

Kansas State Board of Nursing Special Board Meeting Notice

Date: Feb 19, 2015 @ 9:30 a.m.

Meeting Location: Conference Call 1-877-278-8686 Access Code: 534018

<u>AGENDA:</u>

- <u>1. HB 2121 AAG</u>
- 2. HB 2120 Revoked license
- 3. HB 2119 LMHT fees
- 4. SB 40 Massage therapy
- 5. HB 2123 Massage therapy
- 6. SB 69 APRN
- 7. HB 2122 APRN
- 8. HB 2280 Midwife
- 9. HB 2205 Dual regulation APRN
- 10. SB 218 Dual regulation APRN
- 11. SB 141 Podiatrists & APRN
- 12. HB 2321 Charitable healthcare provider
- 13. HB 2313 Healthcare worker assault

Special Board Meeting 1

Session of 2015

HOUSE BILL No. 2121

By Committee on Health and Human Services

1-23

AN ACT relating to assistant attorneys general; amending K.S.A. 74-1111
 and repealing the existing section.

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Be it enacted by the Legislature of the State of Kansas:

5 Section 1. K.S.A. 74-1111 is hereby amended to read as follows: 74-6 1111. (a) The attorney general shall appoint, with the approval of the board 7 of nursing, an assistant attorney assistant attorneys general who shall carry 8 out the duties under subsection (b). The attorney- attorneys shall receive an 9 annual salary fixed by the attorney general with the approval of the board 10 of nursing. The-salary salaries shall be paid from moneys appropriated to 11 the board of nursing in the board of nursing fee fund.

12 (b) The assistant—attorney attorneys general appointed under 13 subsection (a) shall represent the board of nursing in any proceedings or 14 litigation that may arise in the discharge of the duties of the board of 15 nursing and shall perform such other duties of a legal nature as may be 16 directed by the board of nursing.

17 Sec. 2. K.S.A. 74-1111 is hereby repealed.

18 Sec. 3. This act shall take effect and be in force from and after its 19 publication in the statute book. Session of 2015

HOUSE BILL No. 2120

By Committee on Health and Human Services

1-23

1 2 3	AN ACT concerning the board of nursing; reinstatement of licenses; a amending K.S.A. 2014 Supp. 65-1118 and repealing the exist section.	
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5	Be it enacted by the Legislature of the State of Kansas:	_
6	Section 1. K.S.A. 2014 Supp. 65-1118 is hereby amended to rea	
7	follows: 65-1118. (a) The board shall collect in advance fees provided	for
8	in this act as fixed by the board, but not exceeding:	
9	Application for license—professional nurse	\$75
10	Application for license—practical nurse	50
11	Application for biennial renewal of license—professional	
12	nurse and practical nurse	60
13	Application for reinstatement of license	70
14	Application for reinstatement of licenses with temporary	
15	permit	100
16	Application for reinstatement of revoked license	250
17	Certified copy of license	25
18	Duplicate of license	25
19	Inactive license	20
20	Application for license—advanced practice registered	
21	nurse	50
22	Application for license with temporary permit—advanced	
23	practice registered nurse	100
24	Application for renewal of license—advanced practice	
25	registered nurse	60
26	Application for reinstatement of license—advanced practice	
27	registered nurse	75
28	Application for authorization—registered nurse	
29	anesthetist	75
30	Application for authorization with temporary authorization—	
31	registered nurse anesthetist	110
32	Application for biennial renewal of authorization—registered	
33	nurse anesthetist	60
34	Application for reinstatement of authorization—registered	
35	nurse anesthetist	75
36	Application for reinstatement of authorization with temporary	

HB 2120—Am. by HC

1	authorization—registered nurse anesthetist	100
2	Verification of license to another state	30
3	Application for exempt license—professional and practical	
4	nurse	50
5	Application for biennial renewal of exempt license—	
6	professional and practical nurse	50
7	Application for exempt license—advanced practice registered	
8	nurse	50
9	Application for biennial renewal of exempt license—advanced	
10	practice registered nurse	50
11		

(b) The board may require that fees paid for any examination under
the Kansas nurse practice act be paid directly to the examination service
by the person taking the examination.

(c) The board shall accept for payment of fees under this section personal checks, certified checks, cashier's checks, money orders or credit cards. The board may designate other methods of payment, but shall not refuse payment in the form of a personal check. The board may impose additional fees and recover any costs incurred by reason of payments made by personal checks with insufficient funds and payments made by credit cards.

New Sec. 2. (a) A person whose license has been revoked may apply 22 23 for reinstatement of the license after the expiration of three years from the 24 effective date of the revocation. Application for reinstatement shall be on a 25 form approved by the board and shall be accompanied by a reinstatement fee established by the board under K.S.A. 65-1118, and amendments 26 27 thereto. The burden of proof by clear and convincing evidence shall be on the applicant to show sufficient rehabilitation to justify reinstatement of 28 the license. If the board determines a license should not be reinstated, the 29 30 person shall not be eligible to reapply for reinstatement for three years from the effective date of the denial. All proceedings conducted on an 31 application for reinstatement shall be in accordance with the provisions of 32 the Kansas administrative procedure act and shall be reviewable in 33 accordance with the Kansas judicial review act. The board, on its own 34 35 motion, may stay the effectiveness of an order of revocation of license.

36 (b) This section shall be part of and supplemental to the Kansas nurse37 practice act.

38 Sec. 3. K.S.A. 2014 Supp. 65-1118 is hereby repealed.

39 Sec. 4. This act shall take effect and be in force from and after its 40 publication in the statute book. Session of 2015

HOUSE BILL No. 2119

By Committee on Health and Human Services

1-23

1	AN ACT concerning mental health technicians; fees; amending K.S.A. 65-
2	4208 and repealing the existing section.
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4	Be it enacted by the Legislature of the State of Kansas:
5	Section 1. K.S.A. 65-4208 is hereby amended to read as follows: 65-
6	4208. (a) The board shall collect in advance the fees provided for in this
7	act, the amount of which shall be fixed by the board by rules and
8	regulations, but not to exceed:
9	(1) Mental health technician programs:
10	Annual renewal of program approval\$110
11	Survey of a new program
12	Application for approval of continuing education providers
13	Annual fee for continuing education providers75
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15	(2) Mental health technicians:
16	Application for license\$50
17	Application for renewal of license60
18	Application for reinstatement70
19	Application for reinstatement of license with temporary permit
20	Certified copy of license
21	Duplicate of license
22	Inactive license
23	Examination
24	Reexamination
25	Verification of current Kansas license to other states
26	Application for exempt license
27	Application for biennial renewal of exempt license
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29	(b) The board shall charge and collect in advance fees for any
30	examination or reexamination administered by the board under the mental
31	health technician's licensure act as fixed by the board by rules and
32	regulations in accordance with this section. If an examination or
33	reexamination is not administered by the board, the board shall require
34	that fees paid for the examination not administered by the board be paid
35	directly to the examination service by the person taking the examination or
36	reexamination.

1 (c) The board shall accept for payment of fees under this section 2 personal checks, certified checks, cashier's checks, money orders or credit 3 cards. The board may designate other methods of payment, but shall not 4 refuse payment in the form of a personal check. The board may impose 5 additional fees and recover any costs incurred by reason of payments made 6 by personal checks with insufficient funds and payments made by credit 7 cards.

8 Sec. 2. K.S.A. 65-4208 is hereby repealed.

9 Sec. 3. This act shall take effect and be in force from and after its 10 publication in the statute book.

SENATE BILL No. 40

By Committee on Public Health and Welfare

1-20

1 AN ACT enacting the massage therapist licensure act; providing for powers, duties and functions of the state board of nursing; amending 2 3 K.S.A. 2014 Supp. 74-1112 and repealing the existing section. 4 5 Be it enacted by the Legislature of the State of Kansas: 6 New Section 1. As used in this act: 7 (a) "Board" means the state board of nursing. (b) "Massage school" means a massage therapy educational program 8 which meets the standards for training and curriculum as set forth by the 9 state board of regents under the Kansas private and out-of-state 10 postsecondary educational institution act, or comparable legal authority in 11 12 another state. (c) "Compensation" means the payment, loan, advance, donation, 13 contribution, barter, deposit or gift of money or anything of value. 14 "Licensed massage therapist" means a person who meets the 15 (d)requirements of this act and who engages in the practice of massage 16 17 therapy. bodywork 18 (e) "Professional massage therapy association or association" means a state or nationally chartered professional membership 19 organization that has been recognized by the board as offering services to 20 massage therapists. The organization requires that its members must 21 adhere to the organization's established code of ethics and standards of 22 23 practice. "Practice of massage therapy" means the care and services 24 (f) provided by a licensed massage therapist in a system of therapeutic, 25 structured touch, palpation or movement of the skin, muscle, tendons, 26 fascia and the lymphatic system of another person's body in order to 27 enhance or restore the general health and well-being of the recipient. 28 29 (1) Such system includes, but is not limited to: (A) Techniques such as effleurage, commonly called stroking or 30 gliding; petrissage, commonly called kneading; tapotement or percussion; 31 friction, vibration, compression; 32 (B) stretching within the normal anatomical range of movement; 33 (C) hydrotherapy; or 34 (D) such techniques which may be applied with or without the aid of 35 lubricants, salt or herbal preparations, water, hot and cold applications or a 36

1 massage device that mimics or enhances the actions possible by human2 hands.

3 (2) "Massage" or "massage therapy" does not include:

4 (A) Medical or nursing diagnosis of injury, illness or disease;

5 (B) therapeutic exercise;

6 (C) chiropractic joint adjustment;

7 (D) physical therapy joint mobilization or manipulation;

8 (E) electrical stimulation or application of ultrasound; or

9 (F) dispensing or issuing prescriptions or pharmaceutical agents.

10 (g) "Massage therapy services" include, but are not limited to:

(1) Development, implementation and modification of a massage
therapy treatment plan that addresses client soft tissue manifestations,
needs and concerns, including identifying indications, contraindications
and precautions of massage therapy within the scope of the act;

15 (2) obtaining informed consent regarding the risks and benefits of the 16 massage therapy treatment plan and application and modification of the 17 massage therapy treatment plan as needed;

18 (3) using effective interpersonal communication in the professional19 relationship;

20 (4) utilizing an ethical decision-making process that conforms to the 21 ethical standards of the profession, as set forth in this act and in rules and 22 regulations;

(5) establishing and maintaining a practice environment that provides
for the client's health, safety and comfort; or

(6) establishing and maintaining client records, professional records
and business records in compliance with standards of professional conduct
as required by rules and regulations.

New Sec. 2. (a) Upon application to the board and the payment of the required fees, an applicant for a license as a massage therapist may be licensed as a massage therapist if the applicant meets all the requirements of this act and provides documentation acceptable to the board that the applicant:

(1) Has obtained a high school diploma or equivalent;

(2) is 18 years of age or older;

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(3) has no other disqualifying conduct as defined by the board;

(4) has successfully completed a course of instruction approved by
the board consisting of at least 500 in-classroom hours of supervised
instruction, including massage therapy technique and theory,
contraindications, ethics, sanitation, hygiene, business training, anatomy,
physiology and pathology; and

(5) has successfully passed a nationally recognized competency
 examination in massage that meets acceptable psychometric principles, is
 statistically validated through a job-task analysis under current standards

1 for educational and professional testing and has been approved by the 2 board. The passage of this exam may have occurred prior to the effective 3 date of this act.

New Sec. 3. Prior to July 1, 2017, the board may issue a license as a
massage therapist to any individual who meets the requirements of section
2(a)(1), (2) and (3), and amendments thereto, and one of the following
requirements verified to the board by affidavit:

8 (a) The individual has completed a minimum of 500 hours of 9 instruction relating to massage therapy at a massage school or comparable 10 legal authority in another state verified to the board by affidavit;

11 (b) the individual has completed at least 300 hours of training in 12 massage therapy during the three years;

(c) the individual has practiced for at least three years;

(d) the individual has been an active member in good standing of a
professional massage or bodywork therapy association. as a massage or
bodywork therapist for a period of at least 12 months; or

(e) the individual has successfully passed an examination meeting the
requirements of section 2(a)(5), and amendments thereto, or passed a
nationally recognized certification examination.

New Sec. 4. (a) The board may issue a license to practice massage therapy as a licensed massage therapist to an applicant who has been duly licensed as a massage therapist by examination under the laws of another state or territory if, in the opinion of the board, the applicant meets the qualifications required of a licensed professional in this state. Verification of the applicant's licensure status shall be required from the original state of licensure.

(b) The board may issue a temporary permit to practice massage therapy as a licensed massage therapist for a period not to exceed 120 days. A temporary permit for 120 days may be issued to an applicant for licensure as a licensed massage therapist who is a graduate of a massage school in a foreign country after verification of licensure in that foreign country and approval of educational credentials.

New Sec. 5. (a) Nothing in this act shall be construed to restrict any 33 person licensed or regulated by the state of Kansas from engaging in the 34 profession or practice for which they are licensed or regulated including, 35 but not limited to, acupuncture, athletic training, barbering, chiropractic, 36 cosmetology, dentistry, electrology, esthetics, manicuring, medicine, 37 naturopathic medicine, nursing, occupational therapy, osteopathy, physical 38 therapy, podiatry, professional counseling, psychology, social work or 39 veterinary medicine or any other licensed or regulated profession by the 40 41 state of Kansas.

42 (b) Nothing in this act shall prohibit:

43 (1) The practice of massage therapy by a person employed by the

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government of the United States while the person is engaged in the performance of duties prescribed by the laws and regulations of the United States:

4 (2) the practice of massage therapy by persons duly licensed, 5 registered, or certified in another state, territory, the District of Columbia, 6 or a foreign country when incidentally called into this state to teach a 7 course related to massage therapy or to consult with a person licensed 8 under this act;

9 (3) students currently enrolled in a massage school while completing 10 a clinical requirement or supervised massage therapy fieldwork experience 11 for graduation performed under the supervision of a person licensed under 12 this act, provided the student does not hold oneself out as a licensed 13 massage therapist and does not receive compensation for services 14 performed;

(4) any person performing massage therapy services in the state, if
those services are performed without compensation and are performed in
cooperation with a charitable organization or as part of an emergency
response team working in conjunction with disaster relief officials;

(5) the practice, conduct and activities or services of a person who is
employed by a non-resident performance team, entertainer, or an athletic
team to the extent that such services or activities are provided solely to the
team or entertainer in the state for not more than 30 days;

(6) persons giving massage to members of such person's immediate or
 extended family without compensation;

(7) persons who restrict their manipulation of the soft tissues of the
human body to the hands, feet or ears and do not hold themselves out to be
massage therapists;

(8) members of any church practicing their religious tenets;

(9) the practice of any person in this state who uses touch, words and
directed movement to deepen awareness of existing patterns of movement
in the body as well as to suggest new possibilities of movement while
engaged within the scope of practice of a profession, provided that they do
not hold themselves out to be massage therapists. Such practices include,
but are not limited to, the Feldenkrais method of somatic education, the
Trager approach to movement education, and body-mind centering;

(10) the practice of any person in this state who uses touch to affect the energy systems, acupoints or qi meridians (channels of energy) of the human body while engaged within the scope of practice of a profession, provided that they do not hold themselves out to be massage therapists. Such practices include, but are not limited to, polarity, polarity therapy, polarity bodywork therapy, Asian bodywork therapy, acupressure, jin shin do, qi gong, reiki, shiatsu and ortho bionomy; or

43 (11) persons engaged in the profession of structural integration,

restoring postural balance and functional ease by integrating the body in gravity based on a system of fascial manipulation and awareness, provided that they do not hold themselves out to be massage therapists. Such practices include, but are not limited to, rolfing structural integration, the guild for structural integration and Hellerwork.

6 New Sec. 6. (a) A person licensed under this act as a massage 7 therapist shall:

8 (1) Use the letters "LMT" to identify themselves to patients or the 9 public; and

10 (2) be authorized to use words, including "massage therapist," 11 "massagist," "massotherapist," "myotherapist," "body therapist," "massage 12 technician," "massage practitioner," "masseur," "masseuse" or any 13 derivation of those terms that implies this practice to indicate that such 14 person is a massage therapist licensed under the act.

15 (b) On and after September 1, 2017, it shall be unlawful for any 16 person who is not licensed under this act as a massage therapist or whose 17 license has been suspended, revoked or lapsed to promote oneself to the 18 public in any manner as a licensed massage therapist or to engage in the 19 practice of massage therapy. An intentional violation of this subsection 20 shall constitute a class B person misdemeanor.

(c) No statute granting authority to persons licensed or registered by
the state board of nursing shall be construed to confer authority upon a
massage therapist to engage in any activity not conferred by this act.

New Sec. 7. (a) An advisory committee of six members, two board 24 members and four non-board members, shall be established by the board 25 to advise and assist the board in implementing this act as determined by 26 the board. The advisory committee shall meet at least annually. Members 27 of the advisory committee shall receive amounts provided for in K.S.A. 28 75-3223(e), and amendments thereto, for each day of actual attendance at 29 any meeting of the advisory committee or any subcommittee meeting of 30 the advisory committee authorized by the board. 31

32 (b) The two board members shall be appointed by the state board of nursing. The three non-board members of the massage therapy advisory 33 34 committee shall be appointed by the state board of nursing, shall be 35 massage therapists and shall be citizens and residents of the state. No more than one member may be an owner of a massage school. The fourth non-36 37 board member shall be the designee of the Kansas attorney general. The 38 members of the committee shall be appointed for terms of two years and 39 shall serve at the pleasure of the state board of nursing.

New Sec. 8. (a) The board shall biennially charge and collect in
advance fees provided for in this act as fixed by the board by rules and
regulations, subject to the following limitations:

43 Application fee, not more than.....\$80

1	Temporary permit fee, not more than	\$25
	License renewal fee, not more than	
	License reinstatement fee, not more than	
4	Certified copy of license, not more than	\$25
	Written verification of license, not more than	
	Inactive license fee, not more than	

7 (b) The board may require that fees paid for any examination under 8 the massage therapist licensure act be paid directly to the examination 9 service by the person taking the examination.

10 (c) The board shall accept for payment of fees under this section 11 personal checks, certified checks, cashier's checks, money orders or credit 12 cards. The board may designate other methods of payment, but shall not 13 refuse payment in the form of a personal check. The board may impose 14 additional fees and recover any costs incurred by reason of payments made 15 by personal checks with insufficient funds and payments made by credit 16 cards.

New Sec. 9. (a) All licenses issued under the provisions of this act, 17 whether initial or renewal, shall expire every two years. The expiration 18 date shall be established by the rules and regulations of the board. The 19 board shall send a notice for renewal of license to every massage therapist 20 at least 60 days prior to the expiration date of such person's license. Every 21 person so licensed who desires to renew such license shall file with the 22 board, on or before the date of expiration of such license, a renewal 23 application together with the prescribed biennial renewal fee. Every 24 licensee who is no longer engaged in the active practice of massage 25 therapy may so state by affidavit and submit such affidavit with the 26 renewal application. An inactive license may be requested along with 27 payment of a fee which shall be fixed by rules and regulations of the 28 board. Except for the first renewal for a license that expires within 30 29 months following licensure examination or for renewal of a license that 30 expires within the first nine months following licensure by reinstatement 31 32 or endorsement, every licensee with an active massage therapy license shall submit with the renewal application evidence of satisfactory 33 completion of a program of continuing massage therapy education 34 required by the board. The board, by duly adopted rules and regulations, 35 shall establish the requirements for such program of continuing massage 36 therapy education. The board shall require as a condition for renewal of a 37 license completion of no more than 12 hours biennially of continuing 38 education approved by the board in rules and regulations. Upon receipt of 39 such application, payment of fee, upon receipt of the evidence of 40 satisfactory completion of the required program of continuing massage 41 therapy education and upon being satisfied that the applicant meets the 42 requirements set forth by law in effect at the time of initial licensure of the 43

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applicant, the board shall verify the accuracy of the application and grant a
 renewal license.

(b) Any person who fails to secure a renewal license within the time 3 specified herein may secure a reinstatement of such lapsed license by 4 5 making verified application therefor on a form provided by the board, by rules and regulations, and upon furnishing proof that the applicant is 6 7 competent and qualified to act as a massage therapist and by satisfying all of the requirements for reinstatement, including payment to the board of a 8 reinstatement fee as established by the board. A reinstatement application 9 for licensure will be held awaiting completion of such documentation as 10 may be required, but such application shall not be held for a period of time 11 in excess of that specified in rules and regulations. 12

(c) (1) Each licensee shall notify the board in writing of:

(A) A change in name or address within 30 days of the change; or

15 (B) a conviction of any felony or misdemeanor, that is specified in 16 rules and regulations adopted by the board, within 30 days from the date 17 the conviction becomes final.

(2) As used in this subsection, "conviction" means a final conviction 18 without regard to whether the sentence was suspended or probation 19 20 granted after such conviction. Also, for the purposes of this subsection, a forfeiture of bail, bond or collateral deposited to secure a defendant's 21 appearance in court, which forfeiture has not been vacated, shall be 22 equivalent to a conviction. Failure to so notify the board shall not 23 constitute a defense in an action relating to failure to renew a license, nor 24 shall it constitute a defense in any other proceeding. 25

(d) (1) The board of nursing shall require an original applicant for 26 licensure as a massage therapist to be fingerprinted and submit to a state 27 and national criminal history record check. The fingerprints shall be used 28 to identify the applicant and to determine whether the applicant has a 29 record of criminal history in this state or other jurisdictions. The board of 30 nursing is authorized to submit the fingerprints to the Kansas bureau of 31 investigation and the federal bureau of investigation for a state and 32 national criminal history record check, and request subsequent arrest 33 notification services from both agencies. The board of nursing may use the 34 information obtained from fingerprinting and the applicant's criminal 35 history for purposes of verifying the identification of any applicant and in 36 37 the official determination of character and fitness of the applicant for any licensure to practice massage therapy in this state. 38

39 (2) Local and state law enforcement officers and agencies shall assist 40 the board of nursing in the taking and processing of fingerprints of 41 applicants to practice massage therapy in this state and shall release all 42 records of adult convictions and non-convictions and adult convictions or 43 adjudications of another state or country to the board of nursing. 1 (3) The board shall fix a fee for fingerprinting of applicants or 2 licensees, or both, as may be required by the board in an amount necessary 3 to reimburse the board for the cost of the fingerprinting. Fees collected 4 under this subsection shall be deposited in the criminal background and 5 fingerprinting fund.

New Sec. 10. (a) The board may refuse to grant licensure to, or may
suspend, revoke, condition, limit, qualify or restrict the licensure issued
under this act of any individual who the board, after the opportunity for a
hearing, determines:

10 (1) Is incompetent to practice massage therapy, or is found to engage 11 in the practice of massage therapy in a manner harmful or dangerous to a 12 client or to the public;

(2) is convicted by a court of competent jurisdiction of a felony,
misdemeanor crimes against persons or substantiation of abuse against a
child, adult or resident of a care facility, even if not practice related;

16 (3) has violated a provision of the massage therapist licensure act or 17 one or more of the rules and regulations of the board;

(4) has obtained or attempted to obtain a license or license renewal bybribery or fraudulent representation;

20 (5) has knowingly made a false statement on a form required by the 21 board for license or license renewal;

(6) has failed to obtain continuing education credits required by rulesand regulations of the board;

(7) has been found guilty of unprofessional conduct as defined byrules and regulations established by the board; or

(8) has had a registration, license or certificate as an massage
therapist revoked, suspended or limited, or has had other disciplinary
action taken, or an application for registration, license or certificate denied,
by the proper regulatory authority of another state, territory, District of
Columbia or another country, a certified copy of the record of the action of
the other jurisdiction being conclusive evidence thereof.

(b) Upon filing of a sworn complaint with the board charging a 32 person with having been guilty of any of the unlawful practices specified 33 in subsection (a), two or more members of the board shall investigate the 34 charges, or the board may designate and authorize an employee or 35 employees of the board to conduct an investigation. After investigation, 36 the board may institute charges. If an investigation, in the opinion of the 37 38 board, reveals reasonable grounds for believing the applicant or licensee is guilty of the charges, the board shall fix a time and place for proceedings, 39 which shall be conducted in accordance with the provisions of the Kansas 40 41 administrative procedure act.

42 (c) No person shall be excused from testifying in any proceedings 43 before the board under this act or in any civil proceedings under this act

before a court of competent jurisdiction on the ground that such testimony may incriminate the person testifying, but such testimony shall not be used against the person for the prosecution of any crime under the laws of this state except the crime of perjury as defined in K.S.A. 2014 Supp. 21-5903, and amendments thereto.

(d) If final agency action of the board in a proceeding under this 6 7 section is adverse to the applicant or licensee, the costs of the board's 8 proceedings shall be charged to the applicant or licensee as in ordinary 9 civil actions in the district court, but if the board is the unsuccessful party, the costs shall be paid by the board. Witness fees and costs may be taxed 10 by the board according to the statutes relating to procedure in the district 11 court. All costs accrued by the board, when it is the successful party, and 12 13 which the attorney general certifies cannot be collected from the applicant or licensee shall be paid from the board of nursing fee fund. All moneys 14 collected following board proceedings shall be credited in full to the board 15 of nursing fee fund. 16

The denial, suspension, revocation or limitation of a license or 17 (e) 18 public or private censure of a licensee may be ordered by the board after notice and hearing on the matter in accordance with the provisions of the 19 Kansas administrative procedure act. The board shall also notify the local 20 law enforcement agency upon disciplinary action. Upon the end of the 21 period no less than two years for the revocation of a license, application 22 may be made to the board for reinstatement. The board shall have 23 24 discretion to accept or reject an application for reinstatement and may hold a hearing to consider such reinstatement. An application for reinstatement 25 of a revoked license shall be accompanied by the license reinstatement fee 26 27 established under section 8, and amendments thereto.

The board, in addition to any other penalty prescribed in 28 (f) subsection (a), may assess a civil fine, after proper notice and an 29 opportunity to be heard, against a licensee for unprofessional conduct in an 30 amount not to exceed \$1,000 for the first violation, \$2,000 for the second 31 violation and \$3,000 for the third violation and for each subsequent 32 violation. All fines assessed and collected under this section shall be 33 remitted to the state treasurer in accordance with the provisions of K.S.A. 34 75-4215, and amendments thereto. Upon receipt of each such remittance, 35 the state treasurer shall deposit the entire amount in the state treasury to 36 37 the credit of the state general fund.

(g) The board, upon request, shall receive from the Kansas bureau of
investigation such criminal history record information relating to arrests
and criminal convictions as necessary for the purpose of determining
initial and continuing qualifications of licensees of and applicants for
licensure by the board.

43 New Sec. 11. The board shall remit all moneys received from fees,

1 charges or penalties to the state treasurer in accordance with the provisions 2 of K.S.A. 75-4215, and amendments thereto. Upon receipt of each such 3 remittance, the state treasurer shall deposit the entire amount in the state 4 treasury. Ten percent of each such deposit shall be credited to the state 5 general fund and the balance shall be credited to the nursing fee fund. All 6 expenditures from such fund shall be made in accordance with 7 appropriation acts upon warrants of the director of accounts and reports 8 issued pursuant to vouchers approved by the president of the board or by a 9 person designated by the president of the board.

10 New Sec. 12. A local unit of government shall not establish or maintain professional licensing requirements for a massage therapist 11 licensed under this act. Nothing in this act shall affect local zoning 12 13 requirements. Local government law enforcement agencies may inspect massage therapy registrations and the business premises where massage 14 15 therapy is practiced for compliance with applicable laws. Nothing in this 16 section shall be construed to preclude criminal prosecution for a violation 17 of any criminal law. If such inspection reveals the practice of massage 18 therapy by a person without a valid license, the person may be charged with a violation of section 6 (b), and amendments thereto. 19

New Sec. 13. (a) When it appears to the board that any person is violating any of the provisions of this act, the board may bring an action in the name of the state of Kansas in a court of competent jurisdiction for an injunction against such violation without regard to whether proceedings have been or may be instituted before the board or whether criminal proceedings have been or may be instituted.

26 (b) The provisions of this section shall take effect on and after 27 September 1, 2017.

New Sec. 14. All state agency adjudicative proceedings under the licensed massage therapist act shall be conducted in accordance with the provisions of the Kansas administrative procedure act and shall be reviewable in accordance with the Kansas judicial review act.

New Sec. 15. Professional liability insurance coverage shall be maintained in effect by each massage therapist as a condition to rendering professional service as a massage therapist in this state. The board shall fix by rules and regulations the minimum level of coverage for such professional liability insurance.

New Sec. 16. On the effective date of this act, nothing in the massage therapist licensure act or in the provisions of K.S.A. 40-2,100 through 40-2,105, and amendments thereto, or K.S.A. 2014 Supp. 40-2,105a through 40-2,105d, and amendments thereto, shall be construed to require that any individual, group or blanket policy of accident and sickness, medical or surgical expense insurance coverage or any provision of a policy, contract, plan or agreement for medical service issued on or after the effective date 1 of this act, reimburse or indemnify a person licensed under the massage 2 therapist licensure act for services provided as a massage therapist.

New Sec. 17. Sections 1 through 17, and amendments thereto, shall
be known and may be cited as the massage therapist licensure act.

5 Sec. 18. K.S.A. 2014 Supp. 74-1112 is hereby amended to read as 6 follows: 74-1112. (a) The board of nursing may require an original 7 applicant for licensure as a professional nurse, practical nurse-or, mental 8 health technician or massage therapist to be fingerprinted and submit to a 9 state and national criminal history record check. The fingerprints shall be 10 used to identify the applicant and to determine whether the applicant has a record of criminal history in this state or other jurisdictions. The board of 11 nursing is authorized to submit the fingerprints to the Kansas bureau of 12 13 investigation and the federal bureau of investigation for a state and national criminal history record check. The board of nursing may use the 14 information obtained from fingerprinting and the applicant's criminal 15 history for purposes of verifying the identification of any applicant and in 16 the official determination of character and fitness of the applicant for any 17 licensure to practice professional or practical nursing-or, mental health 18 19 technology or massage therapy in this state.

(b) Local and state law enforcement officers and agencies shall assist
the board of nursing in taking and processing of fingerprints of applicants
to practice professional or practical nursing-or, mental health technology
or massage therapy in this state and shall release all records of adult
convictions and nonconvictions and adult convictions or adjudications of
another state or country to the board of nursing.

(c) The board shall fix a fee for fingerprinting of applicants or
licensees, or both, as may be required by the board in an amount necessary
to reimburse the board for the cost of the fingerprinting. Fees collected
under this subsection shall be deposited in the criminal background and
fingerprinting fund.

(d) There is hereby created in the state treasury the criminal 31 background and fingerprinting fund. All moneys credited to the fund shall 32 be used to pay the Kansas bureau of investigation for the processing of 33 fingerprints and criminal history background checks for the board of 34 nursing. The fund shall be administered by the board of nursing. All 35 expenditures from the fund shall be made in accordance with appropriation 36 acts upon warrants of the director of accounts and reports issued pursuant 37 to vouchers approved by the president of the board or a person designated 38 39 by the president.

40 Sec. 19. K.S.A. 2014 Supp. 74-1112 is hereby repealed.

41 Sec. 20. This act shall take effect and be in force from and after its 42 publication in the statute book. Session of 2015

HOUSE BILL No. 2123

By Committee on Health and Human Services

1-23

AN ACT enacting the massage therapist licensure act; providing for 1 2 powers, duties and functions of the state board of nursing; amending 3 K.S.A. 2014 Supp. 74-1112 and repealing the existing section. 4 5 Be it enacted by the Legislature of the State of Kansas: 6 New Section 1. As used in this act: 7 "Board" means the state board of nursing. (a) (b) "Massage school" means a massage therapy educational program 8 which meets the standards for training and curriculum as set forth by the 9 state board of regents under the Kansas private and out-of-state 10 postsecondary educational institution act, or comparable legal authority in 11 12 another state. "Compensation" means the payment, loan, advance, donation, 13 (c) contribution, barter, deposit or gift of money or anything of value. 14 (d) "Licensed massage therapist" means a person who meets the 15 requirements of this act and who engages in the practice of massage 16 17 therapy. "Professional bodywork 18 massage therapy association or (e) association" means a state or nationally chartered professional membership 19 organization that has been recognized by the board as offering services to 20 massage therapists. The organization requires that its members must 21 adhere to the organization's established code of ethics and standards of 22 23 practice. 24 (f) "Practice of massage therapy" means the care and services provided by a licensed massage therapist in a system of therapeutic, 25 structured touch, palpation or movement of the skin, muscle, tendons, 26 27 fascia and the lymphatic system of another person's body in order to enhance or restore the general health and well-being of the recipient. 28 29 (1) Such system includes, but is not limited to: (A) Techniques such as effleurage, commonly called stroking or 30 gliding; petrissage, commonly called kneading; tapotement or percussion; 31 32 friction, vibration, compression; 33 (B) stretching within the normal anatomical range of movement; (C) hydrotherapy; or 34 (D) such techniques which may be applied with or without the aid of 35 lubricants, salt or herbal preparations, water, hot and cold applications or a 36

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1 massage device that mimics or enhances the actions possible by human2 hands.

3 (2) "Massage" or "massage therapy" does not include:

4 (A) Medical or nursing diagnosis of injury, illness or disease;

5 (B) therapeutic exercise;

6 (C) chiropractic joint adjustment;

(D) physical therapy joint mobilization or manipulation;

8 (E) electrical stimulation or application of ultrasound; or

(F) dispensing or issuing prescriptions or pharmaceutical agents.

10 (g) "Massage therapy services" include, but are not limited to:

(1) Development, implementation and modification of a massage
therapy treatment plan that addresses client soft tissue manifestations,
needs and concerns, including identifying indications, contraindications
and precautions of massage therapy within the scope of the act;

15 (2) obtaining informed consent regarding the risks and benefits of the 16 massage therapy treatment plan and application and modification of the 17 massage therapy treatment plan as needed;

18 (3) using effective interpersonal communication in the professional19 relationship;

(4) utilizing an ethical decision-making process that conforms to the
ethical standards of the profession, as set forth in this act and in rules and
regulations;

(5) establishing and maintaining a practice environment that provides
 for the client's health, safety and comfort; or

(6) establishing and maintaining client records, professional records
and business records in compliance with standards of professional conduct
as required by rules and regulations.

New Sec. 2. (a) Upon application to the board and the payment of the required fees, an applicant for a license as a massage therapist may be licensed as a massage therapist if the applicant meets all the requirements of this act and provides documentation acceptable to the board that the applicant:

33 (1) Has obtained a high school diploma or equivalent;

34 (2) is 18 years of age or older;

(3) has no other disqualifying conduct as defined by the board;

(4) has successfully completed a course of instruction approved by
the board consisting of at least 500 in-classroom hours of supervised
instruction, including massage therapy technique and theory,
contraindications, ethics, sanitation, hygiene, business training, anatomy,
physiology and pathology; and

41 (5) has successfully passed a nationally recognized competency
42 examination in massage that meets acceptable psychometric principles, is
43 statistically validated through a job-task analysis under current standards

1 for educational and professional testing and has been approved by the 2 board. The passage of this exam may have occurred prior to the effective 3 date of this act.

New Sec. 3. Prior to July 1, 2017, the board may issue a license as a
massage therapist to any individual who meets the requirements of section
2(a)(1), (2) and (3), and amendments thereto, and one of the following
requirements verified to the board by affidavit:

8 (a) The individual has completed a minimum of 500 hours of 9 instruction relating to massage therapy at a massage school or comparable 10 legal authority in another state verified to the board by affidavit;

11 (b) the individual has completed at least 300 hours of training in 12 massage therapy during the three years;

(c) the individual has practiced for at least three years;

(d) the individual has been an active member in good standing of a
professional massage or bodywork therapy association as a massage or
bodywork therapist for a period of at least 12 months; or

(e) the individual has successfully passed an examination meeting the
requirements of section 2(a)(5), and amendments thereto, or passed a
nationally recognized certification examination.

New Sec. 4. (a) The board may issue a license to practice massage therapy as a licensed massage therapist to an applicant who has been duly licensed as a massage therapist by examination under the laws of another state or territory if, in the opinion of the board, the applicant meets the qualifications required of a licensed professional in this state. Verification of the applicant's licensure status shall be required from the original state of licensure.

(b) The board may issue a temporary permit to practice massage therapy as a licensed massage therapist for a period not to exceed 120 days. A temporary permit for 120 days may be issued to an applicant for licensure as a licensed massage therapist who is a graduate of a massage school in a foreign country after verification of licensure in that foreign country and approval of educational credentials.

