRN	Inactive	May not engage in advanced practice registered nursing in

			Kansas. CNE is not required
K.A.R. 60-11-116	APRN	Reinstatement	May apply for reinstatement if license is inactive or has lapsed and wants an active license



**65-1153. Temporary authorization to practice.** The board may grant a temporary authorization to practice nurse anesthesia as a registered nurse anesthetist: (a) For a period of not more than one year to graduates of a school of nurse anesthesia approved by the board pending results of the initial examination; or  
(b) for the needed amount of time to complete the clinical portion of a refresher course; or  
(c) for a period not to exceed 120 days.

**History:** L. 1986, ch. 183, § 3; L. 1992, ch. 135, § 4; L. 1996, ch. 179, § 3; L. 2000, ch. 113, § 4; L. 2001, ch. 161, § 9; July 1.

**65-1154. Application; fees; deposit of moneys.** Upon application to the board by any licensed professional nurse in this state and upon satisfaction of the standards and requirements established under this act and K.S.A. 65-1130, and amendments thereto, the board shall grant an authorization to the applicant to perform the duties of a registered nurse anesthetist and be licensed as an advanced practice registered nurse. An application to the board for an authorization, for an authorization with temporary authorization, for biennial renewal of authorization, for reinstatement of authorization and for reinstatement of authorization with temporary authorization shall be upon such form and contain such information as the board may require and shall be accompanied by a fee to assist in defraying the expenses in connection with the administration of the provisions of this act. The fee shall be fixed by rules and regulations adopted by the board in an amount fixed by the board under K.S.A. 65-1118, and amendments thereto. There shall be no fee assessed for the initial, renewal or reinstatement of the advanced practice registered nurse license as long as the registered nurse anesthetist maintains authorization. The executive administrator of the board shall remit all moneys received to the state treasurer as provided by K.S.A. 74-1108, and amendments thereto.

**History:** L. 1986, ch. 183, § 4; L. 1992, ch. 135, § 5; L. 1996, ch. 179, § 4; L. 2011, ch. 114, § 48; January 1, 2012.

**65-1163. Application of act.** Nothing in this act shall:

(a) Prohibit administration of a drug by a duly licensed professional nurse, licensed practical nurse or other duly authorized person for the alleviation of pain, including administration of local anesthetics;

(b) apply to the practice of anesthesia by a person licensed to practice medicine and surgery, a licensed dentist or a licensed podiatrist;

(c) prohibit the practice of nurse anesthesia by students enrolled in approved courses of study in the administration of anesthesia or analgesic as a part of such course of study;

(d) apply to the administration of a pudendal block by a person who holds a valid license as an advanced practice registered nurse in the role of nurse-midwife;

(e) apply to the administration by a licensed professional nurse of an anesthetic, other than general anesthesia, for a dental operation under the direct supervision of a licensed dentist or for a dental operation under the direct supervision of a person licensed to practice medicine and surgery;

(f) prohibit the practice by any registered nurse anesthetist who is employed by the United States government or in any bureau, division or agency thereof, while in the discharge of official duties; or

(g) prohibit a registered professional nurse from administering general anesthetic agents to a patient on ventilator maintenance in critical care units when under the direction of a person licensed to practice medicine and surgery or a person licensed to practice dentistry.

**History:** L. 1986, ch. 183, § 13; L. 1988, ch. 246, § 15; L. 1996, ch. 179, § 7; L. 2001, ch. 161, § 10; L. 2011, ch. 114, § 49; January 1, 2012.

## KSBN Regulation Review Process

As per K.S.A. 77-440, as amended in 2022, state agencies are required to submit a report regarding an intensive review of their regulations every five years. In the past we have reviewed each regulation on a five-year schedule, however that review did not contain all the information that must be completed by the Board for this intensive review. **The report from KSBN must be submitted by July 15, 2025.** There are 90 regulations in the Kansas Nurse Practice Act that must have the intensive review completed by that date. These regulations have been assigned to the appropriate committees to conduct the intensive review. There will be some regulations to review at each committee meeting and the committee members should come prepared for this review. The regulations to review at the committee meeting will be listed on the agenda and a copy of the regulation will be placed in the committee packet. A copy of the KSBN Regulation Review Form will also be placed in the committee packet for each of the regulations listed on the agenda for review. Agency staff will complete Part 1 that includes information about the history of the regulation. **The rest of the questions on the form must be answered by the committee members.** Committee members need to answer the following questions:

- **Necessity (2 questions):**
  - Is the rule and regulation necessary for the implementation and administration of state law?
  - Does the rule and regulation serve an identifiable public purpose in support of state law?
- **Potential for revocation** (taking the regulation off the active list of regulations and no longer be utilized):
  - Briefly describe how revocation would affect Kansans (max 800 characters)
  - Is the rule and regulation being revoked?
  - If the rule and regulation is not in active use, would revocation require a change to the authorizing or implementing statute?
  - If the rule and regulation is not in active use and revocation would require a change in the authorizing or implementing statute, which changes? (maximum 400 characters)
- **Additional information:** additional information necessary to understanding the necessity of the rule and regulation (maximum 1,200 characters)

It is imperative each committee member review the regulation and the review form and come to the committee meeting prepared to discuss their answers. The committee will decide the final answers that should be submitted for each regulation. If the committee needs to table until the next meeting in which more discussion needs to occur, please realize **all the regulation review must be completed no later than the June 2025 committee meetings.**

If you have questions about this process, please see the staff contacts for each committee.

## KSBN Regulation Review Form

### **Part 1 (completed by agency staff):**

Regulation Number:

Article Title:

Rule and Reg Title:

Type (New/Amended):

Effective Date (history):

Authorizing K.S.A.

Implementing K.S.A.

### **Part 2 (completed by committee members):**

#### **Necessity:**

1. Is the rule and regulation necessary for the implementation and administration of state law? Y ☐ or N ☐
2. Does the rule and regulation service an identifiable public purpose in support of state law? Y ☐ or N ☐

#### **Potential for Revocation:**

1. Briefly describe how revocation would affect Kansans (max. 800 characters)
2. Is the rule and regulation being revoked? Y ☐ or N ☐
3. If the rule and regulation is not in active use, would revocation require a change to the authorizing or implementing statute? Y ☐ or N ☐
4. If the rule and regulation is not in active use and revocation would require a change in the authorizing or implementing statute, which changes? (max. 400 characters)

#### **Additional information:**

Additional information necessary to understanding the necessity of the rule and regulation (max. 1,200 characters)

Committee:

Chair:

Date:

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## Agency 60

### State Board of Nursing

#### Article 13.—Fees; Registered Nurse Anesthetist

[Printable Format](#)

- 60-13-112. License renewal.** (a) Each license to practice as a registered nurse anesthetist (RNA) in Kansas shall be subject to the same biennial expiration dates as those specified in K.A.R 60-3-108 for the registered professional nurse license in Kansas.
- (b) Each individual renewing a license shall have completed the required 30 contact hours of approved continuing nursing education (CNE) related to nurse anesthesia during the most recent prior licensure period. Proof of completion of 30 contact hours of approved CNE in the nurse anesthesia role may be requested by the board. Contact hours accumulated in excess of the 30-hour requirement shall not be carried over to the next renewal period.
- (c) The number of contact hours assigned to any offering that includes a recognized standard curriculum shall be determined by the board.
- (d) Any individual attending any offering not previously approved by the board may submit an application for an individual offering approval (IOA). Credit may be given for offerings that the licensee demonstrates as having a relationship to the practice of nurse anesthesia. Each separate offering shall be approved before the individual submits the license renewal application.
- (e) Approval shall not be granted for identical offerings completed within the same license renewal period.
- (f) Any individual renewing a license may accumulate 15 contact hours of the required CNE from instructor credit. Each presenter shall receive instructor credit only once for the preparation and presentation of each course. The provider shall issue a certificate listing the number of contact hours earned and clearly identifying the hours as instructor credit.
- (g) Fractions of contact hours may be accepted for offerings over 30 minutes.
- (h) All CNE accumulated for RNA license renewal shall also be applicable to the renewal of the registered professional nurse license. (Authorized by K.S.A. 65-1164; implementing K.S.A. 65-1159; effective Sept. 2, 1991; amended Feb. 16, 1996; amended Oct. 12, 2001; amended July 29, 2005; amended May 18, 2012.)