New Sec. 5. (a) Nothing in this act shall be construed to restrict any 33 34 person licensed or regulated by the state of Kansas from engaging in the 35 profession or practice for which they are licensed or regulated including, but not limited to, acupuncture, athletic training, barbering, chiropractic, 36 cosmetology, dentistry, electrology, esthetics, manicuring, medicine, 37 naturopathic medicine, nursing, occupational therapy, osteopathy, physical 38 therapy, podiatry, professional counseling, psychology, social work or 39 veterinary medicine or any other licensed or regulated profession by the 40 state of Kansas. 41

42 (b) Nothing in this act shall prohibit:

43 (1) The practice of massage therapy by a person employed by the

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government of the United States while the person is engaged in the performance of duties prescribed by the laws and regulations of the United States;

4 (2) the practice of massage therapy by persons duly licensed, 5 registered, or certified in another state, territory, the District of Columbia, 6 or a foreign country when incidentally called into this state to teach a 7 course related to massage therapy or to consult with a person licensed 8 under this act;

9 (3) students currently enrolled in a massage school while completing 10 a clinical requirement or supervised massage therapy fieldwork experience 11 for graduation performed under the supervision of a person licensed under 12 this act, provided the student does not hold oneself out as a licensed 13 massage therapist and does not receive compensation for services 14 performed;

(4) any person performing massage therapy services in the state, if
those services are performed without compensation and are performed in
cooperation with a charitable organization or as part of an emergency
response team working in conjunction with disaster relief officials;

(5) the practice, conduct and activities or services of a person who is
employed by a non-resident performance team, entertainer, or an athletic
team to the extent that such services or activities are provided solely to the
team or entertainer in the state for not more than 30 days;

(6) persons giving massage to members of such person's immediate or
 extended family without compensation;

(7) persons who restrict their manipulation of the soft tissues of the
human body to the hands, feet or ears and do not hold themselves out to be
massage therapists;

(8) members of any church practicing their religious tenets;

(9) the practice of any person in this state who uses touch, words and
directed movement to deepen awareness of existing patterns of movement
in the body as well as to suggest new possibilities of movement while
engaged within the scope of practice of a profession, provided that they do
not hold themselves out to be massage therapists. Such practices include,
but are not limited to, the Feldenkrais method of somatic education, the
Trager approach to movement education, and body-mind centering;

(10) the practice of any person in this state who uses touch to affect
the energy systems, acupoints or qi meridians (channels of energy) of the
human body while engaged within the scope of practice of a profession,
provided that they do not hold themselves out to be massage therapists.
Such practices include, but are not limited to, polarity, polarity therapy,
polarity bodywork therapy, Asian bodywork therapy, acupressure, jin shin
do, qi gong, reiki, shiatsu and ortho bionomy; or

43 (11) persons engaged in the profession of structural integration,

1 restoring postural balance and functional ease by integrating the body in

2 gravity based on a system of fascial manipulation and awareness, provided 3 that they do not hold themselves out to be massage therapists. Such 4 practices include, but are not limited to, rolfing structural integration, the 5 guild for structural integration and Hellerwork.

6 New Sec. 6. (a) A person licensed under this act as a massage 7 therapist shall:

8 (1) Use the letters "LMT" to identify themselves to patients or the 9 public; and

10 (2) be authorized to use words, including "massage therapist," 11 "massagist," "massotherapist," "myotherapist," "body therapist," "massage 12 technician," "massage practitioner," "masseur," "masseuse" or any 13 derivation of those terms that implies this practice to indicate that such 14 person is a massage therapist licensed under the act.

15 (b) On and after September 1, 2017, it shall be unlawful for any 16 person who is not licensed under this act as a massage therapist or whose 17 license has been suspended, revoked or lapsed to promote oneself to the 18 public in any manner as a licensed massage therapist or to engage in the 19 practice of massage therapy. An intentional violation of this subsection 20 shall constitute a class B person misdemeanor.

(c) No statute granting authority to persons licensed or registered by
the state board of nursing shall be construed to confer authority upon a
massage therapist to engage in any activity not conferred by this act.

24 New Sec. 7. (a) An advisory committee of six members, two board members and four non-board members, shall be established by the board 25 26 to advise and assist the board in implementing this act as determined by the board. The advisory committee shall meet at least annually. Members 27 of the advisory committee shall receive amounts provided for in K.S.A. 28 29 75-3223(e), and amendments thereto, for each day of actual attendance at any meeting of the advisory committee or any subcommittee meeting of 30 31 the advisory committee authorized by the board.

(b) The two board members shall be appointed by the state board of 32 nursing. The three non-board members of the massage therapy advisory 33 34 committee shall be appointed by the state board of nursing, shall be massage therapists and shall be citizens and residents of the state. No more 35 than one member may be an owner of a massage school. The fourth non-36 37 board member shall be the designee of the Kansas attorney general. The 38 members of the committee shall be appointed for terms of two years and shall serve at the pleasure of the state board of nursing. 39

New Sec. 8. (a) The board shall biennially charge and collect in
advance fees provided for in this act as fixed by the board by rules and
regulations, subject to the following limitations:

43 Application fee, not more than......\$80

1	Temporary permit fee, not more than	\$25
2	License renewal fee, not more than	\$75
3	License reinstatement fee, not more than	\$80
4	Certified copy of license, not more than	\$25
	Written verification of license, not more than	
6	Inactive license fee, not more than	\$20

7 (b) The board may require that fees paid for any examination under 8 the massage therapist licensure act be paid directly to the examination 9 service by the person taking the examination.

10 (c) The board shall accept for payment of fees under this section 11 personal checks, certified checks, cashier's checks, money orders or credit 12 cards. The board may designate other methods of payment, but shall not 13 refuse payment in the form of a personal check. The board may impose 14 additional fees and recover any costs incurred by reason of payments made 15 by personal checks with insufficient funds and payments made by credit 16 cards.

17 New Sec. 9. (a) All licenses issued under the provisions of this act, whether initial or renewal, shall expire every two years. The expiration 18 date shall be established by the rules and regulations of the board. The 19 board shall send a notice for renewal of license to every massage therapist 20 at least 60 days prior to the expiration date of such person's license. Every 21 person so licensed who desires to renew such license shall file with the 22 board, on or before the date of expiration of such license, a renewal 23 application together with the prescribed biennial renewal fee. Every 24 25 licensee who is no longer engaged in the active practice of massage therapy may so state by affidavit and submit such affidavit with the 26 renewal application. An inactive license may be requested along with 27 payment of a fee which shall be fixed by rules and regulations of the 28 29 board. Except for the first renewal for a license that expires within 30 months following licensure examination or for renewal of a license that 30 31 expires within the first nine months following licensure by reinstatement or endorsement, every licensee with an active massage therapy license 32 shall submit with the renewal application evidence of satisfactory 33 completion of a program of continuing massage therapy education 34 required by the board. The board, by duly adopted rules and regulations, 35 36 shall establish the requirements for such program of continuing massage therapy education. The board shall require as a condition for renewal of a 37 license completion of no more than 12 hours biennially of continuing 38 education approved by the board in rules and regulations. Upon receipt of 39 such application, payment of fee, upon receipt of the evidence of 40 satisfactory completion of the required program of continuing massage 41 therapy education and upon being satisfied that the applicant meets the 42 requirements set forth by law in effect at the time of initial licensure of the 43

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applicant, the board shall verify the accuracy of the application and grant a
 renewal license.

3 (b) Any person who fails to secure a renewal license within the time 4 specified herein may secure a reinstatement of such lapsed license by making verified application therefor on a form provided by the board, by 5 6 rules and regulations, and upon furnishing proof that the applicant is competent and qualified to act as a massage therapist and by satisfying all 7 of the requirements for reinstatement, including payment to the board of a 8 reinstatement fee as established by the board. A reinstatement application 9 10 for licensure will be held awaiting completion of such documentation as may be required, but such application shall not be held for a period of time 11 12 in excess of that specified in rules and regulations.

(c) (1) Each licensee shall notify the board in writing of:

(A) A change in name or address within 30 days of the change; or

15 (B) a conviction of any felony or misdemeanor, that is specified in 16 rules and regulations adopted by the board, within 30 days from the date 17 the conviction becomes final.

(2) As used in this subsection, "conviction" means a final conviction 18 19 without regard to whether the sentence was suspended or probation granted after such conviction. Also, for the purposes of this subsection, a 20 forfeiture of bail, bond or collateral deposited to secure a defendant's 21 appearance in court, which forfeiture has not been vacated, shall be 22 23 equivalent to a conviction. Failure to so notify the board shall not constitute a defense in an action relating to failure to renew a license, nor 24 shall it constitute a defense in any other proceeding. 25

(d) (1) The board of nursing shall require an original applicant for 26 licensure as a massage therapist to be fingerprinted and submit to a state 27 and national criminal history record check. The fingerprints shall be used 28 to identify the applicant and to determine whether the applicant has a 29 record of criminal history in this state or other jurisdictions. The board of 30 nursing is authorized to submit the fingerprints to the Kansas bureau of 31 investigation and the federal bureau of investigation for a state and 32 national criminal history record check, and request subsequent arrest 33 34 notification services from both agencies. The board of nursing may use the information obtained from fingerprinting and the applicant's criminal 35 history for purposes of verifying the identification of any applicant and in 36 the official determination of character and fitness of the applicant for any 37 licensure to practice massage therapy in this state. 38

39 (2) Local and state law enforcement officers and agencies shall assist 40 the board of nursing in the taking and processing of fingerprints of 41 applicants to practice massage therapy in this state and shall release all 42 records of adult convictions and non-convictions and adult convictions or 43 adjudications of another state or country to the board of nursing.

1 (3) The board shall fix a fee for fingerprinting of applicants or 2 licensees, or both, as may be required by the board in an amount necessary 3 to reimburse the board for the cost of the fingerprinting. Fees collected 4 under this subsection shall be deposited in the criminal background and 5 fingerprinting fund.

New Sec. 10. (a) The board may refuse to grant licensure to, or may
suspend, revoke, condition, limit, qualify or restrict the licensure issued
under this act of any individual who the board, after the opportunity for a
hearing, determines:

10 (1) Is incompetent to practice massage therapy, or is found to engage 11 in the practice of massage therapy in a manner harmful or dangerous to a 12 client or to the public;

(2) is convicted by a court of competent jurisdiction of a felony,
misdemeanor crimes against persons or substantiation of abuse against a
child, adult or resident of a care facility, even if not practice related;

16 (3) has violated a provision of the massage therapist licensure act or 17 one or more of the rules and regulations of the board;

18 (4) has obtained or attempted to obtain a license or license renewal by19 bribery or fraudulent representation;

20 (5) has knowingly made a false statement on a form required by the 21 board for license or license renewal;

(6) has failed to obtain continuing education credits required by rulesand regulations of the board;

(7) has been found guilty of unprofessional conduct as defined byrules and regulations established by the board; or

(8) has had a registration, license or certificate as a massage therapist revoked, suspended or limited, or has had other disciplinary action taken, or an application for registration, license or certificate denied by the proper regulatory authority of another state, territory, District of Columbia or another country, a certified copy of the record of the action of the other jurisdiction being conclusive evidence thereof.

(b) Upon filing of a sworn complaint with the board charging a 32 person with having been guilty of any of the unlawful practices specified 33 in subsection (a), two or more members of the board shall investigate the 34 charges, or the board may designate and authorize an employee or 35 employees of the board to conduct an investigation. After investigation, 36 the board may institute charges. If an investigation, in the opinion of the 37 board, reveals reasonable grounds for believing the applicant or licensee is 38 guilty of the charges, the board shall fix a time and place for proceedings, 39 which shall be conducted in accordance with the provisions of the Kansas 40 41 administrative procedure act.

42 (c) No person shall be excused from testifying in any proceedings 43 before the board under this act or in any civil proceedings under this act

before a court of competent jurisdiction on the ground that such testimony
may incriminate the person testifying, but such testimony shall not be used
against the person for the prosecution of any crime under the laws of this
state except the crime of perjury as defined in K.S.A. 2014 Supp. 21-5903,
and amendments thereto.

6 (d) If final agency action of the board in a proceeding under this 7 section is adverse to the applicant or licensee, the costs of the board's 8 proceedings shall be charged to the applicant or licensee as in ordinary 9 civil actions in the district court, but if the board is the unsuccessful party, 10 the costs shall be paid by the board. Witness fees and costs may be taxed by the board according to the statutes relating to procedure in the district 11 12 court. All costs accrued by the board, when it is the successful party, and which the attorney general certifies cannot be collected from the applicant 13 or licensee, shall be paid from the board of nursing fee fund. All moneys 14 15 collected following board proceedings shall be credited in full to the board 16 of nursing fee fund.

(e) The denial, suspension, revocation or limitation of a license or 17 public or private censure of a licensee may be ordered by the board after 18 notice and hearing on the matter in accordance with the provisions of the 19 Kansas administrative procedure act. The board shall also notify the local 20 law enforcement agency upon disciplinary action. Upon the end of the 21 period no less than two years for the revocation of a license, application 22 may be made to the board for reinstatement. The board shall have 23 discretion to accept or reject an application for reinstatement and may hold 24 a hearing to consider such reinstatement. An application for reinstatement 25 of a revoked license shall be accompanied by the license reinstatement fee 26 established under section 8, and amendments thereto. 27

(f) The board, in addition to any other penalty prescribed in 28 subsection (a), may assess a civil fine, after proper notice and an 29 opportunity to be heard, against a licensee for unprofessional conduct in an 30 31 amount not to exceed \$1,000 for the first violation, \$2,000 for the second violation and \$3,000 for the third violation and for each subsequent 32 violation. All fines assessed and collected under this section shall be 33 remitted to the state treasurer in accordance with the provisions of K.S.A. 34 75-4215, and amendments thereto. Upon receipt of each such remittance, 35 the state treasurer shall deposit the entire amount in the state treasury to 36 the credit of the state general fund. 37

(g) The board, upon request, shall receive from the Kansas bureau of
investigation such criminal history record information relating to arrests
and criminal convictions as necessary for the purpose of determining
initial and continuing qualifications of licensees and applicants for
licensure by the board.

43 New Sec. 11. The board shall remit all moneys received from fees,

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charges or penalties to the state treasurer in accordance with the provisions of K.S.A. 75-4215, and amendments thereto. Upon receipt of each such remittance, the state treasurer shall deposit the entire amount in the state treasury. Ten percent of each such deposit shall be credited to the state general fund and the balance shall be credited to the nursing fee fund. All expenditures from such fund shall be made in accordance with appropriation acts upon warrants of the director of accounts and reports issued pursuant to vouchers approved by the president of the board or by a

9 person designated by the president of the board.

10 New Sec. 12. A local unit of government shall not establish or maintain professional licensing requirements for a massage therapist 11 licensed under this act. Nothing in this act shall affect local zoning 12 13 requirements. Local government law enforcement agencies may inspect massage therapy registrations and the business premises where massage 14 15 therapy is practiced for compliance with applicable laws. Nothing in this section shall be construed to preclude criminal prosecution for a violation 16 17 of any criminal law. If such inspection reveals the practice of massage therapy by a person without a valid license, the person may be charged 18 with a violation of section 6(b), and amendments thereto. 19

New Sec. 13. (a) When it appears to the board that any person is violating any of the provisions of this act, the board may bring an action in the name of the state of Kansas in a court of competent jurisdiction for an injunction against such violation without regard to whether proceedings have been or may be instituted before the board or whether criminal proceedings have been or may be instituted.

26 (b) The provisions of this section shall take effect on and after 27 September 1, 2017.

New Sec. 14. All state agency adjudicative proceedings under the licensed massage therapist act shall be conducted in accordance with the provisions of the Kansas administrative procedure act and shall be reviewable in accordance with the Kansas judicial review act.

New Sec. 15. Professional liability insurance coverage shall be maintained in effect by each massage therapist as a condition to rendering professional service as a massage therapist in this state. The board shall fix by rules and regulations the minimum level of coverage for such professional liability insurance.

New Sec. 16. On the effective date of this act, nothing in the massage therapist licensure act or in the provisions of K.S.A. 40-2,100 through 40-2,105, and amendments thereto, or K.S.A. 2014 Supp. 40-2,105a through 40-2,105d, and amendments thereto, shall be construed to require that any individual, group or blanket policy of accident and sickness, medical or surgical expense insurance coverage or any provision of a policy, contract, plan or agreement for medical service issued on or after the effective date of this act, reimburse or indemnify a person licensed under the massage
 therapist licensure act for services provided as a massage therapist.

New Sec. 17. Sections 1 through 17, and amendments thereto, shall
be known and may be cited as the massage therapist licensure act.

5 Sec. 18. K.S.A. 2014 Supp. 74-1112 is hereby amended to read as 6 follows: 74-1112. (a) The board of nursing may require an original applicant for licensure as a professional nurse, practical nurse-or, mental 7 8 health technician or massage therapist to be fingerprinted and submit to a 9 state and national criminal history record check. The fingerprints shall be 10 used to identify the applicant and to determine whether the applicant has a 11 record of criminal history in this state or other jurisdictions. The board of 12 nursing is authorized to submit the fingerprints to the Kansas bureau of investigation and the federal bureau of investigation for a state and 13 national criminal history record check. The board of nursing may use the 14 15 information obtained from fingerprinting and the applicant's criminal history for purposes of verifying the identification of any applicant and in 16 17 the official determination of character and fitness of the applicant for any licensure to practice professional or practical nursing-or, mental health 18 19 technology or massage therapy in this state.

(b) Local and state law enforcement officers and agencies shall assist
the board of nursing in taking and processing of fingerprints of applicants
to practice professional or practical nursing-or, mental health technology
or massage therapy in this state and shall release all records of adult
convictions and nonconvictions and adult convictions or adjudications of
another state or country to the board of nursing.

(c) The board shall fix a fee for fingerprinting of applicants or
licensees, or both, as may be required by the board in an amount necessary
to reimburse the board for the cost of the fingerprinting. Fees collected
under this subsection shall be deposited in the criminal background and
fingerprinting fund.

(d) There is hereby created in the state treasury the criminal 31 background and fingerprinting fund. All moneys credited to the fund shall 32 be used to pay the Kansas bureau of investigation for the processing of 33 fingerprints and criminal history background checks for the board of 34 nursing. The fund shall be administered by the board of nursing. All 35 expenditures from the fund shall be made in accordance with appropriation 36 acts upon warrants of the director of accounts and reports issued pursuant 37 to vouchers approved by the president of the board or a person designated 38 39 by the president.

40 Sec. 19. K.S.A. 2014 Supp. 74-1112 is hereby repealed.

41 Sec. 20. This act shall take effect and be in force from and after its 42 publication in the statute book. Session of 2015

SENATE BILL No. 69

By Committee on Public Health and Welfare

1-22

1	AN ACT concerning advanced practice registered nurses; amending
2 3	K.S.A. 40-4602, 59-2976, 65-1660, 65-2892, 65-4134 and 65-5502 and K.S.A. 2013 Supp. 65-1626, as amended by section 4 of chapter 131 of
4	the 2014 Session Laws of Kansas, 65-4101, as amended by section 50
5	of chapter 131 of the 2014 Session Laws of Kansas, 65-6112, as
6	amended by section 51 of chapter 131 of the 2014 Session Laws of
7	Kansas and 65-6124, as amended by section 52 of chapter 131 of the
8	2014 Session Laws of Kansas and K.S.A. 2014 Supp. 39-923, 39-1401,
9	39-1430, 39-1504, 65-468, 65-507, 65-1113, 65-1130, 65-1682, 65-
10	2837a, 65-2921, 65-4116, 65-4202, 65-5402, 65-5418, 65-6119, 65-
11	6120, 65-6121, 65-6123, 65-6144, 65-7003, 65-7302, 72-5213 and 75-
12	7429 and repealing the existing sections.
13	1-12) and repeating the existing sections.
14	Be it enacted by the Legislature of the State of Kansas:
15	Section 1, K.S.A. 2014 Supp. 65-1113 is hereby amended to read as
16	follows: 65-1113. When used in this act and the act of which this section is
17	amendatory:
18	(a) "Board" means the board of nursing.
19	(b) "Diagnosis" in the context of nursing practice means that
20	identification of and discrimination between physical and psychosocial
21	signs and symptoms essential to effective execution and management of
22	the nursing regimen and shall be construed as distinct from a medical
23	diagnosis.
24	(c) "Treatment" means the selection and performance of those
25	therapeutic measures essential to effective execution and management of
26	the nursing regimen, and any prescribed medical regimen.
27	(d) Practice of nursing. (1) The practice of professional nursing as
28	performed by a registered professional nurse for compensation or
29	gratuitously, except as permitted by K.S.A. 65-1124, and amendments
30	thereto, means the process in which substantial specialized knowledge
31	derived from the biological, physical, and behavioral sciences is applied
32	to: the care, diagnosis, treatment, counsel and health teaching of persons
33	who are experiencing changes in the normal health processes or who
34	require assistance in the maintenance of health or the prevention or
35 26	management of illness, injury or infirmity; administration, supervision or teaching of the process as defined in this section; and the execution of the
36	teaching of the process as defined in this section, and the execution of the

1 medical regimen as prescribed by a person licensed to practice medicine 2 and surgery-or, a person licensed to practice dentistry or by a person licensed to practice as an advanced practice registered nurse. (2) The 3 practice of nursing as a licensed practical nurse means the performance for 4 5 compensation or gratuitously, except as permitted by K.S.A. 65-1124, and 6 any amendments thereto, of tasks and responsibilities defined in-part (1) of 7 this subsection (d)(1) which tasks and responsibilities are based on acceptable educational preparation within the framework of supportive and 8 9 restorative care under the direction of a registered professional nurse, a person licensed to practice medicine and surgery-or, a person licensed to 10 practice dentistry or by a person licensed to practice as an advanced 11 12 practice registered nurse.

(e) A "professional nurse" means a person who is licensed to practice
 professional nursing as defined in part (1) of subsection (d) of this section(1).

(f) A "practical nurse" means a person who is licensed to practice
 practical nursing as defined in part (2) of subsection (d) of this section(2).

(g) "Advanced practice registered nurse" or "APRN" means a
professional nurse who holds a license from the board to function as a
professional nurse in an advanced role, and this advanced role shall be
defined by rules and regulations adopted by the board in accordance with
K.S.A. 65-1130, and amendments thereto.

Sec. 2. K.S.A. 2014 Supp. 65-1130 is hereby amended to read as follows: 65-1130. (a) No professional nurse shall announce or represent to the public that such person is an advanced practice registered nurse unless such professional nurse has complied with requirements established by the board and holds a valid license as an advanced practice registered nurse in accordance with the provisions of this section.

(b) On and after the effective date of this act, to be eligible for an initial advanced practice registered nurse license, an applicant shall hold and maintain a current advanced practice registered nurse certification granted by a national certifying organization recognized by the board whose certification standards are approved by the board as equal to or greater than the corresponding standards established by the board.

35 (c) The board shall establish standards and requirements for any 36 professional nurse who desires to obtain licensure as an advanced practice 37 registered nurse. Such standards and requirements shall include, but not be 38 limited to, standards and requirements relating to the education of 39 advanced practice registered nurses. The board may give such 40 examinations and secure such assistance as it deems necessary to 41 determine the qualifications of applicants.

42 (c) (d) The board shall adopt rules and regulations applicable to 43 advanced practice registered nurses which:

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(1) Establish roles and identify titles and abbreviations of advanced practice registered nurses which are consistent with *advanced* nursing

3 practice specialties recognized by the nursing profession.
 4 (2) Establish education and qualifications necessary for licensure for

5 each-role of advanced practice registered nurse role established by the 6 board at a level adequate to assure the competent performance by advanced practice registered nurses of functions and procedures which 7 8 advanced practice registered nurses are authorized to perform. Advanced 9 practice registered nursing is based on knowledge and skills acquired in 10 basic nursing education, licensure as a registered nurse and graduation 11 from or completion of a master's or higher degree in one of the advanced practice registered nurse roles approved by the board of nursing. 12

13 (3) Define the role of advanced practice registered nurses and establish limitations and restrictions on such role. The board shall adopt a 14 definition of the role under this subsection (c)(3) which is consistent with 15 16 the education and qualifications required to obtain a license as an advanced practice registered nurse, which protects the public from persons 17 performing functions and procedures as advanced practice registered 18 nurses for which they lack adequate education and qualifications and 19 which authorizes advanced practice registered nurses to perform acts 20 generally recognized by the profession of nursing as capable of being 21 performed, in a manner consistent with the public health and safety, by 22 persons with postbasic education in nursing. In defining such role the 23 board shall consider: (A) The education required for a licensure as an 24 advanced practice registered nurse; (B) the type of nursing practice and 25 preparation in specialized advanced practice skills involved in each role of 26 advanced practice registered nurse established by the board; (C) the scope 27 and limitations of advanced practice nursing prescribed by national 28 advanced practice organizations; and (D) acts recognized by the nursing 29 profession as appropriate to be performed by persons with postbasic 30 education in nursing; and (E) the certification standards established by an 31 accredited national organization whose certification standards are 32 approved by the board as equal to or greater than the corresponding 33 standards established under this act for obtaining authorization to 34 practice as an advanced practice registered nurse in the specific role. 35

36 (e) "Treatment" means, when used in conjunction with the practice of 37 an advanced practice registered nurse, planning, diagnosing, ordering 38 and executing of a healthcare plan including, but not limited to, 39 pharmacologic and non-pharmacologic interventions. This term also 40 includes prescribing medical devices and equipment, nutrition, and 41 diagnostic and supportive services including, but not limited to, home 42 health care, hospice, physical and occupational therapy.

43 *(f)* The practice of nursing as an advanced practice registered nurse

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6 7 means the performance for compensation or gratuitously, except as permitted by K.S.A. 65-1124, and amendments thereto, of the process in which advanced knowledge derived from the biological, physical and behavioral sciences is applied to direct and indirect care, including, but not limited to, creating and executing a health care plan; nursing and medical diagnosis, management, treatment and prescribing; administering pharmacologic and non-pharmocologic interventions; counseling and

8 health teaching of persons who are experiencing changes in the normal 9 health processes or who require assistance in the maintenance of health; 10 or the prevention or management of illness, injury or infirmity; 11 administration, supervising or teaching within the advanced practice 12 registered nurse's role. Within the role of the advanced practice registered 13 murse, an advanced practice registered nurse may serve as a primary care 14 provider and lead health care teams.

15 (d) (g) An advanced practice registered nurse may prescribe drugspursuant to a written protocol-as authorized by a responsible physician. 16 Each written protocol-shall contain a precise and detailed medical plan of 17 18 eare for each-classification of disease or injury for which the advancedpractice registered nurse is authorized to prescribe and shall specify all-19 drugs-which may be prescribed by the advanced practice registered-20 nurseAdvanced practice registered nurses are authorized to prescribe, 21 22 procure and administer prescription drugs and controlled substances pursuant to applicable state and federal laws. Any written prescription 23 24 order shall include the name, address and telephone number of the responsible physician advanced practice registered nurse. The advanced 25 practice registered nurse may not dispense drugs, but may request, receive 26 27 and sign for professional samples and may distribute professional samples to patients pursuant-to a written protocol as authorized by a responsible-28 29 physician. In order to prescribe controlled substances, the advanced practice registered nurse shall: (1) Register with the federal drug 30 enforcement administration; and (2) notify the board of-the name and-31 address of the responsible physician or physicians. In no case shall the 32 seope of authority of the advanced practice registered nurse exceed the 33 normal and customary practice of the responsible physician nursing of the 34 federal drug enforcement administration registration as prescribed by 35 rules and regulations of the board. An advanced practice registered nurse 36 37 shall comply with the federal drug enforcement administration requirements related to controlled substances. An advanced practice 38 registered nurse certified in the role of registered nurse anesthetist while 39 40 functioning as a registered nurse anesthetist under K.S.A. 65-1151 to 65-1164, inclusive, and amendments thereto, shall be subject to the provisions 41 of K.S.A. 65-1151 to 65-1164, inclusive, and amendments thereto, with 42 43 respect to drugs and anesthetic agents and shall not be subject to the

1 provisions of this subsection. For the purposes of this subsection,

2 "responsible-physician" means a person licensed to-practice medicine and
 3 surgery in Kansas who has accepted responsibility for the protocol and the
 4 actions of the advanced practice registered nurse when prescribing drugs.

5 (c) (h) An advanced practice registered nurse is accountable to 6 patients, the nursing profession and the board for complying with the 7 requirements of the nurse practice act, and any rules and regulations 8 adopted pursuant thereto, and is responsible for recognizing limits of 9 knowledge and experience, planning for the management of situations 10 beyond the advanced practice registered nurse's expertise and referring 11 patients to other health care professionals as appropriate.

(i) (1) The board, by rules and regulations, shall establish a program
of transition to full practice for all persons who on and after the effective
date of this act are granted initial licensure as an advanced practice
registered nurse or who have less than 2,000 hours of licensed active
practice as an advanced practice registered nurse in their initial roles.

17 (2) Advanced practice registered nurses who are subject to the
18 program of transition to full practice shall not prescribe medications
19 except as provided in this subsection.

(3) As part of the program of transition to full practice, an advanced 20 practice registered nurse shall complete, within two years from the 21 commencement of the program by the advanced practice registered nurse, 22 a transition to full practice period of 2,000 hours while maintaining a 23 24 collaborative relationship for practice and for prescribing medications with either a licensed advanced practice registered nurse with full 25 prescriptive authority under subsection (g) or with a physician. The 26 27 advanced practice registered nurse shall engage in the practice of nursing as an advanced practice registered nurse and may prescribe medications 28 29 as part of the collaborative relationship.

30 (4) As part of the program of transition to full practice, the board 31 shall specify the manner and form in which the advanced practice 32 registered nurse participating in the program may identify oneself 33 professionally and to the public.

34 (5) The advanced practice registered nurse shall be responsible for
35 completing the required documentation for the program of transition to
36 full practice as specified by the board.

37 (6) Upon the successful completion of the program of transition to
38 full practice, the board of nursing shall authorize the advanced practice
39 registered nurse to engage in the practice of advanced practice registered
40 nursing without the limitations of this subsection and as otherwise
41 authorized by law.

42 (7) The board may adopt rules and regulations necessary to carry out 43 the provisions of this subsection. 1 (8) An advanced practice registered nurse functioning in the role of 2 registered nurse anesthetist shall be subject to the provisions of K.S.A. 65-3 1151 to 65-1164, inclusive, and amendments thereto, and shall not be 4 subject to the provisions of this subsection.

5 (9) As used in this subsection, "physician" means a person licensed to 6 practice medicine and surgery.

7 (j) When a provision of law or rule and regulation requires a 8 signature, certification, verification, affidavit or endorsement by a 9 physician, that requirement may be fulfilled by a licensed advanced 10 practice registered nurse working within the scope of practice of such 11 nurse's respective role.

12 (k) The confidential relations and communications between an 13 advance practice registered nurse and the advance practice registered 14 nurse's patient are placed on the same basis as provided by law as those 15 between a physician and a physician's patient in K.S.A. 60-427, and 16 amendments thereto.

(1) An advanced practice registered nurse shall maintain malpractice 17 insurance coverage in effect as a condition to rendering professional 18 service as an advanced practice registered nurse in this state and shall 19 provide proof of insurance at time of licensure and renewal of license. The 20 requirements of this subsection shall not apply to an advanced practice 21 registered nurse who practices solely in an employment which results in 22 the advanced practice registered nurse being covered under the federal 23 tort claim act or state tort claims act, or who practices solely as a 24 charitable health care provider under K.S.A. 75-6102, and amendments 25 thereto, or who is serving on active duty in the military service of the 26 27 United States.

28 (m) As used in this section, "drug" means those articles and 29 substances defined as drugs in K.S.A. 65-1626 and 65-4101, and 30 amendments thereto.

(f) A person registered to practice as an advanced registered nurse practitioner in the state of Kansas immediately prior to the effective date of this act shall be deemed to be licensed to practice as an advanced practice registered nurse under this act and such person shall not be required to file an original application for licensure under this act. Any application for registration filed which has not been granted prior to the effective date of this act shall be processed as an application for licensure under this act.

38 Sec. 3. K.S.A. 2014 Supp. 39-923 is hereby amended to read as 39 follows: 39-923. (a) As used in this act:

40 (1) "Adult care home" means any nursing facility, nursing facility for
41 mental health, intermediate care facility for people with intellectual
42 disability, assisted living facility, residential health care facility, home plus,
43 boarding care home and adult day care facility; all of which are

classifications of adult care homes and are required to be licensed by the
 secretary for aging and disability services.

3 (2) "Nursing facility" means any place or facility operating 24 hours a 4 day, seven days a week, caring for six or more individuals not related 5 within the third degree of relationship to the administrator or owner by 6 blood or marriage and who, due to functional impairments, need skilled 7 nursing care to compensate for activities of daily living limitations.

8 (3) "Nursing facility for mental health" means any place or facility 9 operating 24 hours a day, seven days a week, caring for six or more 10 individuals not related within the third degree of relationship to the 11 administrator or owner by blood or marriage and who, due to functional 12 impairments, need skilled nursing care and special mental health services 13 to compensate for activities of daily living limitations.

(4) "Intermediate care facility for people with intellectual disability" means any place or facility operating 24 hours a day, seven days a week, caring for four or more individuals not related within the third degree of relationship to the administrator or owner by blood or marriage and who, due to functional impairments caused by intellectual disability or related conditions, need services to compensate for activities of daily living limitations.

21 "Assisted living facility" means any place or facility caring for six (5)or more individuals not related within the third degree of relationship to 22 the administrator, operator or owner by blood or marriage and who, by 23 choice or due to functional impairments, may need personal care and may 24 need supervised nursing care to compensate for activities of daily living 25 limitations and in which the place or facility includes apartments for 26 residents and provides or coordinates a range of services including 27 personal care or supervised nursing care available 24 hours a day, seven 28 days a week, for the support of resident independence. The provision of 29 skilled nursing procedures to a resident in an assisted living facility is not 30 prohibited by this act. Generally, the skilled services provided in an 31 32 assisted living facility shall be provided on an intermittent or limited term basis, or if limited in scope, a regular basis. 33

"Residential health care facility" means any place or facility, or a 34 (6)contiguous portion of a place or facility, caring for six or more individuals 35 not related within the third degree of relationship to the administrator, 36 operator or owner by blood or marriage and who, by choice or due to 37 functional impairments, may need personal care and may need supervised 38 nursing care to compensate for activities of daily living limitations and in 39 40 which the place or facility includes individual living units and provides or coordinates personal care or supervised nursing care available on a 24-41 hour, seven-days-a-week basis for the support of resident independence. 42 43 The provision of skilled nursing procedures to a resident in a residential

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health care facility is not prohibited by this act. Generally, the skilled services provided in a residential health care facility shall be provided on an intermittent or limited term basis, or if limited in scope, a regular basis.

4 (7)"Home plus" means any residence or facility caring for not more 5 than 12 individuals not related within the third degree of relationship to the 6 operator or owner by blood or marriage unless the resident in need of care 7 is approved for placement by the secretary for children and families, and 8 who, due to functional impairment, needs personal care and may need 9 supervised nursing care to compensate for activities of daily living 10 limitations. The level of care provided to residents shall be determined by preparation of the staff and rules and regulations developed by the Kansas 11 department for aging and disability services. An adult care home may 12 convert a portion of one wing of the facility to a not less than five-bed and 13 not more than 12-bed home plus facility provided that the home plus 14 15 facility remains separate from the adult care home, and each facility must remain contiguous. Any home plus that provides care for more than eight 16 17 individuals after the effective date of this act shall adjust staffing personnel and resources as necessary to meet residents' needs in order to maintain the 18 19 current level of nursing care standards. Personnel of any home plus who provide services for residents with dementia shall be required to take 20 21 annual dementia care training.

(8) "Boarding care home" means any place or facility operating 24 hours a day, seven days a week, caring for not more than 10 individuals not related within the third degree of relationship to the operator or owner by blood or marriage and who, due to functional impairment, need supervision of activities of daily living but who are ambulatory and essentially capable of managing their own care and affairs.

(9) "Adult day care" means any place or facility operating less than
24 hours a day caring for individuals not related within the third degree of
relationship to the operator or owner by blood or marriage and who, due to
functional impairment, need supervision of or assistance with activities of
daily living.

(10) "Place or facility" means a building or any one or more complete
floors of a building, or any one or more complete wings of a building, or
any one or more complete wings and one or more complete floors of a
building, and the term "place or facility" may include multiple buildings.

(11) "Skilled nursing care" means services performed by or under the
immediate supervision of a registered professional nurse and additional
licensed nursing personnel. Skilled nursing includes administration of
medications and treatments as prescribed by a licensed physician, *advanced practice registered nurse* or dentist; and other nursing functions
which require substantial nursing judgment and skill based on the
knowledge and application of scientific principles.

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"Supervised nursing care" means services provided by or under

1 (12) "Supervised nursing care" means services provided by or under 2 the guidance of a licensed nurse with initial direction for nursing 3 procedures and periodic inspection of the actual act of accomplishing the 4 procedures; administration of medications and treatments as prescribed by 5 a licensed physician, *advanced practice registered nurse* or dentist and 6 assistance of residents with the performance of activities of daily living.

7 (13) "Resident" means all individuals kept, cared for, treated, boarded 8 or otherwise accommodated in any adult care home.

9 (14) "Person" means any individual, firm, partnership, corporation, 10 company, association or joint-stock association, and the legal successor 11 thereof.

(15) "Operate an adult care home" means to own, lease, establish, maintain, conduct the affairs of or manage an adult care home, except that for the purposes of this definition the word "own" and the word "lease" shall not include hospital districts, cities and counties which hold title to an adult care home purchased or constructed through the sale of bonds.

17 (16) "Licensing agency" means the secretary for aging and disability18 services.

(17) "Skilled nursing home" means a nursing facility.

(18) "Intermediate nursing care home" means a nursing facility.

(19) "Apartment" means a private unit which includes, but is not
limited to, a toilet room with bathing facilities, a kitchen, sleeping, living
and storage area and a lockable door.

(20) "Individual living unit" means a private unit which includes, but
is not limited to, a toilet room with bathing facilities, sleeping, living and
storage area and a lockable door.

27 (21) "Operator" means an individual registered pursuant to the 28 operator registration act, K.S.A. 2014 Supp. 39-973 et seq., and 29 amendments thereto, who may be appointed by a licensee to have the 30 authority and responsibility to oversee an assisted living facility or 31 residential health care facility with fewer than 61 residents, a home plus or 32 adult day care facility.

(22) "Activities of daily living" means those personal, functional
activities required by an individual for continued well-being, including,
but not limited to, eating, nutrition, dressing, personal hygiene, mobility
and toileting.

37 (23) "Personal care" means care provided by staff to assist an38 individual with, or to perform activities of daily living.

39 (24) "Functional impairment" means an individual has experienced a
40 decline in physical, mental and psychosocial well-being and as a result, is
41 unable to compensate for the effects of the decline.

42 (25) "Kitchen" means a food preparation area that includes a sink, 43 refrigerator and a microwave oven or stove. 1 (26) The term "intermediate personal care home" for purposes of 2 those individuals applying for or receiving veterans' benefits means 3 residential health care facility.

4 (27) "Paid nutrition assistant" means an individual who is paid to feed 5 residents of an adult care home, or who is used under an arrangement with 6 another agency or organization, who is trained by a person meeting nurse 7 aide instructor qualifications as prescribed by 42 C.F.R. § 483.152, 42 8 C.F.R. § 483.160 and paragraph (h) of 42 C.F.R. § 483.35, and who 9 provides such assistance under the supervision of a registered professional 10 or licensed practical nurse.

(28) "Medicaid program" means the Kansas program of medical
assistance for which federal or state moneys, or any combination thereof,
are expended, or any successor federal or state, or both, health insurance
program or waiver granted thereunder.

15 (29) "Licensee" means any person or persons acting jointly or 16 severally who are licensed by the secretary for aging and disability 17 services pursuant to the adult care home licensure act, K.S.A. 39-923 et 18 seq., and amendments thereto.

(b) The term "adult care home" shall not include institutions operated 19 by federal or state governments, except institutions operated by the 20 director of the Kansas commission on veterans affairs office, hospitals or 21 institutions for the treatment and care of psychiatric patients, child care 22 facilities, maternity centers, hotels, offices of physicians or hospices which 23 are certified to participate in the medicare program under 42 code of 24 federal regulations, chapter IV, section 418.1 et seq., and amendments 25 26 thereto, and which provide services only to hospice patients.

(c) Nursing facilities in existence on the effective date of this act
changing licensure categories to become residential health care facilities
shall be required to provide private bathing facilities in a minimum of 20%
of the individual living units.

(d) Facilities licensed under the adult care home licensure act on the day immediately preceding the effective date of this act shall continue to be licensed facilities until the annual renewal date of such license and may renew such license in the appropriate licensure category under the adult care home licensure act subject to the payment of fees and other conditions and limitations of such act.

(e) Nursing facilities with less than 60 beds converting a portion of
the facility to residential health care shall have the option of licensing for
residential health care for less than six individuals but not less than 10% of
the total bed count within a contiguous portion of the facility.

(f) The licensing agency may by rule and regulation change the name
of the different classes of homes when necessary to avoid confusion in
terminology and the agency may further amend, substitute, change and in a

1 manner consistent with the definitions established in this section, further

2 define and identify the specific acts and services which shall fall within the

3 respective categories of facilities so long as the above categories for adult

4 care homes are used as guidelines to define and identify the specific acts.

5 Sec. 4. K.S.A. 2014 Supp. 39-1401 is hereby amended to read as 6 follows: 39-1401. As used in this act:

(a) "Resident" means:

8 (1) Any resident, as defined by K.S.A. 39-923, and amendments 9 thereto; or

10 (2) any individual kept, cared for, treated, boarded or otherwise 11 accommodated in a medical care facility; or

(3) any individual, kept, cared for, treated, boarded or otherwise
accommodated in a state psychiatric hospital or state institution for people
with intellectual disability.

(b) "Adult care home" has the meaning ascribed thereto in K.S.A. 39-923, and amendments thereto.

(c) "In need of protective services" means that a resident is unable to
perform or obtain services which are necessary to maintain physical or
mental health, or both.

"Services which are necessary to maintain physical and mental 20 (d) health" include, but are not limited to, the provision of medical care for 21 physical and mental health needs, the relocation of a resident to a facility 22 or institution able to offer such care, assistance in personal hygiene, food, 23 24 clothing, adequately heated and ventilated shelter, protection from health and safety hazards, protection from maltreatment the result of which 25 includes, but is not limited to, malnutrition, deprivation of necessities or 26 physical punishment and transportation necessary to secure any of the 27 above stated needs, except that this term shall not include taking such 28 person into custody without consent, except as provided in this act. 29

30 (e) "Protective services" means services provided by the state or other 31 governmental agency or any private organizations or individuals which are 32 necessary to prevent abuse, neglect or exploitation. Such protective 33 services shall include, but not be limited to, evaluation of the need for 34 services, assistance in obtaining appropriate social services and assistance 35 in securing medical and legal services.

(f) "Abuse" means any act or failure to act performed intentionally or
 recklessly that causes or is likely to cause harm to a resident, including:

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(1) Infliction of physical or mental injury;

39 (2) any sexual act with a resident when the resident does not consent
40 or when the other person knows or should know that the resident is
41 incapable of resisting or declining consent to the sexual act due to mental
42 deficiency or disease or due to fear of retribution or hardship;

43 (3) unreasonable use of a physical restraint, isolation or medication

1 that harms or is likely to harm a resident;

(4) unreasonable use of a physical or chemical restraint, medication
or isolation as punishment, for convenience, in conflict with a physician's *or advanced practice registered nurse's* orders or as a substitute for
treatment, except where such conduct or physical restraint is in furtherance
of the health and safety of the resident or another resident;

7 (5) a threat or menacing conduct directed toward a resident that 8 results or might reasonably be expected to result in fear or emotional or 9 mental distress to a resident;

10 (6) fiduciary abuse; or

(7) omission or deprivation by a caretaker or another person of goods
or services which are necessary to avoid physical or mental harm or
illness.

(g) "Neglect" means the failure or omission by one's self, caretaker or
another person with a duty to provide goods or services which are
reasonably necessary to ensure safety and well-being and to avoid physical
or mental harm or illness.

18 (h) "Caretaker" means a person or institution who has assumed the 19 responsibility, whether legally or not, for the care of the resident 20 voluntarily, by contract or by order of a court of competent jurisdiction.

(i) "Exploitation" means misappropriation of resident property or
intentionally taking unfair advantage of an adult's physical or financial
resources for another individual's personal or financial advantage by the
use of undue influence, coercion, harassment, duress, deception, false
representation or false pretense by a caretaker or another person.

(j) "Medical care facility" means a facility licensed under K.S.A. 65425 et seq., and amendments thereto, but shall not include, for purposes of
this act, a state psychiatric hospital or state institution for people with
intellectual disability, including Larned state hospital, Osawatomie state
hospital and Rainbow mental health facility, Kansas neurological institute
and Parsons state hospital and training center.

(k) "Fiduciary abuse" means a situation in which any person who is
the caretaker of, or who stands in a position of trust to, a resident, takes,
secretes, or appropriates the resident's money or property, to any use or
purpose not in the due and lawful execution of such person's trust.

36 (1) "State psychiatric hospital" means Larned state hospital,37 Osawatomie state hospital and Rainbow mental health facility.

(m) "State institution for people with intellectual disability" means
 Kansas neurological institute and Parsons state hospital and training
 center.

(n) "Report" means a description or accounting of an incident or
incidents of abuse, neglect or exploitation under this act and for the
purposes of this act shall not include any written assessment or findings.

1 (o) "Law enforcement" means the public office which is vested by 2 law with the duty to maintain public order, make arrests for crimes and 3 investigate criminal acts, whether that duty extends to all crimes or is 4 limited to specific crimes.

5 (p) "Legal representative" means an agent designated in a durable 6 power of attorney, power of attorney or durable power of attorney for 7 health care decisions or a court appointed guardian, conservator or trustee.

8 (q) "Financial institution" means any bank, trust company, escrow 9 company, finance company, saving institution or credit union, chartered 10 and supervised under state or federal law.

11 (r) "Governmental assistance provider" means an agency, or 12 employee of such agency, which is funded solely or in part to provide 13 assistance within the Kansas senior care act, K.S.A. 75-5926 et seq., and 14 amendments thereto, including medicaid and medicare.

No person shall be considered to be abused, neglected or exploited or in need of protective services for the sole reason that such person relies upon spiritual means through prayer alone for treatment in accordance with the tenets and practices of a recognized church or religious denomination in lieu of medical treatment.

20 Sec. 5. K.S.A. 2014 Supp. 39-1430 is hereby amended to read as 21 follows: 39-1430. As used in this act:

(a) "Adult" means an individual 18 years of age or older alleged to be 22 unable to protect their own interest and who is harmed or threatened with 23 harm, whether financial, mental or physical in nature, through action or 24 inaction by either another individual or through their own action or 25 inaction when: (1) Such person is residing in such person's own home, the 26 27 home of a family member or the home of a friend; (2) such person resides in an adult family home as defined in K.S.A. 39-1501, and amendments 28 29 thereto; or (3) such person is receiving services through a provider of community services and affiliates thereof operated or funded by the 30 Kansas department for children and families or the Kansas department for 31 aging and disability services or a residential facility licensed pursuant to 32 K.S.A. 75-3307b, and amendments thereto. Such term shall not include 33 34 persons to whom K.S.A. 39-1401 et seq., and amendments thereto, apply.

35 (b) "Abuse" means any act or failure to act performed intentionally or 36 recklessly that causes or is likely to cause harm to an adult, including:

(1) Infliction of physical or mental injury;

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(2) any sexual act with an adult when the adult does not consent or
when the other person knows or should know that the adult is incapable of
resisting or declining consent to the sexual act due to mental deficiency or
disease or due to fear of retribution or hardship;

42 (3) unreasonable use of a physical restraint, isolation or medication43 that harms or is likely to harm an adult;

1 (4) unreasonable use of a physical or chemical restraint, medication 2 or isolation as punishment, for convenience, in conflict with a physician's 3 or advanced practice registered nurse's orders or as a substitute for 4 treatment, except where such conduct or physical restraint is in furtherance 5 of the health and safety of the adult;

6 (5) a threat or menacing conduct directed toward an adult that results 7 or might reasonably be expected to result in fear or emotional or mental 8 distress to an adult;

(6) fiduciary abuse; or

10 (7) omission or deprivation by a caretaker or another person of goods 11 or services which are necessary to avoid physical or mental harm or 12 illness.

(c) "Neglect" means the failure or omission by one's self, caretaker or
another person with a duty to supply or provide goods or services which
are reasonably necessary to ensure safety and well-being and to avoid
physical or mental harm or illness.

17 (d) "Exploitation" means misappropriation of an adult's property or 18 intentionally taking unfair advantage of an adult's physical or financial 19 resources for another individual's personal or financial advantage by the 20 use of undue influence, coercion, harassment, duress, deception, false 21 representation or false pretense by a caretaker or another person.

(e) "Fiduciary abuse" means a situation in which any person who is
the caretaker of, or who stands in a position of trust to, an adult, takes,
secretes, or appropriates their money or property, to any use or purpose not
in the due and lawful execution of such person's trust or benefit.

26 (f) "In need of protective services" means that an adult is unable to
27 provide for or obtain services which are necessary to maintain physical or
28 mental health or both.

"Services which are necessary to maintain physical or mental 29 (g) health or both" include, but are not limited to, the provision of medical 30 care for physical and mental health needs, the relocation of an adult to a 31 facility or institution able to offer such care, assistance in personal 32 hygiene, food, clothing, adequately heated and ventilated shelter, 33 protection from health and safety hazards, protection from maltreatment 34 35 the result of which includes, but is not limited to, malnutrition, deprivation of necessities or physical punishment and transportation necessary to 36 secure any of the above stated needs, except that this term shall not include 37 38 taking such person into custody without consent except as provided in this 39 act.

(h) "Protective services" means services provided by the state or other
governmental agency or by private organizations or individuals which are
necessary to prevent abuse, neglect or exploitation. Such protective
services shall include, but shall not be limited to, evaluation of the need for

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services, assistance in obtaining appropriate social services, and assistance
 in securing medical and legal services.

3 (i) "Caretaker" means a person who has assumed the responsibility,
4 whether legally or not, for an adult's care or financial management or both.

5 (j) "Secretary" means the secretary for the Kansas department for 6 children and families.

7 (k) "Report" means a description or accounting of an incident or 8 incidents of abuse, neglect or exploitation under this act and for the 9 purposes of this act shall not include any written assessment or findings.

10 (1) "Law enforcement" means the public office which is vested by law 11 with the duty to maintain public order, make arrests for crimes, investigate 12 criminal acts and file criminal charges, whether that duty extends to all 13 crimes or is limited to specific crimes.

14 (m) "Involved adult" means the adult who is the subject of a report of 15 abuse, neglect or exploitation under this act.

(n) "Legal representative," "financial institution" and "governmental
assistance provider" shall have the meanings ascribed thereto in K.S.A.
39-1401, and amendments thereto.

19 No person shall be considered to be abused, neglected or exploited or 20 in need of protective services for the sole reason that such person relies 21 upon spiritual means through prayer alone for treatment in accordance 22 with the tenets and practices of a recognized church or religious 23 denomination in lieu of medical treatment.

24 Sec. 6. K.S.A. 2014 Supp. 39-1504 is hereby amended to read as 25 follows: 39-1504. The secretary shall administer the adult family home 26 registration program in accordance with the following requirements:

(a) (1) The home shall meet health standards and safety regulations of
the community and the provisions of chapter 20 of the national fire
protection association, life safety code, pamphlet no. 101, 1981 edition.

30 (2) The home shall have a written plan to get persons out of the home 31 rapidly in case of fire, tornado or other emergency.

(3) No more than two clients shall be in residence at any one time.

33 (4) The home shall have adequate living and sleeping space for34 clients.

(5) Each room shall have an operable outside window.

36 (6) Electric fans shall be made available to reduce the temperature if
37 there is no air conditioning. Rooms shall be heated, lighted, ventilated and
38 available.

39 (7) Sleeping rooms shall have space for personal items.

40 (8) Each client shall have a bed which is clean and in good condition.

41 (9) Lavatory and toilet facilities shall be accessible, available and in 42 working order.

43 (10) The kitchen shall be clean with appliances in good working

1 order.

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2 (b) (1) A healthy and safe environment shall be maintained for 3 clients.

(2) There shall be a telephone in the home.

5 (3) The provider may assist a client with the taking of medications when the medication is in a labeled bottle which clearly shows a 6 7 physician's orders or an advanced practice registered nurse's orders and when the client requires assistance because of tremor, visual impairment, 8 or similar reasons due to health conditions. The provider may assist or 9 10 perform for the client such physical activities which do not require daily supervision such as assistance with eating, bathing and dressing, help with 11 12 brace or walker and transferring from wheelchairs.

13 (4) There shall be no use of corporal punishment, restraints or 14 punitive measures.

(5) The house shall be free from accumulated dirt, trash and vermin.

16 (6) Meals shall be planned and prepared for adequate nutrition, and 17 for diets if directed by a physician.

(c) (1) The provider shall be at least 18 years of age and in good
health at the time of initial application for registration. A written statement
must be received from a physician, nurse practitioner, or physician
assistant stating that the applicant and the members of the applicant's
household are free of any infectious or communicable disease or health
condition and are physically and mentally healthy. Such statements shall
be renewed every two years.

(2) The provider shall not be totally dependent on the income fromthe clients for support of the provider or the provider's family.

(3) A criminal conviction shall not necessarily exclude registration as
an adult family home; but an investigation thereof will be made as part of
the determination of the suitability of the home.

(4) The provider shall be responsible for supervision at all times and
shall be in charge of the home and provision of care, or shall have a
responsible person on call. Any such substitute responsible person shall
meet the same requirements as the provider.

34 (5) The provider is responsible for encouraging the client to seek and 35 utilize available services when needed.

36 (6) The provider shall comply with the requirements of state and
37 federal regulations concerning civil rights and section 504 of the federal
38 rehabilitation act of 1973.

39 (7) The provider shall assure that clients have the privilege of privacy
40 as well as the right to see relatives, friends and participate in regular
41 community activities.

42 (8) The provider shall keep client information confidential. The use or 43 disclosure of any information concerning a client for any purpose is 1 prohibited except on written consent of the client or upon order of the 2 court.

3 (9) The provider shall maintain contact with an assigned social 4 worker and shall allow the secretary and authorized representatives of the 5 secretary access to the home and grounds and to the records related to 6 clients in residence.

7 (10) The provider shall inform the social worker immediately of any 8 unscheduled client absence from the home.

9 (11) The provider is responsible for helping clients maintain their 10 clothing.

11 (12) The provider shall furnish or help clients arrange for 12 transportation.

13 (13) The provider shall help a client arrange for emergency andregular medical care when necessary.

15 (14) The provider shall submit any information relating to the 16 operation of the adult family home which is required by the secretary.

17 Sec. 7. K.S.A. 40-4602 is hereby amended to read as follows: 40-18 4602. As used in this act:

(a) "Emergency medical condition" means the sudden and, at the
time, unexpected onset of a health condition that requires immediate
medical attention, where failure to provide medical attention would result
in serious impairment to bodily functions or serious dysfunction of a
bodily organ or part, or would place the person's health in serious
jeopardy.

(b) "Emergency services" means ambulance services and health care
items and services furnished or required to evaluate and treat an
emergency medical condition, as directed or ordered by a physician or an
advanced practice registered nurse.

29 (c) "Health benefit plan" means any hospital or medical expense policy, health, hospital or medical service corporation contract, a plan 30 provided by a municipal group-funded pool, a policy or agreement entered 31 into by a health insurer or a health maintenance organization contract 32 offered by an employer or any certificate issued under any such policies, 33 contracts or plans. "Health benefit plan" does not include policies or 34 35 certificates covering only accident, credit, dental, disability income, longterm care, hospital indemnity, medicare supplement, specified disease, 36 vision care, coverage issued as a supplement to liability insurance, 37 insurance arising out of a workers compensation or similar law, 38 automobile medical-payment insurance, or insurance under which benefits 39 40 are payable with or without regard to fault and which is statutorily required to be contained in any liability insurance policy or equivalent 41 42 self-insurance.

43 (d) "Health insurer" means any insurance company, nonprofit medical

and hospital service corporation, municipal group-funded pool, fraternal
 benefit society, health maintenance organization, or any other entity which
 offers a health benefit plan subject to the Kansas Statutes Annotated.

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(e) "Insured" means a person who is covered by a health benefit plan.

5 (f) "Participating provider" means a provider who, under a contract 6 with the health insurer or with its contractor or subcontractor, has agreed 7 to provide one or more health care services to insureds with an expectation 8 of receiving payment, other than coinsurance, copayments or deductibles, 9 directly or indirectly from the health insurer.

(g) "Provider" means a physician, *advanced practice registered nurse*,
hospital or other person which is licensed, accredited or certified to
perform specified health care services.

(h) "Provider network" means those participating providers who have
entered into a contract or agreement with a health insurer to provide items
or health care services to individuals covered by a health benefit plan
offered by such health insurer.

17 (i) "Physician" means a person licensed by the state board of healing18 arts to practice medicine and surgery.

Sec. 8. K.S.A. 59-2976 is hereby amended to read as follows: 59-19 2976. (a) Medications and other treatments shall be prescribed, ordered 20 and administered only in conformity with accepted clinical practice. 21 Medication shall be administered only upon the written order of a 22 23 physician or an advanced practice registered nurse or upon a verbal order noted in the patient's medical records and subsequently signed by the 24 physician or an advanced practice registered nurse. The attending 25 physician or an advanced practice registered nurse shall review regularly 26 the drug regimen of each patient under the physician's or an advanced 27 practice registered nurse's care and shall monitor any symptoms of 28 harmful side effects. Prescriptions for psychotropic medications shall be 29 written with a termination date not exceeding 30 days thereafter but may 30 31 be renewed.

(b) During the course of treatment the responsible physician, an 32 advanced practice registered nurse or psychologist or such person's 33 34 designee shall reasonably consult with the patient, the patient's legal guardian, or a minor patient's parent and give consideration to the views 35 the patient, legal guardian or parent expresses concerning treatment and 36 any alternatives. No medication or other treatment may be administered to 37 any voluntary patient without the patient's consent, or the consent of such 38 patient's legal guardian or of such patient's parent if the patient is a minor. 39

40 (c) Consent for medical or surgical treatments not intended primarily 41 to treat a patient's mental disorder shall be obtained in accordance with 42 applicable law.

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(d) Whenever any patient is receiving treatment pursuant to K.S.A.

1 59-2954, 59-2958, 59-2959, 59-2964, 59-2966 or 59-2967, and amendments thereto, and the treatment facility is administering to the 2 3 patient any medication or other treatment which alters the patient's mental 4 state in such a way as to adversely affect the patient's judgment or hamper 5 the patient in preparing for or participating in any hearing provided for by 6 this act, then two days prior to and during any such hearing, the treatment 7 facility may not administer such medication or other treatment unless such 8 medication or other treatment is necessary to sustain the patient's life or to 9 protect the patient or others. Prior to the hearing, a report of all such 10 medications or other treatment which have been administered to the patient, along with a copy of any written consent(s) which the patient may 11 12 have signed, shall be submitted to the court. Counsel for the patient may preliminarily examine the attending physician regarding the administration 13 14 of any medication to the patient within two days of the hearing with regard 15 to the affect that medication may have had upon the patient's judgment or ability to prepare for or participate in the hearing. On the basis thereof, if 16 17 the court determines that medication or other treatment has been 18 administered which adversely affects the patient's judgment or ability to prepare for or participate in the hearing, the court may grant to the patient 19 a reasonable continuance in order to allow for the patient to be better able 20 to prepare for or participate in the hearing and the court shall order that 21 such medication or other treatment be discontinued until the conclusion of 22 23 the hearing, unless the court finds that such medication or other treatment is necessary to sustain the patient's life or to protect the patient or others, 24 in which case the court shall order that the hearing proceed. 25

26 (e) Whenever a patient receiving treatment pursuant to K.S.A. 59-2954, 59-2958, 59-2959, 59-2964, 59-2966 or 59-2967, and amendments 27 thereto, objects to taking any medication prescribed for psychiatric 28 treatment, and after full explanation of the benefits and risks of such 29 medication continues their objection, the medication may be administered 30 over the patient's objection; except that the objection shall be recorded in 31 the patient's medical record and at the same time written notice thereof 32 33 shall be forwarded to the medical director of the treatment facility or the director's designee. Within five days after receiving such notice, excluding 34 Saturdays, Sundays and legal holidays, the medical director or designee 35 36 shall deliver to the patient and the patient's physician the medical director's or designee's written decision concerning the administration of that 37 38 medication, and a copy of that decision shall be placed in the patient's 39 medical record.

40 (f) In no case shall experimental medication be administered without 41 the patient's consent, which consent shall be obtained in accordance with 42 subsection (a)(6) of K.S.A. 59-2978(a)(6), and amendments thereto.

43 Sec. 9. K.S.A. 2014 Supp. 65-468 is hereby amended to read as

follows: 65-468. As used in K.S.A. 65-468 to 65-474, inclusive, and amendments thereto:

amendments thereto:
(a) "Health care provider" means any person licensed or otherwise
authorized by law to provide health care services in this state or a
professional corporation organized pursuant to the professional
corporation law of Kansas by persons who are authorized by law to form
such corporation and who are health care providers as defined by this
subsection, or an officer, employee or agent thereof, acting in the course
and scope of employment or agency.

(b) "Member" means any hospital, emergency medical service, local
health department, home health agency, adult care home, medical clinic,
mental health center or clinic or nonemergency transportation system.

(c) "Mid-level practitioner" means a physician assistant or advanced
 practice registered nurse who has entered into a written protocol with a
 rural health network physician.

16 (d) "Advanced practice registered nurse" means an advanced 17 practice registered nurse who is licensed pursuant to K.S.A. 65-1131, and 18 amendments thereto, and who has authority to prescribe drugs in 19 accordance with K.S.A. 65-1130, and amendments thereto.

20 (e) "Physician" means a person licensed to practice medicine and 21 surgery.

"Rural health network" means an alliance of members 22 (e) (f)23 including at least one critical access hospital and at least one other hospital which has developed a comprehensive plan submitted to and approved by 24 the secretary of health and environment regarding patient referral and 25 transfer; the provision of emergency and nonemergency transportation 26 27 among members; the development of a network-wide emergency services plan; and the development of a plan for sharing patient information and 28 29 services between hospital members concerning medical staff credentialing, 30 risk management, quality assurance and peer review.

(f) (g) "Critical access hospital" means a member of a rural health 31 network which makes available twenty-four hour emergency care services; 32 provides not more than 25 acute care inpatient beds or in the case of a 33 34 facility with an approved swing-bed agreement a combined total of 35 extended care and acute care beds that does not exceed 25 beds; provides acute inpatient care for a period that does not exceed, on an annual average 36 basis, 96 hours per patient; and provides nursing services under the 37 direction of a licensed professional nurse and continuous licensed 38 professional nursing services for not less than 24 hours of every day when 39 40 any bed is occupied or the facility is open to provide services for patients unless an exemption is granted by the licensing agency pursuant to rules 41 42 and regulations. The critical access hospital may provide any services otherwise required to be provided by a full-time, on-site dietician, 43

pharmacist, laboratory technician, medical technologist and radiological 1 2 technologist on a part-time, off-site basis under written agreements or arrangements with one or more providers or suppliers recognized under 3 medicare. The critical access hospital may provide inpatient services by a 4 physician assistant, advanced practice-registered nurse or a elinical nurse 5 specialist subject to the oversight of a physician who need not be present 6 7 in the facility or by an advanced practice registered murse. In addition to the facility's 25 acute beds or swing beds, or both, the critical access 8 9 hospital may have a psychiatric unit or a rehabilitation unit, or both. Each unit shall not exceed 10 beds and neither unit will count toward the 25-bed 10 limit, nor will these units be subject to the average 96-hour length of stay 11 12 restriction.

13 (g) (h) "Hospital" means a hospital other than a critical access 14 hospital which has entered into a written agreement with at least one 15 critical access hospital to form a rural health network and to provide 16 medical or administrative supporting services within the limit of the 17 hospital's capabilities.

Sec. 10. K.S.A. 2014 Supp. 65-507 is hereby amended to read as 18 follows: 65-507. (a) Each maternity center licensee shall keep a record 19 upon forms prescribed and provided by the secretary of health and 20 environment and the secretary for children and families which shall 21 include the name of every patient, together with the patient's place of 22 residence during the year preceding admission to the center and the name 23 and address of the attending physician or advanced practice registered 24 nurse in the classification of a nurse-midwife. Each child care facility 25 licensee shall keep a record upon forms prescribed and provided by the 26 secretary of health and environment which shall include the name and age 27 of each child received and cared for in the facility; the name of the 28 physician who attended any sick children in the facility, together with the 29 names and addresses of the parents or guardians of such children; and such 30 31 other information as the secretary of health and environment or secretary for children and families may require. Each maternity center licensee and 32 each child care facility licensee shall apply to and shall receive without 33 34 charge from the secretary of health and environment and the secretary for children and families forms for such records as may be required, which 35 forms shall contain a copy of this act. 36

(b) Information obtained under this section shall be confidential andshall not be made public in a manner which would identify individuals.

39 Sec. 11. K.S.A. 2013 Supp. 65-1626, as amended by section 4 of 40 chapter 131 of the 2014 Session Laws of Kansas, is hereby amended to 41 read as follows: 65-1626. For the purposes of this act:

42 (a) "Administer" means the direct application of a drug, whether by 43 injection, inhalation, ingestion or any other means, to the body of a patient

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1 or research subject by:

(1) A practitioner or pursuant to the lawful direction of a practitioner;

(2) the patient or research subject at the direction and in the presence of the practitioner; or

5 (3) a pharmacist as authorized in K.S.A. 65-1635a, and amendments 6 thereto.

7 (b) "Agent" means an authorized person who acts on behalf of or at 8 the direction of a manufacturer, distributor or dispenser but shall not 9 include a common carrier, public warehouseman or employee of the 10 carrier or warehouseman when acting in the usual and lawful course of the 11 carrier's or warehouseman's business.

12 (c) "Application service provider" means an entity that sells 13 electronic prescription or pharmacy prescription applications as a hosted 14 service where the entity controls access to the application and maintains 15 the software and records on its server.

16 (d) "Authorized distributor of record" means a wholesale distributor 17 with whom a manufacturer has established an ongoing relationship to distribute the manufacturer's prescription drug. An ongoing relationship is 18 19 deemed to exist between such wholesale distributor and a manufacturer when the wholesale distributor, including any affiliated group of the 20 wholesale distributor, as defined in section 1504 of the internal revenue 21 code, complies with any one of the following: (1) The wholesale 22 distributor has a written agreement currently in effect with the 23 24 manufacturer evidencing such ongoing relationship; and (2) the wholesale distributor is listed on the manufacturer's current list of authorized 25 distributors of record, which is updated by the manufacturer on no less 26 27 than a monthly basis.

(e) "Board" means the state board of pharmacy created by K.S.A. 741603, and amendments thereto.

30 (f) "Brand exchange" means the dispensing of a different drug
31 product of the same dosage form and strength and of the same generic
32 name as the brand name drug product prescribed.

(g) "Brand name" means the registered trademark name given to a
 drug product by its manufacturer, labeler or distributor.

(h) "Chain pharmacy warehouse" means a permanent physical
location for drugs or devices, or both, that acts as a central warehouse and
performs intracompany sales or transfers of prescription drugs or devices
to chain pharmacies that have the same ownership or control. Chain
pharmacy warehouses must be registered as wholesale distributors.

40 (i) "Co-licensee" means a pharmaceutical manufacturer that has 41 entered into an agreement with another pharmaceutical manufacturer to 42 engage in a business activity or occupation related to the manufacture or 43 distribution of a prescription drug and the national drug code on the drug

1 product label shall be used to determine the identity of the drug 2 manufacturer.

3 (j) "DEA" means the U.S. department of justice, drug enforcement 4 administration.

5 (k) "Deliver" or "delivery" means the actual, constructive or 6 attempted transfer from one person to another of any drug whether or not 7 an agency relationship exists.

8 (1) "Direct supervision" means the process by which the responsible 9 pharmacist shall observe and direct the activities of a pharmacy student or 10 pharmacy technician to a sufficient degree to assure that all such activities 11 are performed accurately, safely and without risk or harm to patients, and 12 complete the final check before dispensing.

(m) "Dispense" means to deliver prescription medication to the
 ultimate user or research subject by or pursuant to the lawful order of a
 practitioner or pursuant to the prescription of a mid-level practitioner.

(n) "Dispenser" means a practitioner or pharmacist who dispenses
prescription medication, or a physician assistant who has authority to
dispense prescription-only drugs in accordance with subsection (b) ofK.S.A. 65-28a08(b), and amendments thereto.

20 (o) "Distribute" means to deliver, other than by administering or 21 dispensing, any drug.

(p) "Distributor" means a person who distributes a drug.

"Drop shipment" means the sale, by a manufacturer, that 23 (q) manufacturer's co-licensee, that manufacturer's third party logistics 24 provider, or that manufacturer's exclusive distributor, of the manufacturer's 25 prescription drug, to a wholesale distributor whereby the wholesale 26 distributor takes title but not possession of such prescription drug and the 27 wholesale distributor invoices the pharmacy, the chain pharmacy 28 warehouse, or other designated person authorized by law to dispense or 29 administer such prescription drug, and the pharmacy, the chain pharmacy 30 warehouse, or other designated person authorized by law to dispense or 31 32 administer such prescription drug receives delivery of the prescription drug directly from the manufacturer, that manufacturer's co-licensee, that 33 manufacturer's third party logistics provider, or that manufacturer's 34 exclusive distributor, of such prescription drug. Drop shipment shall be 35 part of the "normal distribution channel." 36

(r) "Drug" means: (1) Articles recognized in the official United States
pharmacopoeia, or other such official compendiums of the United States,
or official national formulary, or any supplement of any of them; (2)
articles intended for use in the diagnosis, cure, mitigation, treatment or
prevention of disease in man or other animals; (3) articles, other than food,
intended to affect the structure or any function of the body of man or other
animals; and (4) articles intended for use as a component of any articles

specified in clause (1), (2) or (3) of this subsection; but does not include devices or their components, parts or accessories, except that the term "drug" shall not include amygdalin (laetrile) or any livestock remedy, if such livestock remedy had been registered in accordance with the provisions of article 5 of chapter 47 of the Kansas Statutes Annotated, prior to its repeal.

7 (s) "Durable medical equipment" means technologically sophisticated medical devices that may be used in a residence, including the following: 8 (1) Oxygen and oxygen delivery system; (2) ventilators; (3) respiratory 9 10 disease management devices; (4) continuous positive airway pressure 11 (CPAP) devices; (5) electronic and computerized wheelchairs and seating systems; (6) apnea monitors; (7) transcutaneous electrical nerve stimulator 12 13 (TENS) units; (8) low air loss cutaneous pressure management devices; (9) sequential compression devices; (10) feeding pumps; (11) home 14 phototherapy devices; (12) infusion delivery devices; (13) distribution of 15 medical gases to end users for human consumption; (14) hospital beds; 16 (15) nebulizers; or (16) other similar equipment determined by the board 17 18 in rules and regulations adopted by the board.

(t) "Electronic prescription" means an electronically prepared
 prescription that is authorized and transmitted from the prescriber to the
 pharmacy by means of electronic transmission.

(u) "Electronic prescription application" means software that is used
 to create electronic prescriptions and that is intended to be installed on the
 prescriber's computers and servers where access and records are controlled
 by the prescriber.

(v) "Electronic signature" means a confidential personalized digital
key, code, number or other method for secure electronic data transmissions
which identifies a particular person as the source of the message,
authenticates the signatory of the message and indicates the person's
approval of the information contained in the transmission.

(w) "Electronic transmission" means the transmission of an electronic
prescription, formatted as an electronic data file, from a prescriber's
electronic prescription application to a pharmacy's computer, where the
data file is imported into the pharmacy prescription application.

35 (x) "Electronically prepared prescription" means a prescription that is 36 generated using an electronic prescription application.

(y) "Exclusive distributor" means any entity that: (1) Contracts with a manufacturer to provide or coordinate warehousing, wholesale distribution or other services on behalf of a manufacturer and who takes title to that manufacturer's prescription drug, but who does not have general responsibility to direct the sale or disposition of the manufacturer's prescription drug; (2) is registered as a wholesale distributor under the pharmacy act of the state of Kansas; and (3) to be considered part of the 1 normal distribution channel, must be an authorized distributor of record.