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## Agency 60

### State Board of Nursing

#### Article 11.—Advanced Practice Registered Nurses (APRN)

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**60-11-106. Functions of the advanced practice registered nurse; nurse anesthetist.** The functions that may be performed by any advanced practice registered nurse functioning in the advanced role of registered nurse anesthetist shall be those functions defined in K.S.A. 65-1158, and amendments thereto. (Authorized by and implementing K.S.A. 65-1113, as amended by L. 2011, ch. 114, sec. 39, and K.S.A. 65-1130, as amended by L. 2011, ch. 114, sec. 44; effective May 1, 1984; amended, T-85-16, June 5, 1984; amended May 1, 1985; amended March 31, 2000; amended May 18, 2012.)

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**Advanced Practice Programs Approved for Licensure May 2023 through  
August 2023**

Program	Role/Specialty	Degree	Advanced Pathophysiology Credit Hrs	Advanced Health Assessment Credit Hours	Advanced Pharmacology Credit Hours	Total Clinical Hrs	Accreditation	Meets Requirements
Briar Cliff University	FNP	MSN	3	4	3	600	CCNE	Yes
Francis Medical University	FNP	MSN	3	4	3	780	CCNE	Yes



**60-17-105. Curriculum requirements.** (a) The faculty in each advanced nursing education program shall fulfill these requirements:

- (1) Identify the competencies of the graduate for each role of advanced nursing practice for which the advanced nursing program provides instruction;
- (2) determine the approach and content for learning experiences;
- (3) direct clinical instruction as an integral part of the advanced nursing program; and
- (4) provide for learning experiences of the depth and scope needed to fulfill the objectives or outcomes of advanced nursing courses.

(b) The curriculum in each advanced nursing education program shall include all of the following:

- (1) Role alignment related to the distinction between practice as a registered professional nurse and the advanced role of an advanced practice registered nurse as specified in K.A.R. 60-11-101;
- (2) theoretical instruction in the role or roles of advanced nursing practice for which the program provides instruction;
- (3) the health care delivery system;
- (4) the ethical and legal implications of advanced nursing practice;
- (5) ~~three college semester credit hours or the academic equivalent hours~~ in advanced pharmacology ~~or the equivalent~~;
- (6) ~~three college semester credit hours or the academic equivalent hours~~ in advanced pathophysiology ~~or its equivalent~~ and ~~three college semester credit hours or the academic equivalent hours~~ in advanced health assessment ~~or its equivalent~~ for licensure as an advanced practice registered nurse in a role other than nurse anesthesia and nurse midwifery;
- (7) ~~if completing an for any advanced practice registered nurse nursing program completed~~ after July 1, 2009, ~~three college semester credit hours or the academic equivalent hours~~ in advanced pathophysiology ~~or its~~

~~equivalent and three college semester credit hours or the academic equivalent hours in advanced health assessment or its equivalent; and~~

(8) clinical instruction in the area of specialization, which shall include the following:

(A) Performance of or ordering diagnostic procedures;

(B) evaluation of diagnostic and assessment findings; and

(C) the prescription of medications and other treatment modalities for client conditions.

(c)(1) Each advanced nursing program shall consist of at least 45 semester credit hours or the academic equivalent. ~~As used in this regulation, "academic equivalent" shall mean the prorated proportionate credit for formal academic coursework if that coursework is completed on the basis of trimester or quarter hours rather than semester hours.~~

(2) The clinical component shall consist of at least 260 practice hours ~~of clinical learning~~. After January 1, 2003, the clinical component shall consist of at least 500 practice hours ~~of clinical learning~~. After July 1, 2009, the clinical component shall consist of at least 500 practice hours ~~of clinical learning~~ in each clinical track, or the advanced nursing program shall provide documentation of the overlap if any clinical track consists of less than 500 clinical practice hours. After January 1, 2024, the clinical component shall consist of at least 750 direct patient care practice hours in each clinical track, or the advanced nursing program shall provide documentation of the overlap if any clinical track consists of less than 750 direct patient care practice hours.