2 "Facsimile transmission" or "fax transmission" means the (z)3 transmission of a digital image of a prescription from the prescriber or the 4 prescriber's agent to the pharmacy. "Facsimile transmission" includes, but 5 is not limited to, transmission of a written prescription between the prescriber's fax machine and the pharmacy's fax machine; transmission of 6 an electronically prepared prescription from the prescriber's electronic 7 prescription application to the pharmacy's fax machine, computer or 8 printer; or transmission of an electronically prepared prescription from the 9 10 prescriber's fax machine to the pharmacy's fax machine, computer or 11 printer.

(aa) "Generic name" means the established chemical name or officialname of a drug or drug product.

(bb) (1) "Institutional drug room" means any location where
prescription-only drugs are stored and from which prescription-only drugs
are administered or dispensed and which is maintained or operated for the
purpose of providing the drug needs of:

18 (A) Inmates of a jail or correctional institution or facility;

(B) residents of a juvenile detention facility, as defined by the revised
Kansas code for care of children and the revised Kansas juvenile justice
code;

(C) students of a public or private university or college, a community
college or any other institution of higher learning which is located in
Kansas;

(D) employees of a business or other employer; or

(E) persons receiving inpatient hospice services.

27 (2) "Institutional drug room" does not include:

28 (A) Any registered pharmacy;

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(B) any office of a practitioner; or

30 (C) a location where no prescription-only drugs are dispensed and no 31 prescription-only drugs other than individual prescriptions are stored or 32 administered.

(cc) "Intermediary" means any technology system that receives and
 transmits an electronic prescription between the prescriber and the
 pharmacy.

(dd) "Intracompany transaction" means any transaction or transfer
between any division, subsidiary, parent or affiliated or related company
under common ownership or control of a corporate entity, or any
transaction or transfer between co-licensees of a co-licensed product.

40 (ee) "Medical care facility" shall have the meaning provided in 41 K.S.A. 65-425, and amendments thereto, except that the term shall also 42 include facilities licensed under the provisions of K.S.A. 75-3307b, and 43 amendments thereto, except community mental health centers and 1 facilities for people with intellectual disability.

(ff) "Manufacture" means the production, preparation, propagation, 2 compounding, conversion or processing of a drug either directly or 3 4 indirectly by extraction from substances of natural origin, independently by means of chemical synthesis or by a combination of extraction and 5 chemical synthesis and includes any packaging or repackaging of the drug 6 7 or labeling or relabeling of its container, except that this term shall not 8 include the preparation or compounding of a drug by an individual for the 9 individual's own use or the preparation, compounding, packaging or 10 labeling of a drug by:

(1) A practitioner or a practitioner's authorized agent incident to such
 practitioner's administering or dispensing of a drug in the course of the
 practitioner's professional practice;

(2) a practitioner, by a practitioner's authorized agent or under a
practitioner's supervision for the purpose of, or as an incident to, research,
teaching or chemical analysis and not for sale; or

a pharmacist or the pharmacist's authorized agent acting under the
direct supervision of the pharmacist for the purpose of, or incident to, the
dispensing of a drug by the pharmacist.

20 (gg) "Manufacturer" means a person licensed or approved by the FDA
21 to engage in the manufacture of drugs and devices.

(hh) "Mid-level practitioner" means-an-advanced-practice registered-22 nurse-issued a license pursuant to K.S.A. 65-1131, and amendments-23 thereto, who has authority to prescribe drugs pursuant to a written protocol 24 with a responsible physician under K.S.A. 65-1130, and amendments-25 thereto, or a physician assistant licensed pursuant to the physician assistant 26 licensure act who has authority to prescribe drugs pursuant to a written 27 protocol with a supervising physician under K.S.A. 65-28a08, and 28 29 amendments thereto.

(ii) "Normal distribution channel" means a chain of custody for a
prescription-only drug that goes from a manufacturer of the prescriptiononly drug, from that manufacturer to that manufacturer's co-licensed
partner, from that manufacturer to that manufacturer's third-party logistics
provider, or from that manufacturer to that manufacturer's exclusive
distributor, directly or by drop shipment, to:

36 (1) A pharmacy to a patient or to other designated persons authorized
37 by law to dispense or administer such drug to a patient;

38 (2) a wholesale distributor to a pharmacy to a patient or other
39 designated persons authorized by law to dispense or administer such drug
40 to a patient;

41 (3) a wholesale distributor to a chain pharmacy warehouse to that
42 chain pharmacy warehouse's intracompany pharmacy to a patient or other
43 designated persons authorized by law to dispense or administer such drug

1 to a patient; or

2 (4) a chain pharmacy warehouse to the chain pharmacy warehouse's
3 intracompany pharmacy to a patient or other designated persons authorized
4 by law to dispense or administer such drug to a patient.

5 (jj) "Person" means individual, corporation, government, 6 governmental subdivision or agency, partnership, association or any other 7 legal entity.

8 (kk) "Pharmacist" means any natural person licensed under this act to 9 practice pharmacy.

(II) "Pharmacist-in-charge" means the pharmacist who is responsible 10 to the board for a registered establishment's compliance with the laws and 11 regulations of this state pertaining to the practice of pharmacy, 12 manufacturing of drugs and the distribution of drugs. The pharmacist-in-13 14 charge shall supervise such establishment on a full-time or a part-time 15 basis and perform such other duties relating to supervision of a registered establishment as may be prescribed by the board by rules and regulations. 16 Nothing in this definition shall relieve other pharmacists or persons from 17 their responsibility to comply with state and federal laws and regulations. 18

(mm) "Pharmacist intern" means: (1) A student currently enrolled in
an accredited pharmacy program; (2) a graduate of an accredited pharmacy
program serving an internship; or (3) a graduate of a pharmacy program
located outside of the United States which is not accredited and who has
successfully passed equivalency examinations approved by the board.

(nn) "Pharmacy," "drugstore" or "apothecary" means premises, 24 laboratory, area or other place: (1) Where drugs are offered for sale where 25 the profession of pharmacy is practiced and where prescriptions are 26 compounded and dispensed; or (2) which has displayed upon it or within it 27 "pharmacist," "pharmaceutical chemist," "pharmacy," 28 words the "apothecary," "drugstore," "druggist," "drugs," "drug sundries" or any of 29 these words or combinations of these words or words of similar import 30 either in English or any sign containing any of these words; or (3) where 31 the characteristic symbols of pharmacy or the characteristic prescription 32 33 sign "Rx" may be exhibited. As used in this subsection, premises refers 34 only to the portion of any building or structure leased, used or controlled by the licensee in the conduct of the business registered by the board at the 35 address for which the registration was issued. 36

(oo) "Pharmacy prescription application" means software that is used
to process prescription information, is installed on a pharmacy's computers
or servers, and is controlled by the pharmacy.

(pp) "Pharmacy technician" means an individual who, under the
direct supervision and control of a pharmacist, may perform packaging,
manipulative, repetitive or other nondiscretionary tasks related to the
processing of a prescription or medication order and who assists the

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pharmacist in the performance of pharmacy related duties, but who does
 not perform duties restricted to a pharmacist.

3 (qq) "Practitioner" means a person licensed to practice medicine and surgery, dentist, podiatrist, veterinarian, optometrist, advanced practice 4 5 registered nurse who is licensed pursuant to K.S.A. 65-1131, and 6 amendments thereto, and who has authority to prescribe drugs in 7 accordance with K.S.A. 65-1130, and amendments thereto, a registered 8 nurse anesthetist registered pursuant to K.S.A. 65-1154, and amendments 9 thereto, or scientific investigator or other person authorized by law to use a 10 prescription-only drug in teaching or chemical analysis or to conduct research with respect to a prescription-only drug. 11

12 (rr) "Preceptor" means a licensed pharmacist who possesses at least 13 two years' experience as a pharmacist and who supervises students 14 obtaining the pharmaceutical experience required by law as a condition to 15 taking the examination for licensure as a pharmacist.

(ss) "Prescriber" means a practitioner or a mid-level practitioner.

(tt) "Prescription" or "prescription order" means: (1) An order to be
filled by a pharmacist for prescription medication issued and signed by a
prescriber in the authorized course of such prescriber's professional
practice; or (2) an order transmitted to a pharmacist through word of
mouth, note, telephone or other means of communication directed by such
prescriber, regardless of whether the communication is oral, electronic,
facsimile or in printed form.

24 (uu) "Prescription medication" means any drug, including label and 25 container according to context, which is dispensed pursuant to a 26 prescription order.

(vv) "Prescription-only drug" means any drug whether intended for
use by man or animal, required by federal or state law, including 21 U.S.C.
§ 353, to be dispensed only pursuant to a written or oral prescription or
order of a practitioner or is restricted to use by practitioners only.

31 (ww) "Probation" means the practice or operation under a temporary 32 license, registration or permit or a conditional license, registration or 33 permit of a business or profession for which a license, registration or 34 permit is granted by the board under the provisions of the pharmacy act of 35 the state of Kansas requiring certain actions to be accomplished or certain 36 actions not to occur before a regular license, registration or permit is 37 issued.

(xx) "Professional incompetency" means:

39 (1) One or more instances involving failure to adhere to the
40 applicable standard of pharmaceutical care to a degree which constitutes
41 gross negligence, as determined by the board;

42 (2) repeated instances involving failure to adhere to the applicable 43 standard of pharmaceutical care to a degree which constitutes ordinary

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1 negligence, as determined by the board; or

2 (3) a pattern of pharmacy practice or other behavior which 3 demonstrates a manifest incapacity or incompetence to practice pharmacy.

4 (yy) "Readily retrievable" means that records kept by automatic data 5 processing applications or other electronic or mechanized record-keeping 6 systems can be separated out from all other records within a reasonable 7 time not to exceed 48 hours of a request from the board or other authorized 8 agent or that hard-copy records are kept on which certain items are 9 asterisked, redlined or in some other manner visually identifiable apart 10 from other items appearing on the records.

11 (zz) "Retail dealer" means a person selling at retail nonprescription 12 drugs which are prepackaged, fully prepared by the manufacturer or 13 distributor for use by the consumer and labeled in accordance with the 14 requirements of the state and federal food, drug and cosmetic acts. Such 15 nonprescription drugs shall not include: (1) A controlled substance; (2) a 16 prescription-only drug; or (3) a drug intended for human use by 17 hypodermic injection.

(aaa) "Secretary" means the executive secretary of the board.

19 (bbb) "Third party logistics provider" means an entity that: (1) 20 Provides or coordinates warehousing, distribution or other services on 21 behalf of a manufacturer, but does not take title to the prescription drug or 22 have general responsibility to direct the prescription drug's sale or 23 disposition; (2) is registered as a wholesale distributor under the pharmacy 24 act of the state of Kansas; and (3) to be considered part of the normal 25 distribution channel, must also be an authorized distributor of record.

(ccc) "Unprofessional conduct" means:

(1) Fraud in securing a registration or permit;

(2) intentional adulteration or mislabeling of any drug, medicine,chemical or poison;

30 (3) causing any drug, medicine, chemical or poison to be adulterated
 31 or mislabeled, knowing the same to be adulterated or mislabeled;

(4) intentionally falsifying or altering records or prescriptions;

(5) unlawful possession of drugs and unlawful diversion of drugs toothers;

(6) willful betrayal of confidential information under K.S.A. 65-1654,
 and amendments thereto;

(7) conduct likely to deceive, defraud or harm the public;

(8) making a false or misleading statement regarding the licensee's
 professional practice or the efficacy or value of a drug;

40 (9) commission of any act of sexual abuse, misconduct or exploitation
41 related to the licensee's professional practice; or

42 (10) performing unnecessary tests, examinations or services which 43 have no legitimate pharmaceutical purpose. 1 (dd) "Vaccination protocol" means a written protocol, agreed to by a 2 pharmacist and a person licensed to practice medicine and surgery by the 3 state board of healing arts, which establishes procedures and 4 recordkeeping and reporting requirements for administering a vaccine by 5 the pharmacist for a period of time specified therein, not to exceed two 6 years.

7 (eee) "Valid prescription order" means a prescription that is issued for 8 a legitimate medical purpose by an individual prescriber licensed by law to 9 administer and prescribe drugs and acting in the usual course of such 10 prescriber's professional practice. A prescription issued solely on the basis 11 of an internet-based questionnaire or consultation without an appropriate 12 prescriber-patient relationship is not a valid prescription order.

(fff) "Veterinary medical teaching hospital pharmacy" means any
location where prescription-only drugs are stored as part of an accredited
college of veterinary medicine and from which prescription-only drugs are
distributed for use in treatment of or administration to a nonhuman.

"Wholesale distributor" means any person engaged in 17 (ggg) wholesale distribution of prescription drugs or devices in or into the state, 18 including, but not limited to, manufacturers, repackagers, own-label 19 20 distributors, private-label distributors, jobbers, brokers, warehouses, including manufacturers' and distributors' warehouses, co-licensees, 21 exclusive distributors, third party logistics providers, chain pharmacy 22 warehouses that conduct wholesale distributions, and wholesale drug 23 warehouses, independent wholesale drug traders and retail pharmacies that 24 conduct wholesale distributions. Wholesale distributor shall not include 25 persons engaged in the sale of durable medical equipment to consumers or 26 27 patients.

(hhh) "Wholesale distribution" means the distribution of prescription drugs or devices by wholesale distributors to persons other than consumers or patients, and includes the transfer of prescription drugs by a pharmacy to another pharmacy if the total number of units of transferred drugs during a twelve-month period does not exceed 5% of the total number of all units dispensed by the pharmacy during the immediately preceding twelve-month period. Wholesale distribution does not include:

(1) The sale, purchase or trade of a prescription drug or device, an
offer to sell, purchase or trade a prescription drug or device or the
dispensing of a prescription drug or device pursuant to a prescription;

(2) the sale, purchase or trade of a prescription drug or device or an
offer to sell, purchase or trade a prescription drug or device for emergency
medical reasons;

41 (3) intracompany transactions, as defined in this section, unless in42 violation of own use provisions;

43 (4) the sale, purchase or trade of a prescription drug or device or an

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offer to sell, purchase or trade a prescription drug or device among
 hospitals, chain pharmacy warehouses, pharmacies or other health care
 entities that are under common control;

4 (5) the sale, purchase or trade of a prescription drug or device or the 5 offer to sell, purchase or trade a prescription drug or device by a charitable 6 organization described in 503(c)(3) of the internal revenue code of 1954 to 7 a nonprofit affiliate of the organization to the extent otherwise permitted 8 by law;

9 (6) the purchase or other acquisition by a hospital or other similar 10 health care entity that is a member of a group purchasing organization of a 11 prescription drug or device for its own use from the group purchasing 12 organization or from other hospitals or similar health care entities that are 13 members of these organizations;

14 (7) the transfer of prescription drugs or devices between pharmacies15 pursuant to a centralized prescription processing agreement;

16 (8) the sale, purchase or trade of blood and blood components17 intended for transfusion;

(9) the return of recalled, expired, damaged or otherwise non-salable
prescription drugs, when conducted by a hospital, health care entity,
pharmacy, chain pharmacy warehouse or charitable institution in
accordance with the board's rules and regulations;

(10) the sale, transfer, merger or consolidation of all or part of the business of a retail pharmacy or pharmacies from or with another retail pharmacy or pharmacies, whether accomplished as a purchase and sale of stock or business assets, in accordance with the board's rules and regulations;

(11) the distribution of drug samples by manufacturers' and
authorized distributors' representatives;

(12) the sale of minimal quantities of drugs by retail pharmacies tolicensed practitioners for office use; or

31 (13) the sale or transfer from a retail pharmacy or chain pharmacy 32 warehouse of expired, damaged, returned or recalled prescription drugs to 33 the original manufacturer, originating wholesale distributor or to a third 34 party returns processor in accordance with the board's rules and 35 regulations.

36 Sec. 12. K.S.A. 65-1660 is hereby amended to read as follows: 65-37 1660. (a) Except as otherwise provided in this section, the provisions of 38 the pharmacy act of the state of Kansas shall not apply to dialysates, 39 devices or drugs which are designated by the board for the purposes of this section relating to treatment of a person with chronic kidney failure 40 receiving dialysis and which are prescribed or ordered by a physician, an 41 42 advanced practice registered nurse or a mid-level practitioner for administration or delivery to a person with chronic kidney failure if: 43

1 (1) The wholesale distributor is registered with the board and lawfully 2 holds the drug or device; and

3 (2) the wholesale distributor: (A) Delivers the drug or device to: (i) A 4 person with chronic kidney failure for self-administration at the person's 5 home or specified address; (ii) a physician for administration or delivery to 6 a person with chronic kidney failure; or (iii) a medicare approved renal 7 dialysis facility for administering or delivering to a person with chronic 8 kidney failure; and (B) has sufficient and qualified supervision to 9 adequately protect the public health.

10 (b) The wholesale distributor pursuant to subsection (a) shall be 11 supervised by a pharmacist consultant pursuant to rules and regulations 12 adopted by the board.

(c) The board shall adopt such rules or regulations as are necessary toeffectuate the provisions of this section.

15 (d) As used in this section, "physician" means a person licensed to practice medicine and surgery; "mid-level practitioner" means mid-level 16 practitioner as such term is defined-in subsection (ii) of by K.S.A. 65-17 18 1626, and amendments thereto; "advanced practice registered nurse" means an advanced practice registered nurse who is licensed pursuant to 19 K.S.A. 65-1131, and amendments thereto, and who has authority to 20 prescribe drugs in accordance with K.S.A. 65-1130, and amendments 21 22 thereto.

(e) This section shall be part of and supplemental to the pharmacy actof the state of Kansas.

25 Sec. 13. K.S.A. 2014 Supp. 65-1682 is hereby amended to read as 26 follows: 65-1682. As used in this act, unless the context otherwise 27 requires:

28 (a) "Board" means the state board of pharmacy.

(b) "Dispenser" means a practitioner or pharmacist who delivers a
scheduled substance or drug of concern to an ultimate user, but does not
include:

32 (1) A licensed hospital pharmacy that distributes such substances for33 the purpose of inpatient hospital care;

a medical care facility as defined in K.S.A. 65-425, and
 amendments thereto, practitioner or other authorized person who
 administers such a substance;

(3) a registered wholesale distributor of such substances;

(4) a veterinarian licensed by the Kansas board of veterinary
 examiners who dispenses or prescribes a scheduled substance or drug of
 concern; or

41 (5) a practitioner who has been exempted from the reporting 42 requirements of this act in rules and regulations promulgated by the board.

43 (c) "Drug of concern" means any drug that demonstrates a potential

for abuse and is designated as a drug of concern in rules and regulations 2 promulgated by the board.

"Patient" means the person who is the ultimate user of a drug for 3 (d) 4 whom a prescription is issued or for whom a drug is dispensed, or both.

5 "Pharmacist" means an individual currently licensed by the board (e) 6 to practice the profession of pharmacy in this state.

"Practitioner" means a person licensed to practice medicine and 7 (f) surgery, dentist, podiatrist, optometrist, advanced practice registered nurse 8 9 who is licensed pursuant to K.S.A. 65-1131, and amendments thereto, and who has authority to prescribe drugs in accordance with K.S.A. 65-1130, 10 and amendments thereto, or other person authorized by law to prescribe or 11 12 dispense scheduled substances and drugs of concern.

"Scheduled substance" means controlled substances included in 13 (g) schedules II, III or IV of the schedules designated in K.S.A. 65-4107, 65-14 4109 and 65-4111, and amendments thereto, respectively, or the federal 15 controlled substances act (21 U.S.C. § 812). 16

17 Sec. 14. K.S.A. 2014 Supp. 65-2837a is hereby amended to read as follows: 65-2837a. (a) It shall be unlawful for any person licensed to 18 practice medicine and surgery to prescribe, order, dispense, administer, 19 20 sell, supply or give or for any person licensed as an advanced practice registered nurse or for a mid-level practitioner as defined in subsection (ii) 21 of by K.S.A. 65-1626, and amendments thereto, to prescribe, administer, 22 supply or give any amphetamine or sympathomimetic amine designated in 23 schedule II, III or IV under the uniform controlled substances act, except 24 25 as provided in this section. Failure to comply with this section by a 26 licensee shall constitute unprofessional conduct under K.S.A. 65-2837, 27 and amendments thereto.

(b) When any licensee prescribes, orders, dispenses, administers, 28 29 sells, supplies or gives or when any advanced practice registered nurse or any mid-level practitioner as defined-in-subsection (ii) of by K.S.A. 65-30 31 1626, and amendments thereto, prescribes, administers, sells, supplies or gives any amphetamine or sympathomimetic amine designated in schedule 32 II, III or IV under the uniform controlled substances act, the patient's 33 medical record shall adequately document the purpose for which the drug 34 is being given. Such purpose shall be restricted to one or more of the 35 36 following:

- The treatment of narcolepsy. 37 (1)
- The treatment of drug-induced brain dysfunction. 38 (2)
- 39 (3) The treatment of hyperkinesis.
- 40 The differential diagnostic psychiatric evaluation of depression. (4)
- The treatment of depression shown by adequate medical records 41 (5) 42 and documentation to be unresponsive to other forms of treatment.
- The clinical investigation of the effects of such drugs or 43 (6)

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obtain approval of the investigation from the board of healing arts.
(7) The treatment of obesity with controlled substances, as may be
defined by rules and regulations adopted by the board of healing arts.

6 (8) The treatment of any other disorder or disease for which such 7 drugs or compounds have been found to be safe and effective by competent scientific research which findings have been generally accepted 8 by the scientific community, in which case, the licensee before prescribing, 9 10 ordering, dispensing, administering, selling, supplying or giving the drug or compound for a particular condition, or the licensee before authorizing 11 12 a mid-level practitioner to prescribe the drug or compound for a particular condition, or the advanced practice registered nurse before prescribing, 13 ordering, administering or giving the drug for a particular condition, shall 14 obtain a determination from the board of healing arts that the drug or 15 compound can be used for that particular condition. 16

17 Sec. 15. K.S.A. 65-2892 is hereby amended to read as follows: 65-2892. Any physician or advanced practice registered nurse, upon 18 consultation by any person under-cighteen (18) 18 years of age as a 19 patient, may, with the consent of such person who is hereby granted the 20 right of giving such consent, make a diagnostic examination for venereal 21 disease and prescribe for and treat such person for venereal disease 22 including prophylactic treatment for exposure to venereal disease 23 whenever such person is suspected of having a venereal disease or contact 24 with anyone having a venereal disease. All such examinations and 25 treatment may be performed without the consent of, or notification to, the 26 parent, parents, guardian or any other person having custody of such 27 person. Any physician or advanced practice registered nurse examining or 28 treating such person for venereal disease may, but shall not be obligated to, 29 in accord with his opinion of what will be most beneficial for such person, 30 inform the spouse, parent, custodian, guardian or fiance of such person as 31 to the treatment given or needed without the consent of such person. Such 32 informing shall not constitute libel or slander or a violation of the right of 33 privacy or privilege or otherwise subject the physician or advanced 34 practice registered nurse to any liability whatsoever. In any such case, the 35 physician or advanced practice registered nurse shall incur no civil or 36 criminal liability by reason of having made such diagnostic examination or 37 rendered such treatment, but such immunity shall not apply to any 38 negligent acts or omissions. The physician or advanced practice registered 39 nurse shall incur no civil or criminal liability by reason of any adverse 40 reaction to medication administered, provided reasonable care has been 41 taken to elicit from such person under-eighteen (18) 18 years of age any 42 history of sensitivity or previous adverse reaction to the medication. 43

Sec. 16. K.S.A. 2014 Supp. 65-2921 is hereby amended to read as 1 follows: 65-2921. (a) Except as otherwise provided in subsection (d), a 2 physical therapist may evaluate and initiate physical therapy treatment on 3 4 a patient without referral from a licensed health care practitioner. If treating a patient without a referral from a licensed health care practitioner 5 6 and the patient is not progressing toward documented treatment goals as 7 demonstrated by objective, measurable or functional improvement, or any combination thereof, after 10 patient visits or in a period of 15 business 8 9 days from the initial treatment visits following the initial evaluation visit, the physical therapist shall obtain a referral from an appropriate licensed 10 health care practitioner prior to continuing treatment. 11

(b) Physical therapists may provide, without a referral, services to: (1)
Employees solely for the purpose of education and instruction related to
workplace injury prevention; or (2) the public for the purpose of fitness,
health promotion and education.

16 (c) Physical therapists may provide services without a referral to 17 special education students who need physical therapy services to fulfill the 18 provisions of their individualized education plan (IEP) or individualized 19 family service plan (IFSP).

(d) Nothing in this section shall be construed to prevent a hospital or
ambulatory surgical center from requiring a physician order or referral for
physical therapy services for a patient currently being treated in such
facility.

(e) When a patient self-refers to a physical therapist pursuant to this
section, the physical therapist, prior to commencing treatment, shall
provide written notice to the patient that a physical therapy diagnosis is not
a medical diagnosis by a physician.

(f) Physical therapists shall perform wound debridement services only
after approval by a person licensed to practice medicine and surgery or
other licensed health care practitioner in appropriately related cases.

(g) As used in this section, "licensed health care practitioner" means a person licensed to practice medicine and surgery, a licensed podiatrist, a licensed physician assistant-or a licensed advanced practice registered nurse working pursuant to the order or direction of a person licensed to practice medicine and surgery, a licensed chiropractor, a licensed dentist or, a licensed optometrist or a licensed advanced practice registered nurse in appropriately related cases.

38 Sec. 17. K.S.A. 2013 Supp. 65-4101, as amended by section 50 of 39 chapter 131 of the 2014 Session Laws of Kansas, is hereby amended to 40 read as follows: 65-4101. As used in this act: (a) "Administer" means the 41 direct application of a controlled substance, whether by injection, 42 inhalation, ingestion or any other means, to the body of a patient or 43 research subject by:

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1 (1) A practitioner or pursuant to the lawful direction of a practitioner; 2 or

3 (2) the patient or research subject at the direction and in the presence4 of the practitioner.

5 (b) "Agent" means an authorized person who acts on behalf of or at 6 the direction of a manufacturer, distributor or dispenser. It does not include 7 a common carrier, public warehouseman or employee of the carrier or 8 warehouseman.

9 (c) "Application service provider" means an entity that sells 10 electronic prescription or pharmacy prescription applications as a hosted 11 service where the entity controls access to the application and maintains 12 the software and records on its server.

(d) "Board" means the state board of pharmacy.

(e) "Bureau" means the bureau of narcotics and dangerous drugs,
United States department of justice, or its successor agency.

(f) "Controlled substance" means any drug, substance or immediate
precursor included in any of the schedules designated in K.S.A. 65-4105,
65-4107, 65-4109, 65-4111 and 65-4113, and amendments thereto.

19 (g) (1) "Controlled substance analog" means a substance that is 20 intended for human consumption, and:

(A) The chemical structure of which is substantially similar to the
chemical structure of a controlled substance listed in or added to the
schedules designated in K.S.A. 65-4105 or 65-4107, and amendments
thereto;

(B) which has a stimulant, depressant or hallucinogenic effect on the
central nervous system substantially similar to the stimulant, depressant or
hallucinogenic effect on the central nervous system of a controlled
substance included in the schedules designated in K.S.A. 65-4105 or 654107, and amendments thereto; or

30 (C) with respect to a particular individual, which such individual 31 represents or intends to have a stimulant, depressant or hallucinogenic 32 effect on the central nervous system substantially similar to the stimulant, 33 depressant or hallucinogenic effect on the central nervous system of a 34 controlled substance included in the schedules designated in K.S.A. 65-35 4105 or 65-4107, and amendments thereto.

(2) "Controlled substance analog" does not include:

(A) A controlled substance;

(B) a substance for which there is an approved new drug application;or

40 (C) a substance with respect to which an exemption is in effect for 41 investigational use by a particular person under section 505 of the federal 42 food, drug and cosmetic act, 21 U.S.C. § 355, to the extent conduct with 43 respect to the substance is permitted by the exemption.

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(h) "Counterfeit substance" means a controlled substance which, or the container or labeling of which, without authorization bears the trademark, trade name or other identifying mark, imprint, number or device or any likeness thereof of a manufacturer, distributor or dispenser

device or any likeness thereof of a manufacturer, distributor or dispenser
other than the person who in fact manufactured, distributed or dispensed
the substance.

7 (i) "Cultivate" means the planting or promotion of growth of five or 8 more plants which contain or can produce controlled substances.

9 (j) "DEA" means the U.S. department of justice, drug enforcement 10 administration.

11 (k) "Deliver" or "delivery" means the actual, constructive or
12 attempted transfer from one person to another of a controlled substance,
13 whether or not there is an agency relationship.

(1) "Dispense" means to deliver a controlled substance to an ultimate
user or research subject by or pursuant to the lawful order of a practitioner,
including the packaging, labeling or compounding necessary to prepare the
substance for that delivery, or pursuant to the prescription of a mid-level
practitioner.

(m) "Dispenser" means a practitioner or pharmacist who dispenses, or
a physician assistant who has authority to dispense prescription-only drugs
in accordance with-subsection (b) of K.S.A. 65-28a08(b), and amendments
thereto.

23 (n) "Distribute" means to deliver other than by administering or24 dispensing a controlled substance.

(o) "Distributor" means a person who distributes.

(p) "Drug" means: (1) Substances recognized as drugs in the official 26 27 United States pharmacopoeia, official homeopathic pharmacopoeia of the United States or official national formulary or any supplement to any of 28 them; (2) substances intended for use in the diagnosis, cure, mitigation, 29 30 treatment or prevention of disease in man or animals; (3) substances (other 31 than food) intended to affect the structure or any function of the body of 32 man or animals; and (4) substances intended for use as a component of any 33 article specified in clause (1), (2) or (3) of this subsection (p)(1), (2) or (3). It does not include devices or their components, parts or accessories. 34

(q) "Immediate precursor" means a substance which the board has found to be and by rule and regulation designates as being the principal compound commonly used or produced primarily for use and which is an immediate chemical intermediary used or likely to be used in the manufacture of a controlled substance, the control of which is necessary to prevent, curtail or limit manufacture.

41 (r) "Electronic prescription" means an electronically prepared
42 prescription that is authorized and transmitted from the prescriber to the
43 pharmacy by means of electronic transmission.

1 (s) "Electronic prescription application" means software that is used 2 to create electronic prescriptions and that is intended to be installed on the 3 prescriber's computers and servers where access and records are controlled 4 by the prescriber.

5 (t) "Electronic signature" means a confidential personalized digital 6 key, code, number or other method for secure electronic data transmissions 7 which identifies a particular person as the source of the message, 8 authenticates the signatory of the message and indicates the person's 9 approval of the information contained in the transmission.

10 (u) "Electronic transmission" means the transmission of an electronic 11 prescription, formatted as an electronic data file, from a prescriber's 12 electronic prescription application to a pharmacy's computer, where the 13 data file is imported into the pharmacy prescription application.

14 (v) "Electronically prepared prescription" means a prescription that is 15 generated using an electronic prescription application.

(w) "Facsimile transmission" or "fax transmission" means the 16 17 transmission of a digital image of a prescription from the prescriber or the prescriber's agent to the pharmacy. "Facsimile transmission" includes, but 18 19 is not limited to, transmission of a written prescription between the prescriber's fax machine and the pharmacy's fax machine; transmission of 20 an electronically prepared prescription from the prescriber's electronic 21 prescription application to the pharmacy's fax machine, computer or 22 23 printer; or transmission of an electronically prepared prescription from the prescriber's fax machine to the pharmacy's fax machine, computer or 24 25 printer.

(x) "Intermediary" means any technology system that receives and
 transmits an electronic prescription between the prescriber and the
 pharmacy.

(y) "Isomer" means all enantiomers and diastereomers.

30 "Manufacture" means the production, preparation, propagation, (z)compounding, conversion or processing of a controlled substance either 31 directly or indirectly or by extraction from substances of natural origin or 32 33 independently by means of chemical synthesis or by a combination of 34 extraction and chemical synthesis and includes any packaging or repackaging of the substance or labeling or relabeling of its container, 35 except that this term does not include the preparation or compounding of a 36 37 controlled substance by an individual for the individual's own lawful use 38 or the preparation, compounding, packaging or labeling of a controlled 39 substance:

40 (1) By a practitioner or the practitioner's agent pursuant to a lawful
41 order of a practitioner as an incident to the practitioner's administering or
42 dispensing of a controlled substance in the course of the practitioner's
43 professional practice; or

1 (2) by a practitioner or by the practitioner's authorized agent under 2 such practitioner's supervision for the purpose of or as an incident to 3 research, teaching or chemical analysis or by a pharmacist or medical care 4 facility as an incident to dispensing of a controlled substance.

5 (aa) "Marijuana" means all parts of all varieties of the plant Cannabis 6 whether growing or not, the seeds thereof, the resin extracted from any 7 part of the plant and every compound, manufacture, salt, derivative, mixture or preparation of the plant, its seeds or resin. It does not include 8 9 the mature stalks of the plant, fiber produced from the stalks, oil or cake 10 made from the seeds of the plant, any other compound, manufacture, salt, derivative, mixture or preparation of the mature stalks, except the resin 11 12 extracted therefrom, fiber, oil, or cake or the sterilized seed of the plant 13 which is incapable of germination.

14 (bb) "Medical care facility" shall have the meaning ascribed to that 15 term in K.S.A. 65-425, and amendments thereto.

(cc) "Mid-level practitioner" means an advanced practice registered 16 17 nurse-issued a license-pursuant to K.S.A. 65-1131, and amendmentsthereto, who has authority to prescribe drugs pursuant to a written protocol 18 with a responsible physician under K.S.A. 65-1130, and amendments 19 thereto, or a physician assistant licensed under the physician assistant 20 licensure act who has authority to prescribe drugs pursuant to a written 21 protocol with a supervising physician under K.S.A. 65-28a08, and 22 23 amendments thereto.

(dd) "Narcotic drug" means any of the following whether produced
directly or indirectly by extraction from substances of vegetable origin or
independently by means of chemical synthesis or by a combination of
extraction and chemical synthesis:

28 (1) Opium and opiate and any salt, compound, derivative or 29 preparation of opium or opiate;

30 (2) any salt, compound, isomer, derivative or preparation thereof 31 which is chemically equivalent or identical with any of the substances 32 referred to in-clause *paragraph* (1) but not including the isoquinoline 33 alkaloids of opium;

(3) opium poppy and poppy straw;

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(4) coca leaves and any salt, compound, derivative or preparation of
coca leaves, and any salt, compound, isomer, derivative or preparation
thereof which is chemically equivalent or identical with any of these
substances, but not including decocainized coca leaves or extractions of
coca leaves which do not contain cocaine or ecgonine.

40 (ee) "Opiate" means any substance having an addiction-forming or
41 addiction-sustaining liability similar to morphine or being capable of
42 conversion into a drug having addiction-forming or addiction-sustaining
43 liability. It does not include, unless specifically designated as controlled

under K.S.A. 65-4102, and amendments thereto, the dextrorotatory isomer
 of 3-methoxy-n-methylmorphinan and its salts (dextromethorphan). It does
 include its racemic and levorotatory forms.

4 (ff) "Opium poppy" means the plant of the species Papaver 5 somniferum l. except its seeds.

6 (gg) "Person" means an individual, corporation, government, or 7 governmental subdivision or agency, business trust, estate, trust, 8 partnership or association or any other legal entity.

9 (hh) "Pharmacist" means any natural person licensed under K.S.A. 10 65-1625 et seq., to practice pharmacy.

(ii) "Pharmacist intern" means: (1) A student currently enrolled in an
accredited pharmacy program; (2) a graduate of an accredited pharmacy
program serving such person's internship; or (3) a graduate of a pharmacy
program located outside of the United States which is not accredited and
who had successfully passed equivalency examinations approved by the
board.

(jj) "Pharmacy prescription application" means software that is used
to process prescription information, is installed on a pharmacy's computers
and servers, and is controlled by the pharmacy.

20 (kk) "Poppy straw" means all parts, except the seeds, of the opium 21 poppy, after mowing.

22 (11) "Practitioner" means a person licensed to practice medicine and surgery, dentist, podiatrist, veterinarian, optometrist, advanced practice 23 registered nurse who is licensed pursuant to K.S.A. 65-1131, and 24 amendments thereto, and who has authority to prescribe drugs in 25 accordance with K.S.A. 65-1130, and amendments thereto, or scientific 26 investigator or other person authorized by law to use a controlled 27 substance in teaching or chemical analysis or to conduct research with 28 29 respect to a controlled substance.

30 (mm) "Prescriber" means a practitioner or a mid-level practitioner.

31 (nn) "Production" includes the manufacture, planting, cultivation,32 growing or harvesting of a controlled substance.

(oo) "Readily retrievable" means that records kept by automatic data processing applications or other electronic or mechanized recordkeeping systems can be separated out from all other records within a reasonable time not to exceed 48 hours of a request from the board or other authorized agent or that hard-copy records are kept on which certain items are asterisked, redlined or in some other manner visually identifiable apart from other items appearing on the records.

40 (pp) "Ultimate user" means a person who lawfully possesses a 41 controlled substance for such person's own use or for the use of a member 42 of such person's household or for administering to an animal owned by 43 such person or by a member of such person's household.

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1 Sec. 18. K.S.A. 2014 Supp. 65-4116 is hereby amended to read as 2 follows: 65-4116. (a) Every person who manufactures, distributes or 3 dispenses any controlled substance within this state or who proposes to 4 engage in the manufacture, distribution or dispensing of any controlled 5 substance within this state shall obtain annually a registration issued by the 6 board in accordance with the uniform controlled substances act and with 7 rules and regulations adopted by the board.

8 (b) Persons registered by the board under this act to manufacture, 9 distribute, dispense or conduct research with controlled substances may 10 possess, manufacture, distribute, dispense or conduct research with those 11 substances to the extent authorized by their registration and in conformity 12 with the other provisions of this act.

(c) The following persons need not register and may lawfully possesscontrolled substances under this act, as specified in this subsection:

(1) An agent or employee of any registered manufacturer, distributor
or dispenser of any controlled substance if the agent or employee is acting
in the usual course of such agent or employee's business or employment;

(2) a common carrier or warehouseman or an employee thereof
whose possession of any controlled substance is in the usual course of
business or employment;

(3) an ultimate user or a person in possession of any controlled
substance pursuant to a lawful order of a practitioner or a mid-level
practitioner or in lawful possession of a schedule V substance;

24 (4) persons licensed and registered by the board under the provisions 25 of the acts contained in article 16 of chapter 65 of the Kansas Statutes Annotated, and amendments thereto, to manufacture, dispense or distribute 26 27 drugs are considered to be in compliance with the registration provision of 28 the uniform controlled substances act without additional proceedings before the board or the payment of additional fees, except that 29 30 manufacturers and distributors shall complete and file the application form 31 required under the uniform controlled substances act;

32 (5) any person licensed by the state board of healing arts under the33 Kansas healing arts act;

(6) any person licensed by the state board of veterinary examiners;

(7) any person licensed by the Kansas dental board;

36 (8) a mid-level practitioner;-and

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(9) any person who is a member of the Native American Church, with
respect to use or possession of peyote, whose use or possession of peyote
is in, or for use in, bona fide religious ceremonies of the Native American
Church, but nothing in this paragraph shall authorize the use or possession
of peyote in any place used for the confinement or housing of persons
arrested, charged or convicted of criminal offenses or in the state security
hospital; and

1 (10) any person licensed as an advanced practice registered nurse 2 under K.S.A. 65-1131, and amendments thereto, and who has authority to 3 prescribe drugs in accordance with K.S.A. 65-1130, and amendments 4 thereto.

5 (d)(1)The board may waive by rules and regulations the requirement for registration of certain manufacturers, distributors or dispensers if the 6 board finds it consistent with the public health and safety, except that 7 licensure of any person by the state board of healing arts to practice any 8 branch of the healing arts, Kansas dental board-or, the state board of 9 10 veterinary examiners or the board of nursing of advanced practice registered nurses shall constitute compliance with the registration 11 requirements of the uniform controlled substances act by such person for 12 13 such person's place of professional practice.

14 (2) Evidence of abuse as determined by the board relating to a person 15 licensed by the state board of healing arts shall be submitted to the state 16 board of healing arts and the attorney general within 60 days. The state 17 board of healing arts shall, within 60 days, make findings of fact and take 18 such action against such person as it deems necessary. All findings of fact 19 and any action taken shall be reported by the state board of healing arts to 20 the board of pharmacy and the attorney general.

(3) Evidence of abuse as determined by the board relating to a person 21 licensed by the state board of veterinary examiners shall be submitted to 22 23 the state board of veterinary examiners and the attorney general within 60 days. The state board of veterinary examiners shall, within 60 days, make 24 findings of fact and take such action against such person as it deems 25 necessary. All findings of fact and any action taken shall be reported by the 26 state board of veterinary examiners to the board of pharmacy and the 27 28 attorney general.

29 (4) Evidence of abuse as determined by the board relating to a dentist 30 licensed by the Kansas dental board shall be submitted to the Kansas 31 dental board and the attorney general within 60 days. The Kansas dental 32 board shall, within 60 days, make findings of fact and take such action 33 against such dentist as it deems necessary. All findings of fact and any 34 action taken shall be reported by the Kansas dental board to the board of 35 pharmacy and the attorney general.

(5) Evidence of abuse as determined by the board relating to an 36 advanced practice registered nurse licensed by the board of nursing shall 37 be submitted to the board of nursing and the attorney general within 60 38 39 days. The board of nursing shall, within 60 days, make findings of fact and take such action against such advanced practice registered nurse as it 40 41 deems necessary. All findings of fact and any action taken shall be reported by the board of nursing to the board of pharmacy and the 42 attorney general. 43

1 (e) A separate annual registration is required at each place of business 2 or professional practice where the applicant manufactures, distributes or 3 dispenses controlled substances.

4 (f) The board may inspect the establishment of a registrant or 5 applicant for registration in accordance with the board's rules and 6 regulations.

7 (g) (1) The registration of any person or location shall terminate when 8 such person or authorized representative of a location dies, ceases legal 9 existence, discontinues business or professional practice or changes the 10 location as shown on the certificate of registration. Any registrant who ceases legal existence, discontinues business or professional practice, or 11 12 changes location as shown on the certificate of registration, shall notify the board promptly of such fact and forthwith deliver the certificate of 13 14 registration directly to the secretary or executive secretary of the board. In 15 the event of a change in name or mailing address the person or authorized 16 representative of the location shall notify the board promptly in advance of 17 the effective date of this change by filing the change of name or mailing 18 address with the board. This change shall be noted on the original 19 application on file with the board.

(2) No registration or any authority conferred thereby shall be
assigned or otherwise transferred except upon such conditions as the board
may specifically designate and then only pursuant to the written consent of
the board.

24 Sec. 19. K.S.A. 65-4134 is hereby amended to read as follows: 65-25 4134. A practitioner engaged in medical practice or research, a 26 practitioner who is an advanced practice registered nurse acting in the usual course of such practitioner's practice or a mid-level practitioner 27 acting in the usual course of such mid-level practitioner's practice is not 28 29 required or compelled to furnish the name or identity of a patient or 30 research subject to the board, nor may such practitioner or mid-level 31 practitioner be compelled in any state or local civil, criminal, administrative, legislative or other proceedings to furnish the name or 32 33 identity of an individual that the practitioner or mid-level practitioner is 34 obligated to keep confidential.

Sec. 20. K.S.A. 2014 Supp. 65-4202 is hereby amended to read as follows: 65-4202. As used in this act: (a) "Board" means the state board of nursing.

(b) The "practice of mental health technology" means the
performance, under the direction of a physician licensed to practice
medicine and surgery or registered professional nurse, of services in caring
for and treatment of the mentally ill, emotionally disturbed, or people with
intellectual disability for compensation or personal profit, which services:
(1) Involve responsible nursing and therapeutic procedures for

patients with mental illness or intellectual disability requiring interpersonal and technical skills in the observations and recognition of symptoms and reactions of such patients, the accurate recording of such symptoms and reactions and the carrying out of treatments and medications as prescribed by a licensed physician, *a licensed advanced practice registered nurse* or a mid-level practitioner as defined in subsection (ii) of by K.S.A. 65-1626, and amendments thereto; and

8 (2) require an application of techniques and procedures that involve 9 understanding of cause and effect and the safeguarding of life and health 10 of the patient and others; and

(3) require the performance of duties that are necessary to facilitate
rehabilitation of the patient or are necessary in the physical, therapeutic
and psychiatric care of the patient and require close work with persons
licensed to practice medicine and surgery, psychiatrists, psychologists,
rehabilitation therapists, social workers, registered nurses, and other
professional personnel.

17 (c) A "licensed mental health technician" means a person who 18 lawfully practices mental health technology as defined in this act.

(d) An "approved course in mental health technology" means a
program of training and study including a basic curriculum which shall be
prescribed and approved by the board in accordance with the standards
prescribed herein, the successful completion of which shall be required
before licensure as a mental health technician, except as hereinafter
provided.

25 Sec. 21. K.S.A. 2014 Supp. 65-5402 is hereby amended to read as 26 follows: 65-5402. As used in K.S.A. 65-5401 to 65-5417, inclusive, and 27 K.S.A. 65-5418 to 65-5420, inclusive, and amendments thereto:

(a) "Board" means the state board of healing arts.

29 (b) "Practice of occupational therapy" means the therapeutic use of purposeful and meaningful occupations (goal-directed activities) to 30 31 evaluate and treat, pursuant to the referral, supervision, order or direction 32 of a physician, a licensed podiatrist, a licensed dentist, a licensed physician assistant, or a licensed advanced practice registered nurse working 33 34 pursuant to the order or direction of a person licensed to practice medicine 35 and surgery, a licensed advanced practice registered nurse, a licensed 36 chiropractor, or a licensed optometrist, individuals who have a disease or 37 disorder, impairment, activity limitation or participation restriction that interferes with their ability to function independently in daily life roles and 38 39 to promote health and wellness. Occupational therapy intervention may 40 include:

41 (1) Remediation or restoration of performance abilities that are
42 limited due to impairment in biological, physiological, psychological or
43 neurological cognitive processes;

1 (2) adaptation of tasks, process, or the environment or the teaching of 2 compensatory techniques in order to enhance performance;

3 (3) disability prevention methods and techniques that facilitate the 4 development or safe application of performance skills; and

5 (4) health promotion strategies and practices that enhance 6 performance abilities.

(c) "Occupational therapy services" include, but are not limited to:

8 (1) Evaluating, developing, improving, sustaining, or restoring skills 9 in activities of daily living (ADL), work or productive activities, including 10 instrumental activities of daily living (IADL) and play and leisure 11 activities;

(2) evaluating, developing, remediating, or restoring sensorimotor,cognitive or psychosocial components of performance;

(3) designing, fabricating, applying, or training in the use of assistive
technology or orthotic devices and training in the use of prosthetic devices;
(4) adapting environments and processes, including the application of

ergonomic principles, to enhance performance and safety in daily life roles;

19 (5) applying physical agent modalities as an adjunct to or in 20 preparation for engagement in occupations;

21 (6) evaluating and providing intervention in collaboration with the 22 client, family, caregiver or others;

(7) educating the client, family, caregiver or others in carrying outappropriate nonskilled interventions; and

(8) consulting with groups, programs, organizations or communitiesto provide population-based services.

27 (d) "Occupational therapist" means a person licensed to practice28 occupational therapy as defined in this act.

(e) "Occupational therapy assistant" means a person licensed to assist
in the practice of occupational therapy under the supervision of an
occupational therapist.

32 (f) "Person" means any individual, partnership, unincorporated 33 organization or corporation.

34 (g) "Physician" means a person licensed to practice medicine and 35 surgery.

(h) "Occupational therapy aide," "occupational therapy tech" or
"occupational therapy paraprofessional" means a person who provides
supportive services to occupational therapists and occupational therapy
assistants in accordance with K.S.A. 65-5419, and amendments thereto.

40 Sec. 22. K.S.A. 2014 Supp. 65-5418 is hereby amended to read as 41 follows: 65-5418. (a) Nothing in the occupational therapy practice act is 42 intended to limit, preclude or otherwise interfere with the practices of 43 other health care providers formally trained and licensed, registered,

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1 credentialed or certified by appropriate agencies of the state of Kansas.

2 (b) The practice of occupational therapy shall not be construed to 3 include the following:

(1) Persons rendering assistance in the case of an emergency;

(2) members of any church practicing their religious tenets;

6 (3) persons whose services are performed pursuant to the delegation 7 of and under the supervision of an occupational therapist who is licensed 8 under this act;

9 (4) any person employed as an occupational therapist or occupational 10 therapy assistant by the government of the United States or any agency 11 thereof, if such person practices occupational therapy solely under the 12 direction or control of the organization by which such person is employed;

(5) licensees under the healing arts act when licensed and practicing
in accordance with the provisions of law or persons performing services
pursuant to a delegation authorized under subsection (g) of K.S.A. 652872(g), and amendments thereto;

17 (6) dentists practicing their professions, when licensed and practicing18 in accordance with the provisions of law;

(7) nurses practicing their professions, when licensed and practicing
in accordance with the provisions of law or persons performing services
pursuant to the delegation of a licensed nurse under-subsection-(m) of
K.S.A. 65-1124(m), and amendments thereto;

(8) health care providers who have been formally trained and are
practicing in accordance with the training or have received specific
training in one or more functions included in the occupational therapy
practice act pursuant to established educational protocols, or both;

(9) any person pursuing a supervised course of study leading to a
degree or certificate in occupational therapy at an accredited or approved
educational program, if the person is designated by the title which clearly
indicates such person's status as a student or trainee;

(10) any person fulfilling the supervised fieldwork experience
 requirements as part of the experience necessary to meet the requirement
 of the occupational therapy practice act;

(11) self-care by a patient or gratuitous care by a friend or family
member who does not represent or hold oneself out to the public to be an
occupational therapist or an occupational therapy assistant;

(12) optometrists practicing their profession when licensed and
practicing in accordance with the provisions of article 15 of chapter 65 of
the Kansas Statutes Annotated, and amendments thereto;

40 (13) podiatrists practicing their profession when licensed and 41 practicing in accordance with the provisions of article 15 of chapter 65 of 42 the Kansas Statutes Annotated, and amendments thereto;

43 (14) physical therapists practicing their profession when licensed and

practicing in accordance with K.S.A. 65-2901 et seq., and amendments
 thereto;

3 (15) physician assistants practicing their profession when licensed
 4 and practicing in accordance with the physician assistant licensure act;

5 (16) athletic trainers practicing their profession when licensed and 6 practicing in accordance with the athletic trainers licensure act;

(17) manufacturers of prosthetic devices;

8 (18) any person performing occupational therapy services, if these 9 services are performed for no more than 45 days in a calendar year in 10 association with an occupational therapist licensed under the occupational therapy practice act so long as: (A) The person is registered or licensed 11 12 under the laws of another state which has licensure requirements at least as stringent as the licensure requirements of this act; or (B) the person meets 13 14 the requirements for certification as an occupational therapist registered 15 (OTR) or a certified occupational therapy assistant (COTA) established by the national board for certification in occupational therapy (NBCOT). 16

(c) Any patient monitoring, assessment or other procedures designed
to evaluate the effectiveness of prescribed occupational therapy must be
performed by or pursuant to the delegation of a licensed occupational
therapist or other health care provider.

21 (d) Education related therapy services provided by an occupational therapist to school systems or consultation regarding prevention, 22 23 ergonomics and wellness within the occupational therapy scope of practice shall not require a referral, supervision, order or direction of a physician, 24 25 an advanced practice registered nurse, a licensed podiatrist, a licensed dentist or a licensed optometrist. However, when in the course of 26 27 providing such services an occupational therapist reasonably believes that 28 an individual may have an underlying injury, illness, disease, disorder or 29 impairment, the occupational therapist shall refer the individual to a physician, an advanced practice registered nurse, a licensed podiatrist, a 30 31 licensed dentist or a licensed optometrist, as appropriate.

(e) Nothing in the occupational therapy practice act shall be construed
to permit the practice of medicine and surgery. No statute granting
authority to licensees of the state board of healing arts shall be construed
to confer authority upon occupational therapists to engage in any activity
not conferred by the occupational therapy practice act.

37 (f) This section shall be part of and supplemental to the occupational38 therapy practice act.

Sec. 23. K.S.A. 65-5502 is hereby amended to read as follows: 655502. As used in K.S.A. 65-5501 to 65-5517, inclusive and amendments
thereto:

42 (a) "Board" means the state board of healing arts.

43 (b) "Respiratory therapy" is a health care profession whose therapists

1 practice under the supervision of a qualified medical director and with the 2 prescription of a licensed physician *or an advanced practice registered* 3 *murse* providing therapy, management, rehabilitation, respiratory 4 assessment and care of patients with deficiencies and abnormalities which 5 affect the pulmonary system and associated other systems functions. The 6 duties which may be performed by a respiratory therapist include:

7 (1) Direct and indirect respiratory therapy services that are safe, 8 aseptic, preventative and restorative to the patient.

9 (2) Direct and indirect respiratory therapy services, including but not 10 limited to, the administration of pharmacological and diagnostic and 11 therapeutic agents related to respiratory therapy procedures to implement a 12 treatment, disease prevention or pulmonary rehabilitative regimen 13 prescribed by a physician *or an advanced practice registered nurse*.

14 (3) Administration of medical gases, exclusive of general anesthesia,15 aerosols, humidification and environmental control systems.

16 (4) Transcription and implementation of written or verbal orders of a 17 physician *or an advanced practice registered nurse* pertaining to the 18 practice of respiratory therapy.

19 (5) Implementation of respiratory therapy protocols as defined by the 20 medical staff of an institution or a qualified medical director or other 21 written protocol, changes in treatment pursuant to the written or verbal 22 orders of a physician *or an advanced practice registered nurse* or the 23 initiation of emergency procedures as authorized by written protocols.

(c) "Respiratory therapist" means a person who is licensed to practicerespiratory therapy as defined in this act.

26 (d) "Person" means any individual, partnership, unincorporated27 organization or corporation.

28 (e) "Physician" means a person who is licensed by the board to 29 practice medicine and surgery.

30 (f) "Qualified medical director" means the medical director of any inpatient or outpatient respiratory therapy service, department or home 31 32 care agency. The medical director shall be a physician who has interest and knowledge in the diagnosis and treatment of respiratory problems. This 33 physician shall be responsible for the quality, safety and appropriateness of 34 35 the respiratory services provided and require that respiratory therapy be 36 ordered by a physician or an advanced practice registered nurse who has 37 medical responsibility for the patient. The medical director shall be readily 38 accessible to the respiratory therapy practitioner.

39 (g) "Advanced practice registered nurse" means an advanced 40 practice registered nurse who is licensed pursuant to K.S.A. 65-1131, and 41 amendments thereto, and who has authority to prescribe drugs in 42 accordance with K.S.A. 65-1130, and amendments thereto.

43 Sec. 24. K.S.A. 2013 Supp. 65-6112, as amended by section 51 of

chapter 131 of the 2014 Session Laws of Kansas, is hereby amended to
 read as follows: 65-6112. As used in this act:

3 (a) "Administrator" means the executive director of the emergency4 medical services board.

5 (b) "Advanced emergency medical technician" means a person who 6 holds an advanced emergency medical technician certificate issued 7 pursuant to this act.

8 (c) "Advanced practice registered nurse" means an advanced practice 9 registered nurse as defined in K.S.A. 65-1113, and amendments thereto.

10 (d) "Ambulance" means any privately or publicly owned motor 11 vehicle, airplane or helicopter designed, constructed, prepared, staffed and 12 equipped for use in transporting and providing emergency care for 13 individuals who are ill or injured.

14 (e) "Ambulance service" means any organization operated for the 15 purpose of transporting sick or injured persons to or from a place where 16 medical care is furnished, whether or not such persons may be in need of 17 emergency or medical care in transit.

(f) "Attendant" means a first responder, an emergency medical
responder, emergency medical technician, emergency medical technicianintermediate, emergency medical technician-defibrillator, emergency
medical technician-intermediate/defibrillator, advanced emergency
medical technician, mobile intensive care technician or paramedic certified
pursuant to this act.

(g) "Board" means the emergency medical services board established
pursuant to K.S.A. 65-6102, and amendments thereto.

(h) "Emergency medical service" means the effective and coordinated
delivery of such care as may be required by an emergency which includes
the care and transportation of individuals by ambulance services and the
performance of authorized emergency care by a physician, advanced
practice registered nurse, professional nurse, a licensed physician assistant
or attendant.

(i) "Emergency medical technician" means a person who holds an
 emergency medical technician certificate issued pursuant to this act.

(j) "Emergency medical technician-defibrillator" means a person who
 holds an emergency medical technician-defibrillator certificate issued
 pursuant to this act.

37 (k) "Emergency medical technician-intermediate" means a person
38 who holds an emergency medical technician-intermediate certificate issued
39 pursuant to this act.

40 (l) "Emergency medical technician-intermediate/defibrillator" means
41 a person who holds both an emergency medical technician-intermediate
42 and emergency medical technician-defibrillator certificate issued pursuant
43 to this act.

(m) "Emergency medical responder" means a person who holds an emergency medical responder certificate issued pursuant to this act.

3 (n) "First responder" means a person who holds a first responder 4 certificate issued pursuant to this act.

5 (o) "Hospital" means a hospital as defined by K.S.A. 65-425, and 6 amendments thereto.

7 (p) "Instructor-coordinator" means a person who is certified under 8 this act to teach initial certification and continuing education classes.

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(q) "Medical director" means a physician.

"Medical protocols" mean written guidelines which authorize 10 (\mathbf{r}) attendants to perform certain medical procedures prior to contacting a 11 12 physician, physician assistant authorized by a physician, advanced practice 13 registered nurse-authorized-by-a-physician or professional nurse authorized by a physician. The medical protocols shall be approved by a county 14 medical society or the medical staff of a hospital to which the ambulance 15 service primarily transports patients, or if neither of the above are able or 16 17 available to approve the medical protocols, then the medical protocols shall be submitted to the medical advisory council for approval. 18

(s) "Mobile intensive care technician" means a person who holds amobile intensive care technician certificate issued pursuant to this act.

21 (t) "Municipality" means any city, county, township, fire district or 22 ambulance service district.

(u) "Nonemergency transportation" means the care and transport of a
sick or injured person under a foreseen combination of circumstances
calling for continuing care of such person. As used in this subsection,
transportation includes performance of the authorized level of services of
the attendant whether within or outside the vehicle as part of such
transportation services.

(v) "Operator" means a person or municipality who has a permit tooperate an ambulance service in the state of Kansas.

31 (w) "Paramedic" means a person who holds a paramedic certificate32 issued pursuant to this act.

(x) "Person" means an individual, a partnership, an association, a
 joint-stock company or a corporation.

(y) "Physician" means a person licensed by the state board of healingarts to practice medicine and surgery.

(z) "Physician assistant" means a person who is licensed under the
physician assistant licensure act and who is acting under the direction of a
supervising physician.

40 (aa) "Professional nurse" means a licensed professional nurse as 41 defined by K.S.A. 65-1113, and amendments thereto.

42 (bb) "Provider of training" means a corporation, partnership, 43 accredited postsecondary education institution, ambulance service, fire department, hospital or municipality that conducts training programs that
 include, but are not limited to, initial courses of instruction and continuing
 education for attendants, instructor-coordinators or training officers.

4 (cc) "Supervising physician" means supervising physician as such 5 term is defined under K.S.A. 65-28a02, and amendments thereto.

6 (dd) "Training officer" means a person who is certified pursuant to
7 this act to teach, coordinate or both, initial courses of instruction for first
8 responders or emergency medical responders and continuing education as
9 prescribed by the board.

Sec. 25. K.S.A. 2014 Supp. 65-6119 is hereby amended to read as
follows: 65-6119. (a) Notwithstanding any other provision of law, mobile
intensive care technicians may:

(1) Perform all the authorized activities identified in K.S.A. 65-6120,
65-6121, 65-6123, 65-6144, and amendments thereto;

15 (2) when voice contact or a telemetered electrocardiogram is 16 monitored by a physician, physician assistant where authorized by a 17 physician, an advanced practice registered nurse-where authorized by a 18 physician or licensed professional nurse where authorized by a physician 19 and direct communication is maintained, and upon order of such person 20 may administer such medications or procedures as may be deemed 21 necessary by a person identified in subsection (a)(2);

(3) perform, during an emergency, those activities specified in
subsection (a)(2) before contacting a person identified in subsection (a)(2)
when specifically authorized to perform such activities by medical
protocols; and

26 (4) perform, during nonemergency transportation, those activities
27 specified in this section when specifically authorized to perform such
28 activities by medical protocols.

(b) An individual who holds a valid certificate as a mobile intensive
care technician once meeting the continuing education requirements
prescribed by the rules and regulations of the board, upon application for
renewal, shall be deemed to hold a certificate as a paramedic under this
act, and such individual shall not be required to file an original application
as a paramedic for certification under this act.

(c) "Renewal" as used in subsection (b), refers to the first opportunity
that a mobile intensive care technician has to apply for renewal of a
certificate following the effective date of this act.

38 (d) Upon transition notwithstanding any other provision of law, a39 paramedic may:

40 (1) Perform all the authorized activities identified in K.S.A. 65-6120,
41 65-6121, 65-6144, and amendments thereto;

42 (2) when voice contact or a telemetered electrocardiogram is 43 monitored by a physician, physician assistant where authorized by a 1 physician or an advanced practice registered nurse where authorized by a

physician or licensed professional nurse where authorized by a physician
and direct communication is maintained, and upon order of such person,
may administer such medications or procedures as may be deemed
necessary by a person identified in subsection (d)(2);

6 (3) perform, during an emergency, those activities specified in
7 subsection (d)(2) before contacting a person identified in subsection (d)(2)
8 when specifically authorized to perform such activities by medical
9 protocols; and

10 (4) perform, during nonemergency transportation, those activities 11 specified in this section when specifically authorized to perform such 12 activities by medical protocols.

Sec. 26. K.S.A. 2014 Supp. 65-6120 is hereby amended to read as follows: 65-6120. (a) Notwithstanding any other provision of law to the contrary, an emergency medical technician-intermediate may:

16 (1) Perform any of the activities identified by K.S.A. 65-6121, and 17 amendments thereto;

18 (2) when approved by medical protocols or where voice contact by 19 radio or telephone is monitored by a physician, physician assistant where 20 authorized by a physician, advanced practice registered nurse-where-21 authorized by a physician or licensed professional nurse where authorized 22 by a physician, and direct communication is maintained, upon order of 23 such person, may perform veni-puncture for the purpose of blood sampling collection and initiation and maintenance of intravenous infusion of saline 24 25 solutions, dextrose and water solutions or ringers lactate IV solutions, 26 endotracheal intubation and administration of nebulized albuterol;

(3) perform, during an emergency, those activities specified in
subsection (a)(2) before contacting the persons identified in subsection (a)
(2) when specifically authorized to perform such activities by medical
protocols; or

(4) perform, during nonemergency transportation, those activities
specified in this section when specifically authorized to perform such
activities by medical protocols.

34 (b) An individual who holds a valid certificate as an emergency 35 medical technician-intermediate once successfully completing the board prescribed transition course, and validation of cognitive and psychomotor 36 37 competency as determined by rules and regulations of the board, may 38 apply to transition to become an advanced emergency medical technician. 39 Alternatively, upon application for renewal, such individual shall be 40 deemed to hold a certificate as an advanced emergency medical technician 41 under this act, provided such individual has completed all continuing education hour requirements inclusive of the successful completion of a 42 43 transition course and such individual shall not be required to file an original application for certification as an advanced emergency medical
 technician under this act.

3 (c) "Renewal" as used in subsection (b), refers to the first or second 4 opportunity after December 31, 2011, that an emergency medical 5 technician-intermediate has to apply for renewal of a certificate.

6 (d) Emergency medical technician-intermediates who fail to meet the transition requirements as specified may complete either the board 7 8 prescribed emergency medical technician transition course or emergency 9 medical responder transition course, provide validation of cognitive and 10 psychomotor competency and all continuing education hour requirements 11 inclusive of the successful completion of a transition course as determined 12 by rules and regulations of the board. Upon completion, such emergency 13 medical technician-intermediate may apply to transition to become an 14 emergency medical technician or an emergency medical responder, 15 depending on the transition course that was successfully completed. Alternatively, upon application for renewal of an emergency medical 16 17 technician-intermediate certificate, the applicant shall be renewed as an 18 emergency medical technician or an emergency medical responder, 19 depending on the transition course that was successfully completed. Such 20 individual shall not be required to file an original application for 21 certification as an emergency medical technician or emergency medical 22 responder.

(e) Failure to successfully complete either an advanced emergency
 medical technician transition course, an emergency medical technician
 transition course or emergency medical responder transition course will
 result in loss of certification.

(f) Upon transition, notwithstanding any other provision of law to thecontrary, an advanced emergency medical technician may:

(1) Perform any of the activities identified by K.S.A. 65-6121, andamendments thereto; and

31 (2) perform any of the following interventions, by use of the devices, 32 medications and equipment, or any combination thereof, as specifically 33 identified in rules and regulations, after successfully completing an 34 approved course of instruction, local specialized device training and 35 competency validation and when authorized by medical protocols, or upon 36 order when direct communication is maintained by radio, telephone or 37 video conference with a physician, physician assistant where authorized by 38 a physician, an advanced practice registered nurse-where authorized by a 39 physician, or licensed professional nurse where authorized by a physician 40 upon order of such a person: (A) Continuous positive airway pressure 41 devices; (B) advanced airway management; (C) referral of patient of 42 alternate medical care site based on assessment; (D) transportation of a 43 patient with a capped arterial line; (E) veni-puncture for obtaining blood

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sample; (F) initiation and maintenance of intravenous infusion or saline lock; (G) initiation of intraosseous infusion; (H) nebulized therapy; (I)

manual defibrillation and cardioversion; (J) cardiac monitoring; (K)
electrocardiogram interpretation; (L) administration of generic or trade
name medications by one or more of the following methods: (i)
Aerosolization; (ii) nebulization; (iii) intravenous; (iv) intranasal; (v)
rectal; (vi) subcutaneous; (vii) intraosseous; (viii) intramuscular; or (ix)
sublingual.

9 (g) An individual who holds a valid certificate as both an emergency 10 medical technician-intermediate and as an emergency medical technician-11 defibrillator once successfully completing the board prescribed transition 12 course, and validation of cognitive and psychomotor competency as 13 determined by rules and regulations of the board, may apply to transition to an advanced emergency medical technician. Alternatively, upon 14 15 application for renewal, such individual shall be deemed to hold a certificate as an advanced emergency medical technician under this act, 16 17 provided such individual has completed all continuing education hour 18 requirements inclusive of successful completion of a transition course, and 19 such individual shall not be required to file an original application for 20 certification as an advanced emergency medical technician under this act.

(h) "Renewal" as used in subsection (g), refers to the first or second
opportunity after December 31, 2011, that an emergency medical
technician-intermediate and emergency medical technician-defibrillator
has to apply for renewal of a certificate.

25 (i) An individual who holds both an emergency medical technicianintermediate certificate and an emergency medical technician-defibrillator 26 27 certificate, who fails to meet the transition requirements as specified may 28 complete either the board prescribed emergency medical technician 29 transition course or emergency medical responder transition course, and 30 provide validation of cognitive and psychomotor competency and all 31 continuing education hour requirements inclusive of successful completion 32 of a transition course as determined by rules and regulations of the board. 33 Upon completion, such individual may apply to transition to become an 34 emergency medical technician or emergency medical responder, depending 35 on the transition course that was successfully completed. Alternatively, 36 upon application for renewal of an emergency medical technician-37 intermediate certificate and an emergency medical technician-defibrillator 38 certificate, the applicant shall be renewed as an emergency medical 39 technician or an emergency medical responder, depending on the transition 40 course that was successfully completed. Such individual shall not be 41 required to file an original application for certification as an emergency 42 medical technician or emergency medical responder.

43 (j) Failure to successfully complete either the advanced emergency

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medical technician transition requirements, an emergency medical
 technician transition course or the emergency medical responder transition
 course will result in loss of certification.

4 Sec. 27. K.S.A. 2014 Supp. 65-6121 is hereby amended to read as 5 follows: 65-6121. (a) Notwithstanding any other provision of law to the 6 contrary, an emergency medical technician may perform any of the 7 following activities:

(1) Patient assessment and vital signs;

(2) airway maintenance including the use of:

10 (A) Oropharyngeal and nasopharyngeal airways;

11 (B) esophageal obturator airways with or without gastric suction 12 device;

13 (C) multi-lumen airway; and

14 (D) oxygen demand valves.

15 (3) Oxygen therapy;

16 (4) oropharyngeal suctioning;

17 (5) cardiopulmonary resuscitation procedures;

18 (6) control accessible bleeding;

19 (7) apply pneumatic anti-shock garment;

20 (8) manage outpatient medical emergencies;

(9) extricate patients and utilize lifting and moving techniques;

(10) manage musculoskeletal and soft tissue injuries including
 dressing and bandaging wounds or the splinting of fractures, dislocations,
 sprains or strains;

(11) use of backboards to immobilize the spine;

(12) administer activated charcoal and glucose;

(13) monitor intravenous line delivering intravenous fluids duringinterfacility transport with the following restrictions:

(A) The physician approves the transfer by an emergency medicaltechnician;

(B) no medications or nutrients have been added to the intravenousfluids; and

33 (C) the emergency medical technician may monitor, maintain and34 shut off the flow of intravenous fluid;

(14) use automated external defibrillators;

(15) administer epinephrine auto-injectors provided that:

(A) The emergency medical technician successfully completes a
 course of instruction approved by the board in the administration of
 epinephrine;

40 (B) the emergency medical technician serves with an ambulance 41 service or a first response organization that provides emergency medical 42 services; and

43 (C) the emergency medical technician is acting pursuant to medical

1 protocols;

2 (16) perform, during nonemergency transportation, those activities
3 specified in this section when specifically authorized to perform such
4 activities by medical protocols; or

5 (17) when authorized by medical protocol, assist the patient in the 6 administration of the following medications which have been prescribed 7 for that patient: Auto-injection epinephrine, sublingual nitroglycerin and 8 inhalers for asthma and emphysema.

9 (b) An individual who holds a valid certificate as an emergency 10 medical technician at the current basic level once successfully completing 11 the board prescribed transition course, and validation of cognitive and 12 psychomotor competency as determined by rules and regulations of the 13 board, may apply to transition to become an emergency medical 14 technician. Alternatively, upon application for renewal, such individual 15 shall be deemed to hold a certificate as an emergency medical technician 16 under this act, provided such individual has completed all continuing 17 education hour requirements inclusive of successful completion of a 18 transition course, and such individual shall not be required to file an 19 original application for certification as an emergency medical technician.

(c) "Renewal" as used in subsection (b), refers to the first opportunity
after December 31, 2011, that an emergency medical technician has to
apply for renewal of a certificate following the effective date of this act.

23 (d) Emergency medical technicians who fail to meet the transition 24 requirements as specified may successfully complete the board prescribed 25 emergency medical responder transition course, provide validation of 26 cognitive and psychomotor competency and all continuing education hour 27 requirements inclusive of the successful completion of a transition course 28 as determined by rules and regulations of the board. Alternatively, upon 29 application for renewal of an emergency medical technician certificate, the 30 applicant shall be deemed to hold a certificate as an emergency medical 31 responder under this act, and such individual shall not be required to file 32 an original application for certification as an emergency medical 33 responder.

(e) Failure to successfully complete either an emergency medical
 technician transition course or emergency medical responder transition
 course will result in loss of certification.

(f) Upon transition, notwithstanding any other provision of law to the contrary, an emergency medical technician may perform any activities identified in K.S.A. 65-6144, and amendments thereto, and any of the following interventions, by use of the devices, medications and equipment, or any combination thereof, after successfully completing an approved course of instruction, local specialized device training and competency validation and when authorized by medical protocols, or upon order when direct communication is maintained by radio, telephone or video
 conference is monitored by a physician, physician assistant when
 authorized by a physician, an advanced practice registered nurse-when authorized by a physician or a licensed professional nurse when authorized
 by a physician, upon order of such person:
 (1) Airway maintenance including use of:
 (A) Single lumen airways as approved by the board;

8 (B) multilumen airways;

- 9 (C) ventilator devices;
- 10 (D) forceps removal of airway obstruction;
- 11 (E) CO2 monitoring;

12 (F) airway suctioning;

- 13 (2) apply pneumatic anti-shock garment;
- 14 (3) assist with childbirth;

15 (4) monitoring urinary catheter;

- 16 (5) capillary blood sampling;
- 17 (6) cardiac monitoring;

18 (7) administration of patient assisted medications as approved by the19 board;

20 (8) administration of medications as approved by the board by 21 appropriate routes; and

(9) monitor, maintain or discontinue flow of IV line if a physicianapproves transfer by an emergency medical technician.