(d) Each nurse administrator shall meet the following requirements:

(1) Develop and implement a ~~written plan for~~ program evaluation plan; and

(2) submit any major revision to the curriculum of advanced nursing courses for board approval at least 30 days before a meeting of the board. The following shall be considered major revisions to the curriculum:

(A) Any significant change in the plan of curriculum organization; and

(B) any change in content.

(e) Each nurse administrator shall submit all revisions that are not major revisions, as defined in paragraph (d)(2), to the board or the board's designee for approval. (Authorized by ~~K.S.A. 65-1129~~ and K.S.A. ~~2010~~ 2017 Supp. 74-1106; implementing K.S.A. 2017 Supp. 65-1133, ~~as amended by L. 2011, ch. 114, sec. 47~~; effective March 31, 2000; amended April 20, 2007; amended May 18, 2012; amended P-

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Implementing K.S.A.

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Committee:

Chair:

Date:

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**Agency 60**  
**State Board of Nursing**

Article 11.—Advanced Practice Registered Nurses (APRN)

[Printable Format](#)

**60-11-101. Definition of expanded role.** Each "advanced practice registered nurse" (APRN), as defined by K.S.A. 65-1113 and amendments thereto, shall function in an expanded role to provide primary, secondary, and tertiary health care in the APRN's role of advanced practice. Each APRN shall be authorized to make independent decisions about advanced practice nursing needs of families, patients, and clients and medical decisions. Each APRN shall be directly accountable and responsible to the consumer. (Authorized by and implementing K.S.A. 2021 Supp. 65-1113 and K.S.A. 65-1130, as amended by 2022 S Sub for HB 2279, sec. 1; effective May 1, 1984; amended March 31, 2000; amended Sept. 4, 2009; amended May 18, 2012; amended, T-60-7-18-22, July 18, 2022; amended Oct. 14, 2022.)

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## Agency 60

### State Board of Nursing

#### Article 11.—Advanced Practice Registered Nurses (APRN)

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**60-11-102. Roles of advanced practice registered nurses.** The four roles of advanced practice registered nurses licensed by the board of nursing shall be the following:

(a) Clinical nurse specialist;

(b) nurse anesthetist;

(c) nurse-midwife; and

(d) nurse practitioner. (Authorized by and implementing K.S.A. 65-1113, as amended by L. 2011, ch. 114, sec. 39, and K.S.A. 65-1130, as amended by L. 2011, ch. 114, sec. 44; effective May 1, 1984; amended Sept. 4, 2009; amended May 18, 2012.)

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## Agency 60

### State Board of Nursing

#### Article 11.—Advanced Practice Registered Nurses (APRN)

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**60-11-104. Functions of the advanced practice registered nurse in the role of nurse practitioner.** Each advanced practice registered nurse in the role of nurse practitioner shall function in an advanced role at a specialized level, through the application of advanced knowledge and skills and shall be authorized to perform the following:

- (a) Provide health promotion and maintenance, disease prevention, and independent nursing diagnosis, as defined in K.S.A. 65-1113 and amendments thereto, and treatment, as defined in K.S.A. 65-1113 and amendments thereto, of acute and chronic diseases;
- (b) develop and manage the medical plan of care for patients or clients;
- (c) provide health care services for which the nurse practitioner is educationally prepared and for which competency has been established and maintained. Educational preparation may include academic coursework, workshops, institutes, and seminars if theory or clinical experience, or both, are included;
- (d) provide health care for individuals by managing health problems encountered by patients and clients; and
- (e) provide innovation in evidence-based nursing practice based upon advanced clinical expertise, decision making, and leadership skills and serve as a consultant, researcher, and patient advocate for individuals, families, groups, and communities to achieve quality, cost-effective patient outcomes and solutions. (Authorized by and implementing K.S.A. 2021 Supp. 65-1113 and K.S.A. 65-1130, as amended by 2022 S Sub for HB 2279, sec. 1; effective May 1, 1984; amended, T-85-16, June 5, 1984; amended May 1, 1985; amended Sept. 4, 2009; amended May 18, 2012; amended, T-60-7-18-22, July 18, 2022; amended Oct. 14, 2022.)

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