Sec. 28. K.S.A. 2014 Supp. 65-6123 is hereby amended to read as follows: 65-6123. (a) Notwithstanding any other provision of law to the contrary, an emergency medical technician-defibrillator may:

(1) Perform any of the activities identified in K.S.A. 65-6121, andamendments thereto;

(2) when approved by medical protocols or where voice contact by radio or telephone is monitored by a physician, physician assistant where authorized by a physician, advanced practice registered nurse—whereauthorized by a physician, or licensed professional nurse where authorized by a physician, and direct communication is maintained, upon order of such person, may perform electrocardiographic monitoring and defibrillation;

36 (3) perform, during an emergency, those activities specified in
37 subsection (b) before contacting the persons identified in subsection (b)
38 when specifically authorized to perform such activities by medical
39 protocols; or

40 (4) perform, during nonemergency transportation, those activities
41 specified in this section when specifically authorized to perform such
42 activities by medical protocols.

43 (b) An individual who holds a valid certificate as an emergency

1 medical technician-defibrillator once successfully completing an 2 emergency medical technician-intermediate, initial course of instruction and the board prescribed transition course, and validation of cognitive and 3 4 psychomotor competency as determined by rules and regulations of the 5 board, may apply to transition to become an advanced emergency medical technician. Alternatively, upon application for renewal, such individual 6 7 shall be deemed to hold a certificate as an advanced emergency medical 8 technician under this act, provided such individual has completed all 9 continuing education hour requirements inclusive of successful completion 10 of a transition course, and such individual shall not be required to file an 11 original application for certification as an advanced emergency medical 12 technician.

13 (c) "Renewal" as used in subsection (b), refers to the second 14 opportunity after December 31, 2011, that an attendant has to apply for 15 renewal of a certificate.

16 (d) Emergency medical technician-defibrillator attendants who fail to 17 meet the transition requirements as specified may complete either the 18 board prescribed emergency medical technician transition course or 19 emergency medical responder transition course, provide validation of 20 cognitive and psychomotor competency provided such individual has 21 completed all continuing education hour requirements inclusive of the 22 successful completion of a transition course as determined by rules and regulations of the board. Upon completion, such emergency medical 23 24 technician-defibrillator may apply to transition to become an emergency 25 medical technician or an emergency medical responder, depending on the transition course that was successfully completed. Alternatively, upon 26 27 application for renewal of an emergency medical technician-defibrillator 28 certificate, the applicant shall be renewed as an emergency medical 29 technician or an emergency medical responder, depending on the transition 30 course that was successfully completed. Such individual shall not be 31 required to file an original application for certification as an emergency 32 medical technician or emergency medical responder.

(e) Failure to complete either the advanced emergency medical
 technician transition requirements, an emergency medical technician
 transition course or an emergency medical responder transition course will
 result in loss of certification.

Sec. 29. K.S.A. 2013 Supp. 65-6124, as amended by section 52 of chapter 131 of the 2014 Session Laws of Kansas, is hereby amended to read as follows: 65-6124. (a) No physician, physician assistant, advanced practice registered nurse or licensed professional nurse, who gives emergency instructions to an attendant as defined by K.S.A. 65-6112, and amendments thereto, during an emergency, shall be liable for any civil damages as a result of issuing the instructions, except such damages which 1 may result from gross negligence in giving such instructions.

2 (b) No attendant as defined by K.S.A. 65-6112, and amendments 3 thereto, who renders emergency care during an emergency pursuant to 4 instructions given by a physician, an advanced practice registered nurse, 5 the supervising physician for a physician assistant, advanced practice-6 registered-nurse or licensed professional nurse shall be liable for civil 7 damages as a result of implementing such instructions, except such 8 damages which may result from gross negligence or by willful or wanton 9 acts or omissions on the part of such attendant as defined by K.S.A. 65-10 6112, and amendments thereto.

(c) No person certified as an instructor-coordinator and no training officer shall be liable for any civil damages which may result from such instructor-coordinator's or training officer's course of instruction, except such damages which may result from gross negligence or by willful or wanton acts or omissions on the part of the instructor-coordinator or training officer.

(d) No medical adviser who reviews, approves and monitors the
activities of attendants shall be liable for any civil damages as a result of
such review, approval or monitoring, except such damages which may
result from gross negligence in such review, approval or monitoring.

21 Sec. 30. K.S.A. 2014 Supp. 65-6144 is hereby amended to read as 22 follows: 65-6144. (a) A first responder may perform any of the following 23 activities:

(1) Initial scene management including, but not limited to, gaining
 access to the individual in need of emergency care, extricating, lifting and
 moving the individual;

(2) cardiopulmonary resuscitation and airway management;

(3) control of bleeding;

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29 (4) extremity splinting excluding traction splinting;

30 (5) stabilization of the condition of the individual in need of 31 emergency care;

(6) oxygen therapy;

(7) use of oropharyngeal airways;

34 (8) use of bag valve masks;

(9) use automated external defibrillators; and

36 (10) other techniques of preliminary care a first responder is trained37 to provide as approved by the board.

(b) An individual who holds a valid certificate as a first responder,
once completing the board prescribed transition course, and validation of
cognitive and psychomotor competency as determined by rules and
regulations of the board, may apply to transition to become an emergency
medical responder. Alternatively, upon application for renewal of such
certificate, such individual shall be deemed to hold a certificate as an

emergency medical responder under this act, provided such individual has
 completed all continuing education hour requirements inclusive of a
 transition course and such individual shall not be required to file an
 original application for certification as an emergency medical responder.

5 (c) "Renewal" as used in subsection (b), refers to the first opportunity 6 after December 31, 2011, that an attendant has to apply for renewal of a 7 certificate.

8 (d) First responder attendants who fail to meet the transition 9 requirements as specified will forfeit their certification.

10 (e) Upon transition, notwithstanding any other provision of law to the 11 contrary, an emergency medical responder may perform any of the 12 following interventions, by use of the devices, medications and equipment, 13 or any combination thereof, after successfully completing an approved 14 course of instruction, local specialized device training and competency 15 validation and when authorized by medical protocols, or upon order when 16 direct communication is maintained by radio, telephone or video 17 conference is monitored by a physician, physician assistant when 18 authorized by a physician, an advanced practice registered nurse-when-19 authorized by a physician or a licensed professional nurse when authorized 20 by a physician, upon order of such person; (1) Emergency vehicle 21 operations; (2) initial scene management; (3) patient assessment and 22 stabilization; (4) cardiopulmonary resuscitation and airway management; 23 (5) control of bleeding; (6) extremity splinting; (7) spinal immobilization; 24 (8) oxygen therapy; (9) use of bag-valve-mask; (10) use of automated 25 external defibrillator; (11) nebulizer therapy; (12) intramuscular injections 26 with auto-injector; (13) administration of oral glucose; (14) administration 27 of aspirin; (15) recognize and comply with advanced directives; (16) 28 insertion and maintenance of oral and nasal pharyngeal airways; (17) use 29 of blood glucose monitoring; and (18) other techniques and devices of 30 preliminary care an emergency medical responder is trained to provide as 31 approved by the board.

32 Sec. 31. K.S.A. 2014 Supp. 65-7003 is hereby amended to read as 33 follows: 65-7003. As used in K.S.A. 65-7001 through 65-7015, and 34 amendments thereto:

(a) "Act" means the Kansas chemical control act;

36 (b) "administer" means the application of a regulated chemical 37 whether by injection, inhalation, ingestion or any other means, directly 38 into the body of a patient or research subject, such administration to be 39 conducted by: (1) A practitioner, or in the practitioner's presence, by such 40 practitioner's authorized agent; or

41 (2) the patient or research subject at the direction and in the presence 42 of the practitioner;

43 (c) "agent or representative" means a person who is authorized to

receive, possess, manufacture or distribute or in any other manner control
 or has access to a regulated chemical on behalf of another person;

(d) "bureau" means the Kansas bureau of investigation;

4 (e) "department" means the Kansas department of health and 5 environment;

6 (f) "director" means the director of the Kansas bureau of 7 investigation;

8 (g) "dispense" means to deliver a regulated chemical to an ultimate 9 user, patient or research subject by, or pursuant to the lawful order of, a 10 practitioner, including the prescribing, administering, packaging, labeling 11 or compounding necessary to prepare the regulated chemical for that 12 delivery;

(h) "distribute" means to deliver other than by administering ordispensing a regulated chemical;

(i) "manufacture" means to produce, prepare, propagate, compound,
convert or process a regulated chemical directly or indirectly, by extraction
from substances of natural origin, chemical synthesis or a combination of
extraction and chemical synthesis, and includes packaging or repackaging
of the substance or labeling or relabeling of its container. The term
excludes the preparation, compounding, packaging, repackaging, labeling
or relabeling of a regulated chemical:

(1) By a practitioner as an incident to the practitioner's administering
 or dispensing of a regulated chemical in the course of the practitioner's
 professional practice; or

(2) by a practitioner, or by the practitioner's authorized agent under
the practitioner's supervision, for the purpose of, or as an incident to
research, teaching or chemical analysis and not for sale;

(j) "person" means individual, corporation, business trust, estate,
trust, partnership, association, joint venture, government, governmental
subdivision or agency, or any other legal or commercial entity;

31 "practitioner" means a person licensed to practice medicine and (k) 32 surgery, pharmacist, dentist, podiatrist, veterinarian, optometrist, advanced 33 practice registered nurse who is licensed pursuant to K.S.A. 65-1131, and 34 amendments thereto, and who has authority to prescribe drugs in 35 accordance with K.S.A. 65-1130, and amendments thereto, or scientific 36 investigator or other person authorized by law to use a controlled 37 substance in teaching or chemical analysis or to conduct research with 38 respect to a controlled substance;

(1) "regulated chemical" means a chemical that is used directly or indirectly to manufacture a controlled substance or other regulated chemical, or is used as a controlled substance analog, in violation of the state controlled substances act or this act. The fact that a chemical may be used for a purpose other than the manufacturing of a controlled substance

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1 or regulated chemical does not exempt it from the provisions of this act.

2 Regulated chemical includes:

3 (1) Acetic anhydride (CAS No. 108-24-7);

4 (2) benzaldehyde (CAS No. 100-52-7);

5 (3) benzyl chloride (CAS No. 100-44-7);

6 (4) benzyl cyanide (CAS No. 140-29-4);

(5) diethylamine and its salts (CAS No. 109-89-7);

8 (6) ephedrine, its salts, optical isomers and salts of optical isomers 9 (CAS No. 299-42-3), except products containing ephedra or ma huang, 10 which do not contain any chemically synthesized ephedrine alkaloids, and

11 are lawfully marketed as dietary supplements under federal law;

12 (7) hydriodic acid (CAS No. 10034-85-2);

13 (8) iodine (CAS No. 7553-56-2);

14 (9) lithium (CAS No. 7439-93-2);

15 (10) methylamine and its salts (CAS No. 74-89-5);

16 (11) nitroethane (CAS No. 79-24-3);

(12) chloroephedrine, its salts, optical isomers, and salts of optical
isomers (CAS No. 30572-91-9);

(13) phenylacetic acid, its esters and salts (CAS No. 103-82-2);

20 (14) phenylpropanolamine, its salts, optical isomers, and salts of 21 optical isomers (CAS No. 14838-15-4);

22 (15) piperidine and its salts (CAS No. 110-89-4);

(16) pseudoephedrine, its salts, optical isomers, and salts of optical
isomers (CAS No. 90-82-4);

25 (17) red phosphorous (CAS No. 7723-14-0);

26 (18) sodium (CAS No. 7440-23-5); and

(19) thionylchloride (CAS No. 7719-09-7);

(20) gamma butyrolactone (GBL), including butyrolactone;
butyrolactone gamma; 4-butyrolactone; 2(3H)-furanone dihydro; dihydro2(3H)-furanone; tetrahydro-2-furanone; 1,2-butanolide; 1,4-butanolide; 4butanolide; gamma-hydroxybutyric acid lactone; 3-hydroxybutyric acid
lactone and 4-hydroxybutanoic acid lactone; CAS No. 96-48-0; and

33 (21) 1,4 butanediol, including butanediol; butane-1,4-diol; 1,434 butylene glycol; butylene glycol; 1,4-dihydroxybutane; 1,4-tetramethylene
35 glycol; tetramethylene glycol; tetramethylene 1,4-diol; CAS No. 110-63-4;

(m) "regulated chemical distributor" means any person subject to the
provisions of the Kansas chemical control act who manufactures or
distributes a regulated chemical;

(n) "regulated chemical retailer" means any person who sells
 regulated chemicals directly to the public;

41 (o) "regulated chemical transaction" means the manufacture of a
42 regulated chemical or the distribution, sale, exchange or other transfer of a
43 regulated chemical within or into the state or from this state into another

1 state; and

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(p) "secretary" means the secretary of health and environment.

3 Sec. 32. K.S.A. 2014 Supp. 65-7302 is hereby amended to read as 4 follows: 65-7302. As used in this act:

(a) "Board" means the state board of healing arts.

6 (b) "Ionizing radiation" means x-rays, gamma rays, alpha and beta 7 particles, high speed electrons, protons, neutrons and other nuclear 8 particles capable of producing ions directly or indirectly in its passage 9 through matter.

10 (c) "License" means a certificate issued by the board authorizing the 11 licensee to perform radiologic technology procedures on humans for 12 diagnostic or therapeutic purposes.

(d) "Licensed practitioner" means a person licensed to practice
 medicine and surgery, dentistry, podiatry-or, chiropractic or advanced
 practice registered nursing in this state.

16 (e) "Licensure" and "licensing" mean a method of regulation by
17 which the state grants permission to persons who meet predetermined
18 qualifications to engage in a health related occupation or profession.

(f) "Nuclear medicine technologist" means a person who uses radiopharmaceutical agents on humans for diagnostic or therapeutic purposes.

(g) "Nuclear medicine technology" means the use of radio nuclides on
 human beings for diagnostic or therapeutic purposes.

(h) "Radiation therapist" means a person who applies radiation tohumans for therapeutic purposes.

(i) "Radiation therapy" means the use of any radiation procedure or
article intended for the cure, mitigation or prevention of disease in
humans.

(j) "Radiographer" means a person who applies radiation to humansfor diagnostic purposes.

30 (k) "Radiography" means the use of ionizing radiation on human31 beings for diagnostic purposes.

32 (1) "Radiologic technologist" means any person who is a33 radiographer, radiation therapist or nuclear medicine technologist.

(m) "Radiologic technology" means the use of radioactive substance or equipment emitting or detecting ionizing radiation on humans for diagnostic or therapeutic purposes upon prescription of a licensed practitioner. The term includes the practice of radiography, nuclear medicine technology and radiation therapy, but does not include echocardiography, diagnostic sonography and magnetic resonance imaging.

41 (n) This section shall take effect on and after July 1, 2005.

42 Sec. 33. K.S.A. 2014 Supp. 72-5213 is hereby amended to read as 43 follows: 72-5213. (a) Every board of education shall require all employees

1 of the school district, who come in regular contact with the pupils of the 2 school district, to submit a certification of health on a form prescribed by 3 the secretary of health and environment and signed by a person licensed to 4 practice medicine and surgery under the laws of any state, or by a person 5 who is licensed as a physician assistant under the laws of this state when 6 such person is working at the direction of or in collaboration with a person 7 licensed to practice medicine and surgery, or by a person holding a license 8 to practice as an advanced practice registered nurse under the laws of this 9 state-when such person is working at the direction of or in collaboration-10 with a person licensed to practice medicine and surgery. The certification 11 shall include a statement that there is no evidence of *a* physical condition 12 that would conflict with the health, safety, or welfare of the pupils; and 13 that freedom from tuberculosis has been established by chest x-ray or 14 negative tuberculin skin test. If at any time there is reasonable cause to 15 believe that any such employee of the school district is suffering from an 16 illness detrimental to the health of the pupils, the school board may require 17 a new certification of health.

18 (b) Upon presentation of a signed statement by the employee of a 19 school district, to whom the provisions of subsection (a) apply, that the 20 employee is an adherent of a religious denomination whose religious 21 teachings are opposed to physical examinations, the employee shall be 22 permitted to submit, as an alternative to the certification of health required 23 under subsection (a), certification signed by a person licensed to practice medicine and surgery under the laws of any state, or by a person who is 24 25 licensed as a physician assistant under the laws of this state when such 26 person is working at the direction of or in collaboration with a person 27 licensed to practice medicine and surgery, or by a person holding a license 28 to practice as an advanced practice registered nurse under the laws of this 29 state-when such-person is working at the direction of or in collaboration. 30 with a person-licensed-to-practice medicine and surgery that freedom of 31 the employee from tuberculosis has been established.

32 (c) Every board of education may require persons, other than 33 employees of the school district, to submit to the same certification of 34 health requirements as are imposed upon employees of the school district 35 under the provisions of subsection (a) if such persons perform or provide 36 services to or for a school district which require such persons to come in 37 regular contact with the pupils of the school district. No such person shall 38 be required to submit a certification of health if the person presents a 39 signed statement that the person is an adherent of a religious denomination 40 whose religious teachings are opposed to physical examinations. Such 41 persons shall be permitted to submit, as an alternative to a certification of 42 health, certification signed by a person licensed to practice medicine and 43 surgery under the laws of any state, or by a person who is licensed as a

physician assistant under the laws of this state when such person is working at the direction of or in collaboration with a person licensed to practice medicine and surgery, or by a person holding a license to practice as an advanced practice registered nurse under the laws of this state-when such person is working at the direction of or in collaboration with a person licensed to practice medicine and surgery that freedom of such persons from tuberculosis has been established.

8 (d) The expense of obtaining certifications of health and certifications
9 of freedom from tuberculosis may be borne by the board of education.

10 Sec. 34. K.S.A. 2014 Supp. 75-7429 is hereby amended to read as 11 follows: 75-7429. (a) As used in this section, "medical home" means a 12 health care delivery model in which a patient establishes an ongoing 13 relationship with a physician or other personal care provider in a 14 physician-directed team, or with an advanced practice registered nurse to 15 provide comprehensive, accessible and continuous evidence-based primary 16 and preventive care, and to coordinate the patient's health care needs 17 across the health care system in order to improve quality and health 18 outcomes in a cost effective manner.

(b) The department of health and environment shall incorporate theuse of the medical home delivery system within:

(1) The Kansas program of medical assistance established in
accordance with title XIX of the federal social security act, 42 U.S.C. §
1396 et seq., and amendments thereto;

(2) the health benefits program for children established under K.S.A.
38-2001 et seq., and amendments thereto, and developed and submitted in
accordance with federal guidelines established under title XXI of the
federal social security act, section 4901 of public law 105-33, 42 U.S.C. §
1397aa et seq., and amendments thereto; and

(3) the state mediKan program.

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30 (c) The Kansas state employees health care commission established 31 under K.S.A. 75-6502, and amendments thereto, shall incorporate the use of a medical home delivery system within the state health care benefits 32 33 program as provided in K.S.A. 75-6501 through 75-6523, and amendments 34 thereto. Except that compliance with a medical home delivery system shall 35 not be required of program participants receiving treatment in accordance 36 with a religious method of healing pursuant to the provisions of K.S.A. 37 2014 Supp. 75-6501, and amendments thereto.

38 Sec. 35. K.S.A. 40-4602, 59-2976, 65-1660, 65-2892, 65-4134 and 39 65-5502 and K.S.A. 2013 Supp. 65-1626, as amended by section 4 of 40 chapter 131 of the 2014 Session Laws of Kansas, 65-4101, as amended by 41 section 50 of chapter 131 of the 2014 Session Laws of Kansas, 65-6112, as 42 amended by section 51 of chapter 131 of the 2014 Session Laws of Kansas 43 and 65-6124, as amended by section 52 of chapter 131 of the 2014 Session

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- 1 Laws of Kansas and K.S.A. 2014 Supp. 39-923, 39-1401, 39-1430, 39-
- 2 1504, 65-468, 65-507, 65-1113, 65-1130, 65-1682, 65-2837a, 65-2921, 65-
- 3 4116, 65-4202, 65-5402, 65-5418, 65-6119, 65-6120, 65-6121, 65-6123,
- 4 65-6144, 65-7003, 65-7302, 72-5213 and 75-7429 are hereby repealed.
- 5 Sec. 36. This act shall take effect and be in force from and after July
- 6 1, 2016, and its publication in the statute book.

HOUSE BILL No. 2122

By Committee on Health and Human Services

1-23

1	AN ACT concerning advanced practice registered nurses; amending
2 3	K.S.A. 40-4602, 59-2976, 65-1660, 65-2892, 65-4134 and 65-5502 and K.S.A. 2013 Supp. 65-1626, as amended by section 4 of chapter 131 of
4	the 2014 Session Laws of Kansas, 65-4101, as amended by section 50
5	of chapter 131 of the 2014 Session Laws of Kansas, 65-6112, as
6	amended by section 51 of chapter 131 of the 2014 Session Laws of
7	Kansas and 65-6124, as amended by section 52 of chapter 131 of the
8	2014 Session Laws of Kansas and K.S.A. 2014 Supp. 39-923, 39-1401,
9	39-1430, 39-1504, 65-468, 65-507, 65-1113, 65-1130, 65-1682, 65-
10	2837a, 65-2921, 65-4116, 65-4202, 65-5402, 65-5418, 65-6119, 65-
11	6120, 65-6121, 65-6123, 65-6144, 65-7003, 65-7302, 72-5213 and 75-
12	7429 and repealing the existing sections.
13	
14	Be it enacted by the Legislature of the State of Kansas:
15	Section 1. K.S.A. 2014 Supp. 65-1113 is hereby amended to read as
16	follows: 65-1113. When used in this act and the act of which this section is
17	amendatory:
18	(a) "Board" means the board of nursing.
19	(b) "Diagnosis" in the context of nursing practice means that
20	identification of and discrimination between physical and psychosocial
21	signs and symptoms essential to effective execution and management of
22	the nursing regimen and shall be construed as distinct from a medical
23	diagnosis.
24	(c) "Treatment" means the selection and performance of those
25	therapeutic measures essential to effective execution and management of
26	the nursing regimen, and any prescribed medical regimen.
27	(d) <i>Practice of nursing.</i> (1) The practice of professional nursing as
28	performed by a registered professional nurse for compensation or
29	gratuitously, except as permitted by K.S.A. 65-1124, and amendments
30	thereto, means the process in which substantial specialized knowledge
31 32	derived from the biological, physical, and behavioral sciences is applied
32 33	to: the care, diagnosis, treatment, counsel and health teaching of persons
33 34	who are experiencing changes in the normal health processes or who require assistance in the maintenance of health or the prevention or
34 35	management of illness, injury or infirmity; administration, supervision or
36	teaching of the process as defined in this section; and the execution of the
50	teaching of the process as defined in this section, and the execution of the

1 medical regimen as prescribed by a person licensed to practice medicine 2 and surgery or, a person licensed to practice dentistry or by a person 3 licensed to practice as an advanced practice registered nurse. (2) The 4 practice of nursing as a licensed practical nurse means the performance for 5 compensation or gratuitously, except as permitted by K.S.A. 65-1124, and 6 any amendments thereto, of tasks and responsibilities defined in-part (1) of 7 this subsection (d)(1) which tasks and responsibilities are based on 8 acceptable educational preparation within the framework of supportive and 9 restorative care under the direction of a registered professional nurse, a 10 person licensed to practice medicine and surgery-or, a person licensed to 11 practice dentistry or by a person licensed to practice as an advanced 12 practice registered nurse.

(e) A "professional nurse" means a person who is licensed to practice
 professional nursing as defined in-part (1) of subsection (d)-of this section(1).

(f) A "practical nurse" means a person who is licensed to practice
 practical nursing as defined in part (2) of subsection (d) of this section(2).

(g) "Advanced practice registered nurse" or "APRN" means a
professional nurse who holds a license from the board to function as a
professional nurse in an advanced role, and this advanced role shall be
defined by rules and regulations adopted by the board in accordance with
K.S.A. 65-1130, and amendments thereto.

Sec. 2. K.S.A. 2014 Supp. 65-1130 is hereby amended to read as follows: 65-1130. (a) No professional nurse shall announce or represent to the public that such person is an advanced practice registered nurse unless such professional nurse has complied with requirements established by the board and holds a valid license as an advanced practice registered nurse in accordance with the provisions of this section.

(b) On and after the effective date of this act, to be eligible for an initial advanced practice registered nurse license, an applicant shall hold and maintain a current advanced practice registered nurse certification granted by a national certifying organization recognized by the board whose certification standards are approved by the board as equal to or greater than the corresponding standards established by the board.

35 (c) The board shall establish standards and requirements for any 36 professional nurse who desires to obtain licensure as an advanced practice 37 registered nurse. Such standards and requirements shall include, but not be 38 limited to, standards and requirements relating to the education of 39 advanced practice registered nurses. The board may give such 40 examinations and secure such assistance as it deems necessary to 41 determine the qualifications of applicants.

42 (c) (d) The board shall adopt rules and regulations applicable to 43 advanced practice registered nurses which:

1 (1) Establish roles and identify titles and abbreviations of advanced 2 practice registered nurses which are consistent with *advanced* nursing 3 practice specialties recognized by the nursing profession.

4 (2) Establish education and qualifications necessary for licensure for 5 each-role of advanced practice registered nurse role established by the 6 board at a level adequate to assure the competent performance by advanced practice registered nurses of functions and procedures which 7 8 advanced practice registered nurses are authorized to perform. Advanced 9 practice registered nursing is based on knowledge and skills acquired in 10 basic nursing education, licensure as a registered nurse and graduation 11 from or completion of a master's or higher degree in one of the advanced 12 practice registered nurse roles approved by the board of nursing.

13 (3) Define the role of advanced practice registered nurses and 14 establish limitations and restrictions on such role. The board shall adopt a 15 definition of the role under this subsection (c)(3) which is consistent with 16 the education and qualifications required to obtain a license as an 17 advanced practice registered nurse, which protects the public from persons 18 performing functions and procedures as advanced practice registered 19 nurses for which they lack adequate education and qualifications and 20 which authorizes advanced practice registered nurses to perform acts 21 generally recognized by the profession of nursing as capable of being 22 performed, in a manner consistent with the public health and safety, by 23 persons with postbasic education in nursing. In defining such role the 24 board shall consider: (A) The education required for a licensure as an advanced practice registered nurse; (B) the type of nursing practice and 25 26 preparation in specialized advanced practice skills involved in each role of 27 advanced practice registered nurse established by the board; (C) the scope 28 and limitations of advanced practice nursing prescribed by national 29 advanced practice organizations; and (D) acts recognized by the nursing 30 profession as appropriate to be performed by persons with postbasic education in nursing; and (E) the certification standards established by an 31 32 accredited national organization whose certification standards are 33 approved by the board as equal to or greater than the corresponding 34 standards established under this act for obtaining authorization to 35 practice as an advanced practice registered nurse in the specific role.

(e) "Treatment" means, when used in conjunction with the practice of
an advanced practice registered nurse, planning, diagnosing, ordering
and executing of a healthcare plan including, but not limited to,
pharmacologic and non-pharmacologic interventions. This term also
includes prescribing medical devices and equipment, nutrition, and
diagnostic and supportive services including, but not limited to, home
health care, hospice, physical and occupational therapy.

43 *(f)* The practice of mursing as an advanced practice registered murse

1 means the performance for compensation or gratuitously, except as permitted by K.S.A. 65-1124, and amendments thereto, of the process in 2 3 which advanced knowledge derived from the biological, physical and 4 behavioral sciences is applied to direct and indirect care, including, but 5 not limited to, creating and executing a health care plan; nursing and 6 medical diagnosis, management, treatment and prescribing; administering 7 pharmacologic and non-pharmocologic interventions; counseling and 8 health teaching of persons who are experiencing changes in the normal 9 health processes or who require assistance in the maintenance of health; 10 or the prevention or management of illness, injury or infirmity; 11 administration, supervising or teaching within the advanced practice 12 registered nurse's role. Within the role of the advanced practice registered 13 nurse, an advanced practice registered nurse may serve as a primary care 14 provider and lead health care teams.

15 (d) (g) An advanced practice registered nurse may prescribe drugs-16 pursuant to a written protocol as authorized by a responsible physician. 17 Each written-protocol-shall-contain a precise and detailed-medical-plan of 18 eare for each classification of disease or injury for which the advanced-19 practice registered nurse is authorized to prescribe and shall specify all 20 drugs which may be prescribed by the advanced practice-registered-21 nurseAdvanced practice registered nurses are authorized to prescribe, 22 procure and administer prescription drugs and controlled substances pursuant to applicable state and federal laws. Any-written prescription 23 24 order shall include the name, address and telephone number of the 25 responsible physician advanced practice registered nurse. The advanced 26 practice registered nurse may not dispense drugs, but may request, receive 27 and sign for professional samples and may distribute professional samples 28 to patients-pursuant to a written-protocol as authorized by a responsible-29 physician. In order to prescribe controlled substances, the advanced 30 practice registered nurse shall: (1) Register with the federal drug 31 enforcement administration; and (2) notify the board of the name and 32 address-of-the-responsible-physician-or-physicians. In no-case shall the 33 scope of authority of the advanced practice registered nurse exceed the 34 normal and customary practice of the responsible physician nursing of the 35 federal drug enforcement administration registration as prescribed by 36 rules and regulations of the board. An advanced practice registered nurse 37 shall comply with the federal drug enforcement administration 38 requirements related to controlled substances. An advanced practice 39 registered nurse certified in the role of registered nurse anesthetist while 40 functioning as a registered nurse anesthetist under K.S.A. 65-1151 to 65-41 1164, inclusive, and amendments thereto, shall be subject to the provisions 42 of K.S.A. 65-1151 to 65-1164, inclusive, and amendments thereto, with 43 respect to drugs and anesthetic agents and shall not be subject to the

1 provisions of this subsection. For the purposes of this subsection,

2 "responsible physician" means a person licensed to practice medicine and

3 surgery in Kansas who has accepted responsibility for the protocol and the

4 actions of the advanced practice registered nurse when prescribing drugs.

5 (c) (h) An advanced practice registered nurse is accountable to 6 patients, the nursing profession and the board for complying with the 7 requirements of the nurse practice act, and any rules and regulations 8 adopted pursuant thereto, and is responsible for recognizing limits of 9 knowledge and experience, planning for the management of situations 10 beyond the advanced practice registered nurse's expertise and referring 11 patients to other health care professionals as appropriate.

(i) (1) The board, by rules and regulations, shall establish a program
of transition to full practice for all persons who on and after the effective
date of this act are granted initial licensure as an advanced practice
registered nurse or who have less than 2,000 hours of licensed active
practice as an advanced practice registered nurse in their initial roles.

17 (2) Advanced practice registered nurses who are subject to the
18 program of transition to full practice shall not prescribe medications
19 except as provided in this subsection.

20(3) As part of the program of transition to full practice, an advanced 21 practice registered nurse shall complete, within two years from the 22 commencement of the program by the advanced practice registered nurse, 23 a transition to full practice period of 2,000 hours while maintaining a collaborative relationship for practice and for prescribing medications 24 25 with either a licensed advanced practice registered nurse with full 26 prescriptive authority under subsection (g) or with a physician. The 27 advanced practice registered nurse shall engage in the practice of nursing 28 as an advanced practice registered nurse and may prescribe medications 29 as part of the collaborative relationship.

(4) As part of the program of transition to full practice, the board
shall specify the manner and form in which the advanced practice
registered nurse participating in the program may identify oneself
professionally and to the public.

(5) The advanced practice registered nurse shall be responsible for
completing the required documentation for the program of transition to
full practice as specified by the board.

(6) Upon the successful completion of the program of transition to
full practice, the board of nursing shall authorize the advanced practice
registered nurse to engage in the practice of advanced practice registered
nursing without the limitations of this subsection and as otherwise
authorized by law.

42 (7) The board may adopt rules and regulations necessary to carry out
43 the provisions of this subsection.

1 (8) An advanced practice registered nurse functioning in the role of 2 registered nurse anesthetist shall be subject to the provisions of K.S.A. 65-3 1151 to 65-1164, inclusive, and amendments thereto, and shall not be 4 subject to the provisions of this subsection.

5 (9) As used in this subsection, "physician" means a person licensed to 6 practice medicine and surgery.

7 (j) When a provision of law or rule and regulation requires a 8 signature, certification, verification, affidavit or endorsement by a 9 physician, that requirement may be fulfilled by a licensed advanced 10 practice registered nurse working within the scope of practice of such 11 nurse's respective role.

12 (k) The confidential relations and communications between an 13 advance practice registered nurse and the advance practice registered 14 nurse's patient are placed on the same basis as provided by law as those 15 between a physician and a physician's patient in K.S.A. 60-427, and 16 amendments thereto.

17 (1) An advanced practice registered nurse shall maintain malpractice 18 insurance coverage in effect as a condition to rendering professional 19 service as an advanced practice registered nurse in this state and shall 20 provide proof of insurance at time of licensure and renewal of license. The 21 requirements of this subsection shall not apply to an advanced practice 22 registered nurse who practices solely in an employment which results in 23 the advanced practice registered nurse being covered under the federal 24 tort claim act or state tort claims act, or who practices solely as a 25 charitable health care provider under K.S.A. 75-6102, and amendments 26 thereto, or who is serving on active duty in the military service of the 27 United States.

28 (m) As used in this section, "drug" means those articles and 29 substances defined as drugs in K.S.A. 65-1626 and 65-4101, and 30 amendments thereto.

(f) A person registered to practice as an advanced registered nurse practitioner in the state of Kansas immediately prior to the effective date of this act shall be deemed to be licensed to practice as an advanced practice registered nurse under this act and such person shall not be required to file an original application for licensure under this act. Any application for registration filed which has not been granted prior to the effective date of this act shall be processed as an application for licensure under this act.

38 Sec. 3. K.S.A. 2014 Supp. 39-923 is hereby amended to read as 39 follows: 39-923. (a) As used in this act:

(1) "Adult care home" means any nursing facility, nursing facility for
mental health, intermediate care facility for people with intellectual
disability, assisted living facility, residential health care facility, home plus,
boarding care home and adult day care facility; all of which are

classifications of adult care homes and are required to be licensed by the
 secretary for aging and disability services.

3 (2) "Nursing facility" means any place or facility operating 24 hours a 4 day, seven days a week, caring for six or more individuals not related 5 within the third degree of relationship to the administrator or owner by 6 blood or marriage and who, due to functional impairments, need skilled 7 nursing care to compensate for activities of daily living limitations.

8 (3) "Nursing facility for mental health" means any place or facility 9 operating 24 hours a day, seven days a week, caring for six or more 10 individuals not related within the third degree of relationship to the 11 administrator or owner by blood or marriage and who, due to functional 12 impairments, need skilled nursing care and special mental health services 13 to compensate for activities of daily living limitations.

(4) "Intermediate care facility for people with intellectual disability" means any place or facility operating 24 hours a day, seven days a week, caring for four or more individuals not related within the third degree of relationship to the administrator or owner by blood or marriage and who, due to functional impairments caused by intellectual disability or related conditions, need services to compensate for activities of daily living limitations.

21 "Assisted living facility" means any place or facility caring for six (5) 22 or more individuals not related within the third degree of relationship to 23 the administrator, operator or owner by blood or marriage and who, by 24 choice or due to functional impairments, may need personal care and may 25 need supervised nursing care to compensate for activities of daily living 26 limitations and in which the place or facility includes apartments for 27 residents and provides or coordinates a range of services including 28 personal care or supervised nursing care available 24 hours a day, seven 29 days a week, for the support of resident independence. The provision of 30 skilled nursing procedures to a resident in an assisted living facility is not 31 prohibited by this act. Generally, the skilled services provided in an 32 assisted living facility shall be provided on an intermittent or limited term 33 basis, or if limited in scope, a regular basis.

(6) "Residential health care facility" means any place or facility, or a 34 35 contiguous portion of a place or facility, caring for six or more individuals 36 not related within the third degree of relationship to the administrator, 37 operator or owner by blood or marriage and who, by choice or due to 38 functional impairments, may need personal care and may need supervised 39 nursing care to compensate for activities of daily living limitations and in 40 which the place or facility includes individual living units and provides or 41 coordinates personal care or supervised nursing care available on a 24-42 hour, seven-days-a-week basis for the support of resident independence. 43 The provision of skilled nursing procedures to a resident in a residential

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health care facility is not prohibited by this act. Generally, the skilled services provided in a residential health care facility shall be provided on an intermittent or limited term basis, or if limited in scope, a regular basis.

3 4 "Home plus" means any residence or facility caring for not more (7)5 than 12 individuals not related within the third degree of relationship to the 6 operator or owner by blood or marriage unless the resident in need of care 7 is approved for placement by the secretary for children and families, and 8 who, due to functional impairment, needs personal care and may need 9 supervised nursing care to compensate for activities of daily living 10 limitations. The level of care provided to residents shall be determined by preparation of the staff and rules and regulations developed by the Kansas 11 12 department for aging and disability services. An adult care home may 13 convert a portion of one wing of the facility to a not less than five-bed and 14 not more than 12-bed home plus facility provided that the home plus 15 facility remains separate from the adult care home, and each facility must 16 remain contiguous. Any home plus that provides care for more than eight 17 individuals after the effective date of this act shall adjust staffing personnel 18 and resources as necessary to meet residents' needs in order to maintain the 19 current level of nursing care standards. Personnel of any home plus who 20 provide services for residents with dementia shall be required to take 21 annual dementia care training.

(8) "Boarding care home" means any place or facility operating 24 hours a day, seven days a week, caring for not more than 10 individuals not related within the third degree of relationship to the operator or owner by blood or marriage and who, due to functional impairment, need supervision of activities of daily living but who are ambulatory and essentially capable of managing their own care and affairs.

(9) "Adult day care" means any place or facility operating less than
24 hours a day caring for individuals not related within the third degree of
relationship to the operator or owner by blood or marriage and who, due to
functional impairment, need supervision of or assistance with activities of
daily living.

(10) "Place or facility" means a building or any one or more complete
floors of a building, or any one or more complete wings of a building, or
any one or more complete wings and one or more complete floors of a
building, and the term "place or facility" may include multiple buildings.

(11) "Skilled nursing care" means services performed by or under the
immediate supervision of a registered professional nurse and additional
licensed nursing personnel. Skilled nursing includes administration of
medications and treatments as prescribed by a licensed physician, *advanced practice registered nurse* or dentist; and other nursing functions
which require substantial nursing judgment and skill based on the
knowledge and application of scientific principles.

1 (12) "Supervised nursing care" means services provided by or under 2 the guidance of a licensed nurse with initial direction for nursing 3 procedures and periodic inspection of the actual act of accomplishing the 4 procedures; administration of medications and treatments as prescribed by 5 a licensed physician, *advanced practice registered nurse* or dentist and 6 assistance of residents with the performance of activities of daily living.

7 (13) "Resident" means all individuals kept, cared for, treated, boarded 8 or otherwise accommodated in any adult care home.

9 (14) "Person" means any individual, firm, partnership, corporation, 10 company, association or joint-stock association, and the legal successor 11 thereof.

(15) "Operate an adult care home" means to own, lease, establish,
maintain, conduct the affairs of or manage an adult care home, except that
for the purposes of this definition the word "own" and the word "lease"
shall not include hospital districts, cities and counties which hold title to
an adult care home purchased or constructed through the sale of bonds.

17 (16) "Licensing agency" means the secretary for aging and disability18 services.

(17) "Skilled nursing home" means a nursing facility.

20 (18) "Intermediate nursing care home" means a nursing facility.

(19) "Apartment" means a private unit which includes, but is not
limited to, a toilet room with bathing facilities, a kitchen, sleeping, living
and storage area and a lockable door.

(20) "Individual living unit" means a private unit which includes, but
is not limited to, a toilet room with bathing facilities, sleeping, living and
storage area and a lockable door.

(21) "Operator" means an individual registered pursuant to the
operator registration act, K.S.A. 2014 Supp. 39-973 et seq., and
amendments thereto, who may be appointed by a licensee to have the
authority and responsibility to oversee an assisted living facility or
residential health care facility with fewer than 61 residents, a home plus or
adult day care facility.

(22) "Activities of daily living" means those personal, functional
activities required by an individual for continued well-being, including,
but not limited to, eating, nutrition, dressing, personal hygiene, mobility
and toileting.

37 (23) "Personal care" means care provided by staff to assist an38 individual with, or to perform activities of daily living.

39 (24) "Functional impairment" means an individual has experienced a
40 decline in physical, mental and psychosocial well-being and as a result, is
41 unable to compensate for the effects of the decline.

42 (25) "Kitchen" means a food preparation area that includes a sink,43 refrigerator and a microwave oven or stove.

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1 (26) The term "intermediate personal care home" for purposes of 2 those individuals applying for or receiving veterans' benefits means 3 residential health care facility.

4 (27) "Paid nutrition assistant" means an individual who is paid to feed 5 residents of an adult care home, or who is used under an arrangement with 6 another agency or organization, who is trained by a person meeting nurse 7 aide instructor qualifications as prescribed by 42 C.F.R. § 483.152, 42 8 C.F.R. § 483.160 and paragraph (h) of 42 C.F.R. § 483.35, and who 9 provides such assistance under the supervision of a registered professional 10 or licensed practical nurse.

(28) "Medicaid program" means the Kansas program of medical
assistance for which federal or state moneys, or any combination thereof,
are expended, or any successor federal or state, or both, health insurance
program or waiver granted thereunder.

15 (29) "Licensee" means any person or persons acting jointly or 16 severally who are licensed by the secretary for aging and disability 17 services pursuant to the adult care home licensure act, K.S.A. 39-923 et 18 seq., and amendments thereto.

(b) The term "adult care home" shall not include institutions operated 19 20 by federal or state governments, except institutions operated by the director of the Kansas commission on veterans affairs office, hospitals or 21 22 institutions for the treatment and care of psychiatric patients, child care 23 facilities, maternity centers, hotels, offices of physicians or hospices which 24 are certified to participate in the medicare program under 42 code of 25 federal regulations, chapter IV, section 418.1 et seq., and amendments thereto, and which provide services only to hospice patients. 26

(c) Nursing facilities in existence on the effective date of this act
changing licensure categories to become residential health care facilities
shall be required to provide private bathing facilities in a minimum of 20%
of the individual living units.

(d) Facilities licensed under the adult care home licensure act on the
day immediately preceding the effective date of this act shall continue to
be licensed facilities until the annual renewal date of such license and may
renew such license in the appropriate licensure category under the adult
care home licensure act subject to the payment of fees and other conditions
and limitations of such act.

(e) Nursing facilities with less than 60 beds converting a portion of
the facility to residential health care shall have the option of licensing for
residential health care for less than six individuals but not less than 10% of
the total bed count within a contiguous portion of the facility.

(f) The licensing agency may by rule and regulation change the name
of the different classes of homes when necessary to avoid confusion in
terminology and the agency may further amend, substitute, change and in a

1 manner consistent with the definitions established in this section, further

2 define and identify the specific acts and services which shall fall within the

3 respective categories of facilities so long as the above categories for adult

4 care homes are used as guidelines to define and identify the specific acts.

5 Sec. 4. K.S.A. 2014 Supp. 39-1401 is hereby amended to read as 6 follows: 39-1401. As used in this act:

(a) "Resident" means:

8 (1) Any resident, as defined by K.S.A. 39-923, and amendments 9 thereto; or

10 (2) any individual kept, cared for, treated, boarded or otherwise 11 accommodated in a medical care facility; or

(3) any individual, kept, cared for, treated, boarded or otherwise
accommodated in a state psychiatric hospital or state institution for people
with intellectual disability.

15 (b) "Adult care home" has the meaning ascribed thereto in K.S.A. 39-16 923, and amendments thereto.

(c) "In need of protective services" means that a resident is unable to
perform or obtain services which are necessary to maintain physical or
mental health, or both.

20 (d) "Services which are necessary to maintain physical and mental 21 health" include, but are not limited to, the provision of medical care for physical and mental health needs, the relocation of a resident to a facility 22 23 or institution able to offer such care, assistance in personal hygiene, food, 24 clothing, adequately heated and ventilated shelter, protection from health and safety hazards, protection from maltreatment the result of which 25 26 includes, but is not limited to, malnutrition, deprivation of necessities or 27 physical punishment and transportation necessary to secure any of the 28 above stated needs, except that this term shall not include taking such 29 person into custody without consent, except as provided in this act.

(e) "Protective services" means services provided by the state or other
governmental agency or any private organizations or individuals which are
necessary to prevent abuse, neglect or exploitation. Such protective
services shall include, but not be limited to, evaluation of the need for
services, assistance in obtaining appropriate social services and assistance
in securing medical and legal services.

(f) "Abuse" means any act or failure to act performed intentionally or
 recklessly that causes or is likely to cause harm to a resident, including:

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(1) Infliction of physical or mental injury;

39 (2) any sexual act with a resident when the resident does not consent
40 or when the other person knows or should know that the resident is
41 incapable of resisting or declining consent to the sexual act due to mental
42 deficiency or disease or due to fear of retribution or hardship;

43 (3) unreasonable use of a physical restraint, isolation or medication

1 that harms or is likely to harm a resident;

(4) unreasonable use of a physical or chemical restraint, medication
or isolation as punishment, for convenience, in conflict with a physician's *or advanced practice registered nurse's* orders or as a substitute for
treatment, except where such conduct or physical restraint is in furtherance
of the health and safety of the resident or another resident;

7 (5) a threat or menacing conduct directed toward a resident that 8 results or might reasonably be expected to result in fear or emotional or 9 mental distress to a resident;

10 (6) fiduciary abuse; or

(7) omission or deprivation by a caretaker or another person of goods
or services which are necessary to avoid physical or mental harm or
illness.

(g) "Neglect" means the failure or omission by one's self, caretaker or
another person with a duty to provide goods or services which are
reasonably necessary to ensure safety and well-being and to avoid physical
or mental harm or illness.

(h) "Caretaker" means a person or institution who has assumed the
responsibility, whether legally or not, for the care of the resident
voluntarily, by contract or by order of a court of competent jurisdiction.

(i) "Exploitation" means misappropriation of resident property or
intentionally taking unfair advantage of an adult's physical or financial
resources for another individual's personal or financial advantage by the
use of undue influence, coercion, harassment, duress, deception, false
representation or false pretense by a caretaker or another person.

(j) "Medical care facility" means a facility licensed under K.S.A. 65425 et seq., and amendments thereto, but shall not include, for purposes of
this act, a state psychiatric hospital or state institution for people with
intellectual disability, including Larned state hospital, Osawatomie state
hospital and Rainbow mental health facility, Kansas neurological institute
and Parsons state hospital and training center.

(k) "Fiduciary abuse" means a situation in which any person who is
the caretaker of, or who stands in a position of trust to, a resident, takes,
secretes, or appropriates the resident's money or property, to any use or
purpose not in the due and lawful execution of such person's trust.

36 (1) "State psychiatric hospital" means Larned state hospital,37 Osawatomie state hospital and Rainbow mental health facility.

(m) "State institution for people with intellectual disability" means
 Kansas neurological institute and Parsons state hospital and training
 center.

(n) "Report" means a description or accounting of an incident or
incidents of abuse, neglect or exploitation under this act and for the
purposes of this act shall not include any written assessment or findings.

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(o) "Law enforcement" means the public office which is vested by law with the duty to maintain public order, make arrests for crimes and investigate criminal acts, whether that duty extends to all crimes or is limited to specific crimes.

5 (p) "Legal representative" means an agent designated in a durable 6 power of attorney, power of attorney or durable power of attorney for 7 health care decisions or a court appointed guardian, conservator or trustee.

8 (q) "Financial institution" means any bank, trust company, escrow 9 company, finance company, saving institution or credit union, chartered 10 and supervised under state or federal law.

11 (r) "Governmental assistance provider" means an agency, or 12 employee of such agency, which is funded solely or in part to provide 13 assistance within the Kansas senior care act, K.S.A. 75-5926 et seq., and 14 amendments thereto, including medicaid and medicare.

No person shall be considered to be abused, neglected or exploited or in need of protective services for the sole reason that such person relies upon spiritual means through prayer alone for treatment in accordance with the tenets and practices of a recognized church or religious denomination in lieu of medical treatment.

20 Sec. 5. K.S.A. 2014 Supp. 39-1430 is hereby amended to read as 21 follows: 39-1430. As used in this act:

22 (a) "Adult" means an individual 18 years of age or older alleged to be 23 unable to protect their own interest and who is harmed or threatened with 24 harm, whether financial, mental or physical in nature, through action or 25 inaction by either another individual or through their own action or 26 inaction when: (1) Such person is residing in such person's own home, the 27 home of a family member or the home of a friend; (2) such person resides 28 in an adult family home as defined in K.S.A. 39-1501, and amendments 29 thereto; or (3) such person is receiving services through a provider of 30 community services and affiliates thereof operated or funded by the 31 Kansas department for children and families or the Kansas department for 32 aging and disability services or a residential facility licensed pursuant to 33 K.S.A. 75-3307b, and amendments thereto. Such term shall not include 34 persons to whom K.S.A. 39-1401 et seq., and amendments thereto, apply.

(b) "Abuse" means any act or failure to act performed intentionally or
 recklessly that causes or is likely to cause harm to an adult, including:

(1) Infliction of physical or mental injury;

(2) any sexual act with an adult when the adult does not consent or
when the other person knows or should know that the adult is incapable of
resisting or declining consent to the sexual act due to mental deficiency or
disease or due to fear of retribution or hardship;

42 (3) unreasonable use of a physical restraint, isolation or medication43 that harms or is likely to harm an adult;

1 (4) unreasonable use of a physical or chemical restraint, medication 2 or isolation as punishment, for convenience, in conflict with a physician's 3 or advanced practice registered nurse's orders or as a substitute for 4 treatment, except where such conduct or physical restraint is in furtherance 5 of the health and safety of the adult;

6 (5) a threat or menacing conduct directed toward an adult that results 7 or might reasonably be expected to result in fear or emotional or mental 8 distress to an adult;

(6) fiduciary abuse; or

(7) omission or deprivation by a caretaker or another person of goods
or services which are necessary to avoid physical or mental harm or
illness.

(c) "Neglect" means the failure or omission by one's self, caretaker or
another person with a duty to supply or provide goods or services which
are reasonably necessary to ensure safety and well-being and to avoid
physical or mental harm or illness.

(d) "Exploitation" means misappropriation of an adult's property or
intentionally taking unfair advantage of an adult's physical or financial
resources for another individual's personal or financial advantage by the
use of undue influence, coercion, harassment, duress, deception, false
representation or false pretense by a caretaker or another person.

(e) "Fiduciary abuse" means a situation in which any person who is
the caretaker of, or who stands in a position of trust to, an adult, takes,
secretes, or appropriates their money or property, to any use or purpose not
in the due and lawful execution of such person's trust or benefit.

(f) "In need of protective services" means that an adult is unable to
provide for or obtain services which are necessary to maintain physical or
mental health or both.

29 (g) "Services which are necessary to maintain physical or mental 30 health or both" include, but are not limited to, the provision of medical 31 care for physical and mental health needs, the relocation of an adult to a 32 facility or institution able to offer such care, assistance in personal 33 hygiene, food, clothing, adequately heated and ventilated shelter, 34 protection from health and safety hazards, protection from maltreatment 35 the result of which includes, but is not limited to, malnutrition, deprivation 36 of necessities or physical punishment and transportation necessary to 37 secure any of the above stated needs, except that this term shall not include 38 taking such person into custody without consent except as provided in this 39 act.

(h) "Protective services" means services provided by the state or other
governmental agency or by private organizations or individuals which are
necessary to prevent abuse, neglect or exploitation. Such protective
services shall include, but shall not be limited to, evaluation of the need for

services, assistance in obtaining appropriate social services, and assistance
 in securing medical and legal services.

3 (i) "Caretaker" means a person who has assumed the responsibility,
4 whether legally or not, for an adult's care or financial management or both.
5 (j) "Secretary" means the secretary for the Kansas department for

6 children and families.

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7 (k) "Report" means a description or accounting of an incident or 8 incidents of abuse, neglect or exploitation under this act and for the 9 purposes of this act shall not include any written assessment or findings.

10 (1) "Law enforcement" means the public office which is vested by law 11 with the duty to maintain public order, make arrests for crimes, investigate 12 criminal acts and file criminal charges, whether that duty extends to all 13 crimes or is limited to specific crimes.

14 (m) "Involved adult" means the adult who is the subject of a report of 15 abuse, neglect or exploitation under this act.

(n) "Legal representative," "financial institution" and "governmental
assistance provider" shall have the meanings ascribed thereto in K.S.A.
39-1401, and amendments thereto.

No person shall be considered to be abused, neglected or exploited or in need of protective services for the sole reason that such person relies upon spiritual means through prayer alone for treatment in accordance with the tenets and practices of a recognized church or religious denomination in lieu of medical treatment.

Sec. 6. K.S.A. 2014 Supp. 39-1504 is hereby amended to read as follows: 39-1504. The secretary shall administer the adult family home registration program in accordance with the following requirements:

(a) (1) The home shall meet health standards and safety regulations of
the community and the provisions of chapter 20 of the national fire
protection association, life safety code, pamphlet no. 101, 1981 edition.

30 (2) The home shall have a written plan to get persons out of the home 31 rapidly in case of fire, tornado or other emergency.

(3) No more than two clients shall be in residence at any one time.

33 (4) The home shall have adequate living and sleeping space for34 clients.

(5) Each room shall have an operable outside window.

36 (6) Electric fans shall be made available to reduce the temperature if
37 there is no air conditioning. Rooms shall be heated, lighted, ventilated and
38 available.

39 (7) Sleeping rooms shall have space for personal items.

40 (8) Each client shall have a bed which is clean and in good condition.

41 (9) Lavatory and toilet facilities shall be accessible, available and in 42 working order.

43 (10) The kitchen shall be clean with appliances in good working

1 order.

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2 (b) (1) A healthy and safe environment shall be maintained for 3 clients.

(2) There shall be a telephone in the home.

5 (3) The provider may assist a client with the taking of medications when the medication is in a labeled bottle which clearly shows a 6 physician's orders or an advanced practice registered nurse's orders and 7 when the client requires assistance because of tremor, visual impairment, 8 or similar reasons due to health conditions. The provider may assist or 9 perform for the client such physical activities which do not require daily 10 11 supervision such as assistance with eating, bathing and dressing, help with brace or walker and transferring from wheelchairs. 12

13 (4) There shall be no use of corporal punishment, restraints or14 punitive measures.

(5) The house shall be free from accumulated dirt, trash and vermin.

16 (6) Meals shall be planned and prepared for adequate nutrition, and 17 for diets if directed by a physician.

18 (c) (1) The provider shall be at least 18 years of age and in good 19 health at the time of initial application for registration. A written statement 20 must be received from a physician, nurse practitioner, or physician 21 assistant stating that the applicant and the members of the applicant's 22 household are free of any infectious or communicable disease or health 23 condition and are physically and mentally healthy. Such statements shall 24 be renewed every two years.

(2) The provider shall not be totally dependent on the income fromthe clients for support of the provider or the provider's family.

(3) A criminal conviction shall not necessarily exclude registration as
an adult family home; but an investigation thereof will be made as part of
the determination of the suitability of the home.

(4) The provider shall be responsible for supervision at all times and
shall be in charge of the home and provision of care, or shall have a
responsible person on call. Any such substitute responsible person shall
meet the same requirements as the provider.

34 (5) The provider is responsible for encouraging the client to seek and35 utilize available services when needed.

36 (6) The provider shall comply with the requirements of state and
37 federal regulations concerning civil rights and section 504 of the federal
38 rehabilitation act of 1973.

39 (7) The provider shall assure that clients have the privilege of privacy
40 as well as the right to see relatives, friends and participate in regular
41 community activities.

42 (8) The provider shall keep client information confidential. The use or 43 disclosure of any information concerning a client for any purpose is 1 prohibited except on written consent of the client or upon order of the 2 court.

3 (9) The provider shall maintain contact with an assigned social 4 worker and shall allow the secretary and authorized representatives of the 5 secretary access to the home and grounds and to the records related to 6 clients in residence.

7 (10) The provider shall inform the social worker immediately of any 8 unscheduled client absence from the home.

9 (11) The provider is responsible for helping clients maintain their 10 clothing.

11 (12) The provider shall furnish or help clients arrange for 12 transportation.

13 (13) The provider shall help a client arrange for emergency and 14 regular medical care when necessary.

15 (14) The provider shall submit any information relating to the 16 operation of the adult family home which is required by the secretary.

17 Sec. 7. K.S.A. 40-4602 is hereby amended to read as follows: 40-18 4602. As used in this act:

(a) "Emergency medical condition" means the sudden and, at the
time, unexpected onset of a health condition that requires immediate
medical attention, where failure to provide medical attention would result
in serious impairment to bodily functions or serious dysfunction of a
bodily organ or part, or would place the person's health in serious
jeopardy.

(b) "Emergency services" means ambulance services and health care
items and services furnished or required to evaluate and treat an
emergency medical condition, as directed or ordered by a physician or an
advanced practice registered nurse.

(c) "Health benefit plan" means any hospital or medical expense 29 policy, health, hospital or medical service corporation contract, a plan 30 provided by a municipal group-funded pool, a policy or agreement entered 31 into by a health insurer or a health maintenance organization contract 32 offered by an employer or any certificate issued under any such policies, 33 contracts or plans. "Health benefit plan" does not include policies or 34 certificates covering only accident, credit, dental, disability income, long-35 term care, hospital indemnity, medicare supplement, specified disease, 36 vision care, coverage issued as a supplement to liability insurance, 37 insurance arising out of a workers compensation or similar law, 38 automobile medical-payment insurance, or insurance under which benefits 39 are payable with or without regard to fault and which is statutorily 40 41 required to be contained in any liability insurance policy or equivalent 42 self-insurance.

43 (d) "Health insurer" means any insurance company, nonprofit medical

and hospital service corporation, municipal group-funded pool, fraternal
 benefit society, health maintenance organization, or any other entity which

3 offers a health benefit plan subject to the Kansas Statutes Annotated.

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(e) "Insured" means a person who is covered by a health benefit plan.

5 (f) "Participating provider" means a provider who, under a contract 6 with the health insurer or with its contractor or subcontractor, has agreed 7 to provide one or more health care services to insureds with an expectation 8 of receiving payment, other than coinsurance, copayments or deductibles, 9 directly or indirectly from the health insurer.

(g) "Provider" means a physician, *advanced practice registered nurse*,
hospital or other person which is licensed, accredited or certified to
perform specified health care services.

(h) "Provider network" means those participating providers who have
entered into a contract or agreement with a health insurer to provide items
or health care services to individuals covered by a health benefit plan
offered by such health insurer.

(i) "Physician" means a person licensed by the state board of healingarts to practice medicine and surgery.

19 Sec. 8. K.S.A. 59-2976 is hereby amended to read as follows: 59-20 2976. (a) Medications and other treatments shall be prescribed, ordered and administered only in conformity with accepted clinical practice. 21 22 Medication shall be administered only upon the written order of a 23 physician or an advanced practice registered nurse or upon a verbal order 24 noted in the patient's medical records and subsequently signed by the 25 physician or an advanced practice registered nurse. The attending physician or an advanced practice registered nurse shall review regularly 26 27 the drug regimen of each patient under the physician's or an advanced practice registered nurse's care and shall monitor any symptoms of 28 29 harmful side effects. Prescriptions for psychotropic medications shall be 30 written with a termination date not exceeding 30 days thereafter but may 31 be renewed.

32 (b) During the course of treatment the responsible physician, an 33 advanced practice registered nurse or psychologist or such person's designee shall reasonably consult with the patient, the patient's legal 34 35 guardian, or a minor patient's parent and give consideration to the views the patient, legal guardian or parent expresses concerning treatment and 36 37 any alternatives. No medication or other treatment may be administered to 38 any voluntary patient without the patient's consent, or the consent of such 39 patient's legal guardian or of such patient's parent if the patient is a minor.

40 (c) Consent for medical or surgical treatments not intended primarily 41 to treat a patient's mental disorder shall be obtained in accordance with 42 applicable law.

43 (d) Whenever any patient is receiving treatment pursuant to K.S.A.

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59-2954, 59-2958, 59-2959, 59-2964, 59-2966 or 59-2967, and 1 amendments thereto, and the treatment facility is administering to the 2 3 patient any medication or other treatment which alters the patient's mental state in such a way as to adversely affect the patient's judgment or hamper 4 5 the patient in preparing for or participating in any hearing provided for by this act, then two days prior to and during any such hearing, the treatment 6 facility may not administer such medication or other treatment unless such 7 medication or other treatment is necessary to sustain the patient's life or to 8 protect the patient or others. Prior to the hearing, a report of all such 9 medications or other treatment which have been administered to the 10 patient, along with a copy of any written consent(s) which the patient may 11 have signed, shall be submitted to the court. Counsel for the patient may 12 preliminarily examine the attending physician regarding the administration 13 of any medication to the patient within two days of the hearing with regard 14 to the affect that medication may have had upon the patient's judgment or 15 ability to prepare for or participate in the hearing. On the basis thereof, if 16 the court determines that medication or other treatment has been 17 administered which adversely affects the patient's judgment or ability to 18 prepare for or participate in the hearing, the court may grant to the patient 19 a reasonable continuance in order to allow for the patient to be better able 20 to prepare for or participate in the hearing and the court shall order that 21 such medication or other treatment be discontinued until the conclusion of 22 the hearing, unless the court finds that such medication or other treatment 23 is necessary to sustain the patient's life or to protect the patient or others, 24 in which case the court shall order that the hearing proceed. 25

(e) Whenever a patient receiving treatment pursuant to K.S.A. 59-26 2954, 59-2958, 59-2959, 59-2964, 59-2966 or 59-2967, and amendments 27 thereto, objects to taking any medication prescribed for psychiatric 28 treatment, and after full explanation of the benefits and risks of such 29 medication continues their objection, the medication may be administered 30 over the patient's objection; except that the objection shall be recorded in 31 the patient's medical record and at the same time written notice thereof 32 shall be forwarded to the medical director of the treatment facility or the 33 director's designee. Within five days after receiving such notice, excluding 34 Saturdays, Sundays and legal holidays, the medical director or designee 35 shall deliver to the patient and the patient's physician the medical director's 36 or designee's written decision concerning the administration of that 37 medication, and a copy of that decision shall be placed in the patient's 38 39 medical record.

40 (f) In no case shall experimental medication be administered without 41 the patient's consent, which consent shall be obtained in accordance with 42 subsection (a)(6) of K.S.A. 59-2978(a)(6), and amendments thereto.

43 Sec. 9. K.S.A. 2014 Supp. 65-468 is hereby amended to read as

1 follows: 65-468. As used in K.S.A. 65-468 to 65-474, inclusive, and 2 amendments thereto:

(a) "Health care provider" means any person licensed or otherwise
authorized by law to provide health care services in this state or a
professional corporation organized pursuant to the professional
corporation law of Kansas by persons who are authorized by law to form
such corporation and who are health care providers as defined by this
subsection, or an officer, employee or agent thereof, acting in the course
and scope of employment or agency.

(b) "Member" means any hospital, emergency medical service, local
health department, home health agency, adult care home, medical clinic,
mental health center or clinic or nonemergency transportation system.

(c) "Mid-level practitioner" means a physician assistant or advanced
 practice registered nurse who has entered into a written protocol with a
 rural health network physician.

16 (d) "Advanced practice registered nurse" means an advanced 17 practice registered nurse who is licensed pursuant to K.S.A. 65-1131, and 18 amendments thereto, and who has authority to prescribe drugs in 19 accordance with K.S.A. 65-1130, and amendments thereto.

20 (e) "Physician" means a person licensed to practice medicine and 21 surgery.

"Rural health network" means an alliance of members 22 (e) (f) including at least one critical access hospital and at least one other hospital 23 which has developed a comprehensive plan submitted to and approved by 24 the secretary of health and environment regarding patient referral and 25 transfer; the provision of emergency and nonemergency transportation 26 among members; the development of a network-wide emergency services 27 plan; and the development of a plan for sharing patient information and 28 services between hospital members concerning medical staff credentialing, 29 risk management, quality assurance and peer review. 30

(f) (g) "Critical access hospital" means a member of a rural health 31 32 network which makes available twenty-four hour emergency care services; provides not more than 25 acute care inpatient beds or in the case of a 33 facility with an approved swing-bed agreement a combined total of 34 extended care and acute care beds that does not exceed 25 beds; provides 35 acute inpatient care for a period that does not exceed, on an annual average 36 basis, 96 hours per patient; and provides nursing services under the 37 direction of a licensed professional nurse and continuous licensed 38 professional nursing services for not less than 24 hours of every day when 39 any bed is occupied or the facility is open to provide services for patients 40 unless an exemption is granted by the licensing agency pursuant to rules 41 and regulations. The critical access hospital may provide any services 42 otherwise required to be provided by a full-time, on-site dietician, 43

pharmacist, laboratory technician, medical technologist and radiological 1 2 technologist on a part-time, off-site basis under written agreements or arrangements with one or more providers or suppliers recognized under 3 medicare. The critical access hospital may provide inpatient services by a 4 5 physician assistant, advanced practice registered nurse or a clinical nurse specialist subject to the oversight of a physician who need not be present 6 in the facility or by an advanced practice registered murse. In addition to 7 the facility's 25 acute beds or swing beds, or both, the critical access 8 hospital may have a psychiatric unit or a rehabilitation unit, or both. Each 9 unit shall not exceed 10 beds and neither unit will count toward the 25-bed 10 limit, nor will these units be subject to the average 96-hour length of stay 11 12 restriction.

13 (g) (h) "Hospital" means a hospital other than a critical access 14 hospital which has entered into a written agreement with at least one 15 critical access hospital to form a rural health network and to provide 16 medical or administrative supporting services within the limit of the 17 hospital's capabilities.

Sec. 10. K.S.A. 2014 Supp. 65-507 is hereby amended to read as 18 follows: 65-507. (a) Each maternity center licensee shall keep a record 19 upon forms prescribed and provided by the secretary of health and 20 environment and the secretary for children and families which shall 21 include the name of every patient, together with the patient's place of 22 23 residence during the year preceding admission to the center and the name and address of the attending physician or advanced practice registered 24 nurse in the classification of a nurse-midwife. Each child care facility 25 licensee shall keep a record upon forms prescribed and provided by the 26 secretary of health and environment which shall include the name and age 27 of each child received and cared for in the facility; the name of the 28 physician who attended any sick children in the facility, together with the 29 names and addresses of the parents or guardians of such children; and such 30 other information as the secretary of health and environment or secretary 31 for children and families may require. Each maternity center licensee and 32 each child care facility licensee shall apply to and shall receive without 33 34 charge from the secretary of health and environment and the secretary for children and families forms for such records as may be required, which 35 forms shall contain a copy of this act. 36

(b) Information obtained under this section shall be confidential andshall not be made public in a manner which would identify individuals.

39 Sec. 11. K.S.A. 2013 Supp. 65-1626, as amended by section 4 of 40 chapter 131 of the 2014 Session Laws of Kansas, is hereby amended to 41 read as follows: 65-1626. For the purposes of this act:

42 (a) "Administer" means the direct application of a drug, whether by 43 injection, inhalation, ingestion or any other means, to the body of a patient

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1 or research subject by:

(1) A practitioner or pursuant to the lawful direction of a practitioner;

(2) the patient or research subject at the direction and in the presence of the practitioner; or

5 (3) a pharmacist as authorized in K.S.A. 65-1635a, and amendments 6 thereto.

7 (b) "Agent" means an authorized person who acts on behalf of or at 8 the direction of a manufacturer, distributor or dispenser but shall not 9 include a common carrier, public warehouseman or employee of the 10 carrier or warehouseman when acting in the usual and lawful course of the 11 carrier's or warehouseman's business.

(c) "Application service provider" means an entity that sells
electronic prescription or pharmacy prescription applications as a hosted
service where the entity controls access to the application and maintains
the software and records on its server.

(d) "Authorized distributor of record" means a wholesale distributor 16 17 with whom a manufacturer has established an ongoing relationship to distribute the manufacturer's prescription drug. An ongoing relationship is 18 deemed to exist between such wholesale distributor and a manufacturer 19 20 when the wholesale distributor, including any affiliated group of the wholesale distributor, as defined in section 1504 of the internal revenue 21 code, complies with any one of the following: (1) The wholesale 22 distributor has a written agreement currently in effect with the 23 manufacturer evidencing such ongoing relationship; and (2) the wholesale 24 25 distributor is listed on the manufacturer's current list of authorized distributors of record, which is updated by the manufacturer on no less 26 27 than a monthly basis.

(e) "Board" means the state board of pharmacy created by K.S.A. 741603, and amendments thereto.

(f) "Brand exchange" means the dispensing of a different drug
product of the same dosage form and strength and of the same generic
name as the brand name drug product prescribed.

(g) "Brand name" means the registered trademark name given to a
 drug product by its manufacturer, labeler or distributor.

(h) "Chain pharmacy warehouse" means a permanent physical
location for drugs or devices, or both, that acts as a central warehouse and
performs intracompany sales or transfers of prescription drugs or devices
to chain pharmacies that have the same ownership or control. Chain
pharmacy warehouses must be registered as wholesale distributors.

(i) "Co-licensee" means a pharmaceutical manufacturer that has
entered into an agreement with another pharmaceutical manufacturer to
engage in a business activity or occupation related to the manufacture or
distribution of a prescription drug and the national drug code on the drug

1 product label shall be used to determine the identity of the drug 2 manufacturer.

3 (j) "DEA" means the U.S. department of justice, drug enforcement 4 administration.

5 (k) "Deliver" or "delivery" means the actual, constructive or 6 attempted transfer from one person to another of any drug whether or not 7 an agency relationship exists.

8 (1) "Direct supervision" means the process by which the responsible 9 pharmacist shall observe and direct the activities of a pharmacy student or 10 pharmacy technician to a sufficient degree to assure that all such activities 11 are performed accurately, safely and without risk or harm to patients, and 12 complete the final check before dispensing.

(m) "Dispense" means to deliver prescription medication to the
 ultimate user or research subject by or pursuant to the lawful order of a
 practitioner or pursuant to the prescription of a mid-level practitioner.

(n) "Dispenser" means a practitioner or pharmacist who dispenses
prescription medication, or a physician assistant who has authority to
dispense prescription-only drugs in accordance with subsection (b) of
K,S.A. 65-28a08(b), and amendments thereto.

20 (o) "Distribute" means to deliver, other than by administering or 21 dispensing, any drug.

(p) "Distributor" means a person who distributes a drug.

"Drop shipment" means the sale, by a manufacturer, that 23 (a) manufacturer's co-licensee, that manufacturer's third party logistics 24 provider, or that manufacturer's exclusive distributor, of the manufacturer's 25 prescription drug, to a wholesale distributor whereby the wholesale 26 distributor takes title but not possession of such prescription drug and the 27 wholesale distributor invoices the pharmacy, the chain pharmacy 28 warehouse, or other designated person authorized by law to dispense or 29 administer such prescription drug, and the pharmacy, the chain pharmacy 30 warehouse, or other designated person authorized by law to dispense or 31 administer such prescription drug receives delivery of the prescription 32 drug directly from the manufacturer, that manufacturer's co-licensee, that 33 manufacturer's third party logistics provider, or that manufacturer's 34 exclusive distributor, of such prescription drug. Drop shipment shall be 35 part of the "normal distribution channel." 36

(r) "Drug" means: (1) Articles recognized in the official United States
pharmacopoeia, or other such official compendiums of the United States,
or official national formulary, or any supplement of any of them; (2)
articles intended for use in the diagnosis, cure, mitigation, treatment or
prevention of disease in man or other animals; (3) articles, other than food,
intended to affect the structure or any function of the body of man or other
animals; and (4) articles intended for use as a component of any articles

specified in clause (1), (2) or (3) of this subsection; but does not include devices or their components, parts or accessories, except that the term "drug" shall not include amygdalin (laetrile) or any livestock remedy, if such livestock remedy had been registered in accordance with the provisions of article 5 of chapter 47 of the Kansas Statutes Annotated, prior to its repeal.

7 (s) "Durable medical equipment" means technologically sophisticated medical devices that may be used in a residence, including the following: 8 (1) Oxygen and oxygen delivery system; (2) ventilators; (3) respiratory 9 disease management devices; (4) continuous positive airway pressure 10 (CPAP) devices; (5) electronic and computerized wheelchairs and seating 11 12 systems; (6) apnea monitors; (7) transcutaneous electrical nerve stimulator (TENS) units; (8) low air loss cutaneous pressure management devices; (9) 13 sequential compression devices; (10) feeding pumps; (11) home 14 15 phototherapy devices; (12) infusion delivery devices; (13) distribution of medical gases to end users for human consumption; (14) hospital beds; 16 17 (15) nebulizers; or (16) other similar equipment determined by the board in rules and regulations adopted by the board. 18

(t) "Electronic prescription" means an electronically prepared
 prescription that is authorized and transmitted from the prescriber to the
 pharmacy by means of electronic transmission.

(u) "Electronic prescription application" means software that is used
to create electronic prescriptions and that is intended to be installed on the
prescriber's computers and servers where access and records are controlled
by the prescriber.

(v) "Electronic signature" means a confidential personalized digital
key, code, number or other method for secure electronic data transmissions
which identifies a particular person as the source of the message,
authenticates the signatory of the message and indicates the person's
approval of the information contained in the transmission.

(w) "Electronic transmission" means the transmission of an electronic
prescription, formatted as an electronic data file, from a prescriber's
electronic prescription application to a pharmacy's computer, where the
data file is imported into the pharmacy prescription application.

35 (x) "Electronically prepared prescription" means a prescription that is 36 generated using an electronic prescription application.

(y) "Exclusive distributor" means any entity that: (1) Contracts with a manufacturer to provide or coordinate warehousing, wholesale distribution or other services on behalf of a manufacturer and who takes title to that manufacturer's prescription drug, but who does not have general responsibility to direct the sale or disposition of the manufacturer's prescription drug; (2) is registered as a wholesale distributor under the pharmacy act of the state of Kansas; and (3) to be considered part of the

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1 normal distribution channel, must be an authorized distributor of record.

2 "Facsimile transmission" or "fax transmission" means the (z)transmission of a digital image of a prescription from the prescriber or the 3 prescriber's agent to the pharmacy. "Facsimile transmission" includes, but 4 is not limited to, transmission of a written prescription between the 5 prescriber's fax machine and the pharmacy's fax machine; transmission of 6 an electronically prepared prescription from the prescriber's electronic 7 prescription application to the pharmacy's fax machine, computer or 8 9 printer; or transmission of an electronically prepared prescription from the prescriber's fax machine to the pharmacy's fax machine, computer or 10 11 printer.

(aa) "Generic name" means the established chemical name or officialname of a drug or drug product.

(bb) (1) "Institutional drug room" means any location where
prescription-only drugs are stored and from which prescription-only drugs
are administered or dispensed and which is maintained or operated for the
purpose of providing the drug needs of:

(A) Inmates of a jail or correctional institution or facility;

(B) residents of a juvenile detention facility, as defined by the revised
 Kansas code for care of children and the revised Kansas juvenile justice
 code;

(C) students of a public or private university or college, a community
college or any other institution of higher learning which is located in
Kansas;

(D) employees of a business or other employer; or

(E) persons receiving inpatient hospice services.

27 (2) "Institutional drug room" does not include:

28 (A) Any registered pharmacy;

29 (B) any office of a practitioner; or

30 (C) a location where no prescription-only drugs are dispensed and no
 31 prescription-only drugs other than individual prescriptions are stored or
 32 administered.

(cc) "Intermediary" means any technology system that receives and
 transmits an electronic prescription between the prescriber and the
 pharmacy.

(dd) "Intracompany transaction" means any transaction or transfer
between any division, subsidiary, parent or affiliated or related company
under common ownership or control of a corporate entity, or any
transaction or transfer between co-licensees of a co-licensed product.

40 (ee) "Medical care facility" shall have the meaning provided in 41 K.S.A. 65-425, and amendments thereto, except that the term shall also 42 include facilities licensed under the provisions of K.S.A. 75-3307b, and 43 amendments thereto, except community mental health centers and 1 facilities for people with intellectual disability.

(ff) "Manufacture" means the production, preparation, propagation, 2 3 compounding, conversion or processing of a drug either directly or indirectly by extraction from substances of natural origin, independently 4 by means of chemical synthesis or by a combination of extraction and 5 chemical synthesis and includes any packaging or repackaging of the drug 6 or labeling or relabeling of its container, except that this term shall not 7 include the preparation or compounding of a drug by an individual for the 8 individual's own use or the preparation, compounding, packaging or 9 10 labeling of a drug by:

(1) A practitioner or a practitioner's authorized agent incident to such
 practitioner's administering or dispensing of a drug in the course of the
 practitioner's professional practice;

(2) a practitioner, by a practitioner's authorized agent or under a
 practitioner's supervision for the purpose of, or as an incident to, research,
 teaching or chemical analysis and not for sale; or

a pharmacist or the pharmacist's authorized agent acting under the
direct supervision of the pharmacist for the purpose of, or incident to, the
dispensing of a drug by the pharmacist.

20 (gg) "Manufacturer" means a person licensed or approved by the FDA
21 to engage in the manufacture of drugs and devices.

"Mid-level practitioner" means an advanced practice registered 22 (hh) nurse-issued a license pursuant-to K.S.A. 65-1131, and amendments-23 24 thereto, who has authority to prescribe drugs pursuant to a written protocol with a responsible physician under K.S.A. 65-1130, and amendments-25 thereto, or a physician assistant licensed pursuant to the physician assistant 26 licensure act who has authority to prescribe drugs pursuant to a written 27 protocol with a supervising physician under K.S.A. 65-28a08, and 28 amendments thereto. 29

(ii) "Normal distribution channel" means a chain of custody for a
prescription-only drug that goes from a manufacturer of the prescriptiononly drug, from that manufacturer to that manufacturer's co-licensed
partner, from that manufacturer to that manufacturer's third-party logistics
provider, or from that manufacturer to that manufacturer's exclusive
distributor, directly or by drop shipment, to:

36 (1) A pharmacy to a patient or to other designated persons authorized
37 by law to dispense or administer such drug to a patient;

38 (2) a wholesale distributor to a pharmacy to a patient or other
 39 designated persons authorized by law to dispense or administer such drug
 40 to a patient;

41 (3) a wholesale distributor to a chain pharmacy warehouse to that
42 chain pharmacy warehouse's intracompany pharmacy to a patient or other
43 designated persons authorized by law to dispense or administer such drug

1 to a patient; or

2 (4) a chain pharmacy warehouse to the chain pharmacy warehouse's
3 intracompany pharmacy to a patient or other designated persons authorized
4 by law to dispense or administer such drug to a patient.

5 (jj) "Person" means individual, corporation, government, 6 governmental subdivision or agency, partnership, association or any other 7 legal entity.

8 (kk) "Pharmacist" means any natural person licensed under this act to 9 practice pharmacy.

(II) "Pharmacist-in-charge" means the pharmacist who is responsible 10 to the board for a registered establishment's compliance with the laws and 11 regulations of this state pertaining to the practice of pharmacy, 12 manufacturing of drugs and the distribution of drugs. The pharmacist-in-13 charge shall supervise such establishment on a full-time or a part-time 14 basis and perform such other duties relating to supervision of a registered 15 establishment as may be prescribed by the board by rules and regulations. 16 Nothing in this definition shall relieve other pharmacists or persons from 17 their responsibility to comply with state and federal laws and regulations. 18

(mm) "Pharmacist intern" means: (1) A student currently enrolled in
an accredited pharmacy program; (2) a graduate of an accredited pharmacy
program serving an internship; or (3) a graduate of a pharmacy program
located outside of the United States which is not accredited and who has
successfully passed equivalency examinations approved by the board.

(nn) "Pharmacy," "drugstore" or "apothecary" means premises, 24 laboratory, area or other place: (1) Where drugs are offered for sale where 25 the profession of pharmacy is practiced and where prescriptions are 26 compounded and dispensed; or (2) which has displayed upon it or within it 27 "pharmacist," "pharmaceutical chemist," "pharmacy." 28 the words "apothecary," "drugstore," "druggist," "drugs," "drug sundries" or any of 29 these words or combinations of these words or words of similar import 30 either in English or any sign containing any of these words; or (3) where 31 the characteristic symbols of pharmacy or the characteristic prescription 32 sign "Rx" may be exhibited. As used in this subsection, premises refers 33 only to the portion of any building or structure leased, used or controlled 34 by the licensee in the conduct of the business registered by the board at the 35 address for which the registration was issued. 36

(oo) "Pharmacy prescription application" means software that is used
to process prescription information, is installed on a pharmacy's computers
or servers, and is controlled by the pharmacy.

40 (pp) "Pharmacy technician" means an individual who, under the 41 direct supervision and control of a pharmacist, may perform packaging, 42 manipulative, repetitive or other nondiscretionary tasks related to the 43 processing of a prescription or medication order and who assists the

pharmacist in the performance of pharmacy related duties, but who does
 not perform duties restricted to a pharmacist.

(qq) "Practitioner" means a person licensed to practice medicine and 3 surgery, dentist, podiatrist, veterinarian, optometrist, advanced practice 4 registered nurse who is licensed pursuant to K.S.A. 65-1131, and 5 amendments thereto, and who has authority to prescribe drugs in 6 accordance with K.S.A. 65-1130, and amendments thereto, a registered 7 nurse anesthetist registered pursuant to K.S.A. 65-1154, and amendments 8 9 thereto, or scientific investigator or other person authorized by law to use a prescription-only drug in teaching or chemical analysis or to conduct 10 research with respect to a prescription-only drug. 11

12 (rr) "Preceptor" means a licensed pharmacist who possesses at least 13 two years' experience as a pharmacist and who supervises students 14 obtaining the pharmaceutical experience required by law as a condition to 15 taking the examination for licensure as a pharmacist.

(ss) "Prescriber" means a practitioner or a mid-level practitioner.

(tt) "Prescription" or "prescription order" means: (1) An order to be
filled by a pharmacist for prescription medication issued and signed by a
prescriber in the authorized course of such prescriber's professional
practice; or (2) an order transmitted to a pharmacist through word of
mouth, note, telephone or other means of communication directed by such
prescriber, regardless of whether the communication is oral, electronic,
facsimile or in printed form.

24 (uu) "Prescription medication" means any drug, including label and 25 container according to context, which is dispensed pursuant to a 26 prescription order.

(vv) "Prescription-only drug" means any drug whether intended for
use by man or animal, required by federal or state law, including 21 U.S.C.
§ 353, to be dispensed only pursuant to a written or oral prescription or
order of a practitioner or is restricted to use by practitioners only.

(ww) "Probation" means the practice or operation under a temporary license, registration or permit or a conditional license, registration or permit of a business or profession for which a license, registration or permit is granted by the board under the provisions of the pharmacy act of the state of Kansas requiring certain actions to be accomplished or certain actions not to occur before a regular license, registration or permit is issued.

38 (xx) "Professional incompetency" means:

39 (1) One or more instances involving failure to adhere to the
40 applicable standard of pharmaceutical care to a degree which constitutes
41 gross negligence, as determined by the board;

42 (2) repeated instances involving failure to adhere to the applicable 43 standard of pharmaceutical care to a degree which constitutes ordinary 1 negligence, as determined by the board; or

2 (3) a pattern of pharmacy practice or other behavior which 3 demonstrates a manifest incapacity or incompetence to practice pharmacy.

4 (yy) "Readily retrievable" means that records kept by automatic data 5 processing applications or other electronic or mechanized record-keeping 6 systems can be separated out from all other records within a reasonable 7 time not to exceed 48 hours of a request from the board or other authorized 8 agent or that hard-copy records are kept on which certain items are 9 asterisked, redlined or in some other manner visually identifiable apart 10 from other items appearing on the records.

11 (zz) "Retail dealer" means a person selling at retail nonprescription 12 drugs which are prepackaged, fully prepared by the manufacturer or 13 distributor for use by the consumer and labeled in accordance with the 14 requirements of the state and federal food, drug and cosmetic acts. Such 15 nonprescription drugs shall not include: (1) A controlled substance; (2) a 16 prescription-only drug; or (3) a drug intended for human use by 17 hypodermic injection.

18 (aaa) "Secretary" means the executive secretary of the board.

19 (bbb) "Third party logistics provider" means an entity that: (1) 20 Provides or coordinates warehousing, distribution or other services on 21 behalf of a manufacturer, but does not take title to the prescription drug or 22 have general responsibility to direct the prescription drug's sale or 23 disposition; (2) is registered as a wholesale distributor under the pharmacy 24 act of the state of Kansas; and (3) to be considered part of the normal 25 distribution channel, must also be an authorized distributor of record.

26 (ccc) "Unprofessional conduct" means:

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(1) Fraud in securing a registration or permit;

(2) intentional adulteration or mislabeling of any drug, medicine,chemical or poison;

30 (3) causing any drug, medicine, chemical or poison to be adulterated 31 or mislabeled, knowing the same to be adulterated or mislabeled;

(4) intentionally falsifying or altering records or prescriptions;

(5) unlawful possession of drugs and unlawful diversion of drugs toothers;

35 (6) willful betrayal of confidential information under K.S.A. 65-1654,
 36 and amendments thereto;

(7) conduct likely to deceive, defraud or harm the public;

38 (8) making a false or misleading statement regarding the licensee's
 39 professional practice or the efficacy or value of a drug;

40 (9) commission of any act of sexual abuse, misconduct or exploitation 41 related to the licensee's professional practice; or

42 (10) performing unnecessary tests, examinations or services which43 have no legitimate pharmaceutical purpose.

1 (dd) "Vaccination protocol" means a written protocol, agreed to by a 2 pharmacist and a person licensed to practice medicine and surgery by the 3 state board of healing arts, which establishes procedures and 4 recordkeeping and reporting requirements for administering a vaccine by 5 the pharmacist for a period of time specified therein, not to exceed two 6 years.

7 (eee) "Valid prescription order" means a prescription that is issued for 8 a legitimate medical purpose by an individual prescriber licensed by law to 9 administer and prescribe drugs and acting in the usual course of such 10 prescriber's professional practice. A prescription issued solely on the basis 11 of an internet-based questionnaire or consultation without an appropriate 12 prescriber-patient relationship is not a valid prescription order.

(fff) "Veterinary medical teaching hospital pharmacy" means any
location where prescription-only drugs are stored as part of an accredited
college of veterinary medicine and from which prescription-only drugs are
distributed for use in treatment of or administration to a nonhuman.

"Wholesale distributor" means any person engaged in 17 (ggg) 18 wholesale distribution of prescription drugs or devices in or into the state, including, but not limited to, manufacturers, repackagers, own-label 19 distributors, private-label distributors, jobbers, brokers, warehouses, 20 including manufacturers' and distributors' warehouses, co-licensees, 21 exclusive distributors, third party logistics providers, chain pharmacy 22 23 warehouses that conduct wholesale distributions, and wholesale drug warehouses, independent wholesale drug traders and retail pharmacies that 24 conduct wholesale distributions. Wholesale distributor shall not include 25 persons engaged in the sale of durable medical equipment to consumers or 26 27 patients.

(hhh) "Wholesale distribution" means the distribution of prescription drugs or devices by wholesale distributors to persons other than consumers or patients, and includes the transfer of prescription drugs by a pharmacy to another pharmacy if the total number of units of transferred drugs during a twelve-month period does not exceed 5% of the total number of all units dispensed by the pharmacy during the immediately preceding twelve-month period. Wholesale distribution does not include:

(1) The sale, purchase or trade of a prescription drug or device, an
offer to sell, purchase or trade a prescription drug or device or the
dispensing of a prescription drug or device pursuant to a prescription;

38 (2) the sale, purchase or trade of a prescription drug or device or an
39 offer to sell, purchase or trade a prescription drug or device for emergency
40 medical reasons;

41 (3) intracompany transactions, as defined in this section, unless in42 violation of own use provisions;

43 (4) the sale, purchase or trade of a prescription drug or device or an

offer to sell, purchase or trade a prescription drug or device among
 hospitals, chain pharmacy warehouses, pharmacies or other health care
 entities that are under common control;

4 (5) the sale, purchase or trade of a prescription drug or device or the 5 offer to sell, purchase or trade a prescription drug or device by a charitable 6 organization described in 503(c)(3) of the internal revenue code of 1954 to 7 a nonprofit affiliate of the organization to the extent otherwise permitted 8 by law;

9 (6) the purchase or other acquisition by a hospital or other similar 10 health care entity that is a member of a group purchasing organization of a 11 prescription drug or device for its own use from the group purchasing 12 organization or from other hospitals or similar health care entities that are 13 members of these organizations;

14 (7) the transfer of prescription drugs or devices between pharmacies15 pursuant to a centralized prescription processing agreement;

16 (8) the sale, purchase or trade of blood and blood components 17 intended for transfusion;

(9) the return of recalled, expired, damaged or otherwise non-salable
prescription drugs, when conducted by a hospital, health care entity,
pharmacy, chain pharmacy warehouse or charitable institution in
accordance with the board's rules and regulations;

(10) the sale, transfer, merger or consolidation of all or part of the
business of a retail pharmacy or pharmacies from or with another retail
pharmacy or pharmacies, whether accomplished as a purchase and sale of
stock or business assets, in accordance with the board's rules and
regulations;

27 (11) the distribution of drug samples by manufacturers' and 28 authorized distributors' representatives;

(12) the sale of minimal quantities of drugs by retail pharmacies tolicensed practitioners for office use; or

31 (13) the sale or transfer from a retail pharmacy or chain pharmacy 32 warehouse of expired, damaged, returned or recalled prescription drugs to 33 the original manufacturer, originating wholesale distributor or to a third 34 party returns processor in accordance with the board's rules and 35 regulations.

Sec. 12. K.S.A. 65-1660 is hereby amended to read as follows: 65-36 1660. (a) Except as otherwise provided in this section, the provisions of 37 the pharmacy act of the state of Kansas shall not apply to dialysates, 38 devices or drugs which are designated by the board for the purposes of this 39 section relating to treatment of a person with chronic kidney failure 40 receiving dialysis and which are prescribed or ordered by a physician, an 41 advanced practice registered nurse or a mid-level practitioner for 42 43 administration or delivery to a person with chronic kidney failure if:

1 (1) The wholesale distributor is registered with the board and lawfully 2 holds the drug or device; and

(2) the wholesale distributor: (A) Delivers the drug or device to: (i) A person with chronic kidney failure for self-administration at the person's home or specified address; (ii) a physician for administration or delivery to a person with chronic kidney failure; or (iii) a medicare approved renal dialysis facility for administering or delivering to a person with chronic kidney failure; and (B) has sufficient and qualified supervision to adequately protect the public health.

10 (b) The wholesale distributor pursuant to subsection (a) shall be 11 supervised by a pharmacist consultant pursuant to rules and regulations 12 adopted by the board.

(c) The board shall adopt such rules or regulations as are necessary toeffectuate the provisions of this section.

(d) As used in this section, "physician" means a person licensed to 15 practice medicine and surgery; "mid-level practitioner" means mid-level 16 practitioner as such term is defined-in subsection-(ii) of by K.S.A. 65-17 1626, and amendments thereto; "advanced practice registered nurse" 18 means an advanced practice registered nurse who is licensed pursuant to 19 K.S.A. 65-1131, and amendments thereto, and who has authority to 20 prescribe drugs in accordance with K.S.A. 65-1130, and amendments 21 22 thereto.

(e) This section shall be part of and supplemental to the pharmacy actof the state of Kansas.

25 Sec. 13. K.S.A. 2014 Supp. 65-1682 is hereby amended to read as 26 follows: 65-1682. As used in this act, unless the context otherwise 27 requires:

28 (a) "Board" means the state board of pharmacy.

(b) "Dispenser" means a practitioner or pharmacist who delivers a
 scheduled substance or drug of concern to an ultimate user, but does not
 include:

32 (1) A licensed hospital pharmacy that distributes such substances for33 the purpose of inpatient hospital care;

34 (2) a medical care facility as defined in K.S.A. 65-425, and 35 amendments thereto, practitioner or other authorized person who 36 administers such a substance;

(3) a registered wholesale distributor of such substances;

(4) a veterinarian licensed by the Kansas board of veterinary
 examiners who dispenses or prescribes a scheduled substance or drug of
 concern; or

41 (5) a practitioner who has been exempted from the reporting 42 requirements of this act in rules and regulations promulgated by the board.

43 (c) "Drug of concern" means any drug that demonstrates a potential

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for abuse and is designated as a drug of concern in rules and regulations
 promulgated by the board.

3 (d) "Patient" means the person who is the ultimate user of a drug for 4 whom a prescription is issued or for whom a drug is dispensed, or both.

5 (e) "Pharmacist" means an individual currently licensed by the board 6 to practice the profession of pharmacy in this state.

7 (f) "Practitioner" means a person licensed to practice medicine and 8 surgery, dentist, podiatrist, optometrist, advanced practice registered nurse 9 who is licensed pursuant to K.S.A. 65-1131, and amendments thereto, and 10 who has authority to prescribe drugs in accordance with K.S.A. 65-1130, 11 and amendments thereto, or other person authorized by law to prescribe or 12 dispense scheduled substances and drugs of concern.

(g) "Scheduled substance" means controlled substances included in
schedules II, III or IV of the schedules designated in K.S.A. 65-4107, 654109 and 65-4111, and amendments thereto, respectively, or the federal
controlled substances act (21 U.S.C. § 812).

Sec. 14. K.S.A. 2014 Supp. 65-2837a is hereby amended to read as 17 follows: 65-2837a. (a) It shall be unlawful for any person licensed to 18 practice medicine and surgery to prescribe, order, dispense, administer, 19 sell, supply or give or for any person licensed as an advanced practice 20 registered nurse or for a mid-level practitioner as defined in subsection (ii) 21 of by K.S.A. 65-1626, and amendments thereto, to prescribe, administer, 22 supply or give any amphetamine or sympathomimetic amine designated in 23 schedule II, III or IV under the uniform controlled substances act, except 24 as provided in this section. Failure to comply with this section by a 25 licensee shall constitute unprofessional conduct under K.S.A. 65-2837, 26 27 and amendments thereto.

(b) When any licensee prescribes, orders, dispenses, administers, 28 sells, supplies or gives or when any advanced practice registered nurse or 29 any mid-level practitioner as defined-in-subsection (ii) of by K.S.A. 65-30 1626, and amendments thereto, prescribes, administers, sells, supplies or 31 gives any amphetamine or sympathomimetic amine designated in schedule 32 II, III or IV under the uniform controlled substances act, the patient's 33 medical record shall adequately document the purpose for which the drug 34 is being given. Such purpose shall be restricted to one or more of the 35 36 following:

- 37 (1) The treatment of narcolepsy.
- 38 (2) The treatment of drug-induced brain dysfunction.
- 39 (3) The treatment of hyperkinesis.
- 40 (4) The differential diagnostic psychiatric evaluation of depression.
- 41 (5) The treatment of depression shown by adequate medical records
- 42 and documentation to be unresponsive to other forms of treatment.
- 43 (6) The clinical investigation of the effects of such drugs or

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4 (7) The treatment of obesity with controlled substances, as may be 5 defined by rules and regulations adopted by the board of healing arts.

(8) The treatment of any other disorder or disease for which such 6 7 drugs or compounds have been found to be safe and effective by 8 competent scientific research which findings have been generally accepted by the scientific community, in which case, the licensee before prescribing, 9 ordering, dispensing, administering, selling, supplying or giving the drug 10 or compound for a particular condition, or the licensee before authorizing 11 a mid-level practitioner to prescribe the drug or compound for a particular 12 condition, or the advanced practice registered nurse before prescribing, 13 14 ordering, administering or giving the drug for a particular condition, shall 15 obtain a determination from the board of healing arts that the drug or 16 compound can be used for that particular condition.

Sec. 15. K.S.A. 65-2892 is hereby amended to read as follows: 65-17 2892. Any physician or advanced practice registered nurse, upon 18 consultation by any person under-cighteen-(18) 18 years of age as a 19 patient, may, with the consent of such person who is hereby granted the 20 right of giving such consent, make a diagnostic examination for venereal 21 disease and prescribe for and treat such person for venereal disease 22 including prophylactic treatment for exposure to venereal disease 23 whenever such person is suspected of having a venereal disease or contact 24 25 with anyone having a venereal disease. All such examinations and treatment may be performed without the consent of, or notification to, the 26 parent, parents, guardian or any other person having custody of such 27 person. Any physician or advanced practice registered nurse examining or 28 treating such person for venereal disease may, but shall not be obligated to, 29 in accord with his opinion of what will be most beneficial for such person, 30 inform the spouse, parent, custodian, guardian or fiance of such person as 31 to the treatment given or needed without the consent of such person. Such 32 33 informing shall not constitute libel or slander or a violation of the right of privacy or privilege or otherwise subject the physician or advanced 34 practice registered nurse to any liability whatsoever. In any such case, the 35 physician or advanced practice registered nurse shall incur no civil or 36 criminal liability by reason of having made such diagnostic examination or 37 rendered such treatment, but such immunity shall not apply to any 38 negligent acts or omissions. The physician or advanced practice registered 39 murse shall incur no civil or criminal liability by reason of any adverse 40 reaction to medication administered, provided reasonable care has been 41 taken to elicit from such person under-eighteen (18) 18 years of age any 42 history of sensitivity or previous adverse reaction to the medication. 43

1 Sec. 16. K.S.A. 2014 Supp. 65-2921 is hereby amended to read as 2 follows: 65-2921. (a) Except as otherwise provided in subsection (d), a physical therapist may evaluate and initiate physical therapy treatment on 3 4 a patient without referral from a licensed health care practitioner. If treating a patient without a referral from a licensed health care practitioner 5 and the patient is not progressing toward documented treatment goals as 6 demonstrated by objective, measurable or functional improvement, or any 7 8 combination thereof, after 10 patient visits or in a period of 15 business 9 days from the initial treatment visits following the initial evaluation visit, 10 the physical therapist shall obtain a referral from an appropriate licensed 11 health care practitioner prior to continuing treatment.

(b) Physical therapists may provide, without a referral, services to: (1)
Employees solely for the purpose of education and instruction related to
workplace injury prevention; or (2) the public for the purpose of fitness,
health promotion and education.

16 (c) Physical therapists may provide services without a referral to 17 special education students who need physical therapy services to fulfill the 18 provisions of their individualized education plan (IEP) or individualized 19 family service plan (IFSP).

(d) Nothing in this section shall be construed to prevent a hospital or
ambulatory surgical center from requiring a physician order or referral for
physical therapy services for a patient currently being treated in such
facility.

(e) When a patient self-refers to a physical therapist pursuant to this
section, the physical therapist, prior to commencing treatment, shall
provide written notice to the patient that a physical therapy diagnosis is not
a medical diagnosis by a physician.

(f) Physical therapists shall perform wound debridement services only
after approval by a person licensed to practice medicine and surgery or
other licensed health care practitioner in appropriately related cases.

(g) As used in this section, "licensed health care practitioner" means a person licensed to practice medicine and surgery, a licensed podiatrist, a licensed physician assistant—or—a licensed advanced practice registerednurse working pursuant to the order or direction of a person licensed to practice medicine and surgery, a licensed chiropractor, a licensed dentist or, a licensed optometrist or a licensed advanced practice registered nurse in appropriately related cases.

38 Sec. 17. K.S.A. 2013 Supp. 65-4101, as amended by section 50 of 39 chapter 131 of the 2014 Session Laws of Kansas, is hereby amended to 40 read as follows: 65-4101. As used in this act: (a) "Administer" means the 41 direct application of a controlled substance, whether by injection, 42 inhalation, ingestion or any other means, to the body of a patient or 43 research subject by:

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1 (1) A practitioner or pursuant to the lawful direction of a practitioner; 2 or

3 (2) the patient or research subject at the direction and in the presence 4 of the practitioner.

5 (b) "Agent" means an authorized person who acts on behalf of or at 6 the direction of a manufacturer, distributor or dispenser. It does not include 7 a common carrier, public warehouseman or employee of the carrier or 8 warehouseman.

9 (c) "Application service provider" means an entity that sells 10 electronic prescription or pharmacy prescription applications as a hosted 11 service where the entity controls access to the application and maintains 12 the software and records on its server.

(d) "Board" means the state board of pharmacy.

(e) "Bureau" means the bureau of narcotics and dangerous drugs,United States department of justice, or its successor agency.

(f) "Controlled substance" means any drug, substance or immediate
precursor included in any of the schedules designated in K.S.A. 65-4105,
65-4107, 65-4109, 65-4111 and 65-4113, and amendments thereto.

19 (g) (1) "Controlled substance analog" means a substance that is 20 intended for human consumption, and:

(A) The chemical structure of which is substantially similar to the
chemical structure of a controlled substance listed in or added to the
schedules designated in K.S.A. 65-4105 or 65-4107, and amendments
thereto;

(B) which has a stimulant, depressant or hallucinogenic effect on the
central nervous system substantially similar to the stimulant, depressant or
hallucinogenic effect on the central nervous system of a controlled
substance included in the schedules designated in K.S.A. 65-4105 or 654107, and amendments thereto; or

30 (C) with respect to a particular individual, which such individual 31 represents or intends to have a stimulant, depressant or hallucinogenic 32 effect on the central nervous system substantially similar to the stimulant, 33 depressant or hallucinogenic effect on the central nervous system of a 34 controlled substance included in the schedules designated in K.S.A. 65-35 4105 or 65-4107, and amendments thereto.

(2) "Controlled substance analog" does not include:

37 (A) A controlled substance;

(B) a substance for which there is an approved new drug application;or

40 (C) a substance with respect to which an exemption is in effect for 41 investigational use by a particular person under section 505 of the federal 42 food, drug and cosmetic act, 21 U.S.C. § 355, to the extent conduct with

43 respect to the substance is permitted by the exemption.

1 (h) "Counterfeit substance" means a controlled substance which, or 2 the container or labeling of which, without authorization bears the 3 trademark, trade name or other identifying mark, imprint, number or 4 device or any likeness thereof of a manufacturer, distributor or dispenser 5 other than the person who in fact manufactured, distributed or dispensed 6 the substance.

7 (i) "Cultivate" means the planting or promotion of growth of five or 8 more plants which contain or can produce controlled substances.

9 (j) "DEA" means the U.S. department of justice, drug enforcement 10 administration.

(k) "Deliver" or "delivery" means the actual, constructive or
attempted transfer from one person to another of a controlled substance,
whether or not there is an agency relationship.

(1) "Dispense" means to deliver a controlled substance to an ultimate
user or research subject by or pursuant to the lawful order of a practitioner,
including the packaging, labeling or compounding necessary to prepare the
substance for that delivery, or pursuant to the prescription of a mid-level
practitioner.

(m) "Dispenser" means a practitioner or pharmacist who dispenses, or
a physician assistant who has authority to dispense prescription-only drugs
in accordance with subsection (b) of K.S.A. 65-28a08(b), and amendments
thereto.

23 (n) "Distribute" means to deliver other than by administering or24 dispensing a controlled substance.

(o) "Distributor" means a person who distributes.

(p) "Drug" means: (1) Substances recognized as drugs in the official 26 United States pharmacopoeia, official homeopathic pharmacopoeia of the 27 28 United States or official national formulary or any supplement to any of 29 them; (2) substances intended for use in the diagnosis, cure, mitigation, 30 treatment or prevention of disease in man or animals; (3) substances (other 31 than food) intended to affect the structure or any function of the body of man or animals; and (4) substances intended for use as a component of any 32 33 article specified in clause (1), (2) or (3) of this subsection (p)(1), (2) or (3). It does not include devices or their components, parts or accessories. 34

(q) "Immediate precursor" means a substance which the board has
found to be and by rule and regulation designates as being the principal
compound commonly used or produced primarily for use and which is an
immediate chemical intermediary used or likely to be used in the
manufacture of a controlled substance, the control of which is necessary to
prevent, curtail or limit manufacture.

41 (r) "Electronic prescription" means an electronically prepared
42 prescription that is authorized and transmitted from the prescriber to the
43 pharmacy by means of electronic transmission.

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1 (s) "Electronic prescription application" means software that is used 2 to create electronic prescriptions and that is intended to be installed on the 3 prescriber's computers and servers where access and records are controlled 4 by the prescriber.

5 (t) "Electronic signature" means a confidential personalized digital 6 key, code, number or other method for secure electronic data transmissions 7 which identifies a particular person as the source of the message, 8 authenticates the signatory of the message and indicates the person's 9 approval of the information contained in the transmission.

10 (u) "Electronic transmission" means the transmission of an electronic 11 prescription, formatted as an electronic data file, from a prescriber's 12 electronic prescription application to a pharmacy's computer, where the 13 data file is imported into the pharmacy prescription application.

(v) "Electronically prepared prescription" means a prescription that isgenerated using an electronic prescription application.

(w) "Facsimile transmission" or "fax transmission" means the 16 transmission of a digital image of a prescription from the prescriber or the 17 prescriber's agent to the pharmacy. "Facsimile transmission" includes, but 18 is not limited to, transmission of a written prescription between the 19 prescriber's fax machine and the pharmacy's fax machine; transmission of 20 an electronically prepared prescription from the prescriber's electronic 21 prescription application to the pharmacy's fax machine, computer or 22 23 printer; or transmission of an electronically prepared prescription from the prescriber's fax machine to the pharmacy's fax machine, computer or 24 25 printer.

26 (x) "Intermediary" means any technology system that receives and
 27 transmits an electronic prescription between the prescriber and the
 28 pharmacy.

(y) "Isomer" means all enantiomers and diastereomers.

"Manufacture" means the production, preparation, propagation, 30 (z)31 compounding, conversion or processing of a controlled substance either directly or indirectly or by extraction from substances of natural origin or 32 independently by means of chemical synthesis or by a combination of 33 34 extraction and chemical synthesis and includes any packaging or repackaging of the substance or labeling or relabeling of its container, 35 except that this term does not include the preparation or compounding of a 36 controlled substance by an individual for the individual's own lawful use 37 38 or the preparation, compounding, packaging or labeling of a controlled 39 substance:

40 (1) By a practitioner or the practitioner's agent pursuant to a lawful
41 order of a practitioner as an incident to the practitioner's administering or
42 dispensing of a controlled substance in the course of the practitioner's
43 professional practice; or

1 (2) by a practitioner or by the practitioner's authorized agent under 2 such practitioner's supervision for the purpose of or as an incident to 3 research, teaching or chemical analysis or by a pharmacist or medical care 4 facility as an incident to dispensing of a controlled substance.

(aa) "Marijuana" means all parts of all varieties of the plant Cannabis 5 whether growing or not, the seeds thereof, the resin extracted from any 6 7 part of the plant and every compound, manufacture, salt, derivative, mixture or preparation of the plant, its seeds or resin. It does not include 8 9 the mature stalks of the plant, fiber produced from the stalks, oil or cake made from the seeds of the plant, any other compound, manufacture, salt, 10 derivative, mixture or preparation of the mature stalks, except the resin 11 extracted therefrom, fiber, oil, or cake or the sterilized seed of the plant 12 which is incapable of germination. 13

14 (bb) "Medical care facility" shall have the meaning ascribed to that 15 term in K.S.A. 65-425, and amendments thereto.

(cc) "Mid-level practitioner" means an advanced practice registered 16 nurse issued a license pursuant to K.S.A. 65-1131, and amendments 17 18 thereto, who has authority to prescribe drugs pursuant to a written protocol with a responsible physician under K.S.A. 65-1130, and amendments-19 thereto, or a physician assistant licensed under the physician assistant 20 licensure act who has authority to prescribe drugs pursuant to a written 21 protocol with a supervising physician under K.S.A. 65-28a08, and 22 23 amendments thereto.

(dd) "Narcotic drug" means any of the following whether produced
directly or indirectly by extraction from substances of vegetable origin or
independently by means of chemical synthesis or by a combination of
extraction and chemical synthesis:

28 (1) Opium and opiate and any salt, compound, derivative or 29 preparation of opium or opiate;

30 (2) any salt, compound, isomer, derivative or preparation thereof 31 which is chemically equivalent or identical with any of the substances 32 referred to in-clause *paragraph* (1) but not including the isoquinoline 33 alkaloids of opium;

34 (3) opium poppy and poppy straw;

(4) coca leaves and any salt, compound, derivative or preparation of
coca leaves, and any salt, compound, isomer, derivative or preparation
thereof which is chemically equivalent or identical with any of these
substances, but not including decocainized coca leaves or extractions of
coca leaves which do not contain cocaine or ecgonine.

40 (ee) "Opiate" means any substance having an addiction-forming or 41 addiction-sustaining liability similar to morphine or being capable of 42 conversion into a drug having addiction-forming or addiction-sustaining 43 liability. It does not include, unless specifically designated as controlled 1 under K.S.A. 65-4102, and amendments thereto, the dextrorotatory isomer

of 3-methoxy-n-methylmorphinan and its salts (dextromethorphan). It does
include its racemic and levorotatory forms.

4 (ff) "Opium poppy" means the plant of the species Papaver 5 somniferum l. except its seeds.

6 (gg) "Person" means an individual, corporation, government, or
7 governmental subdivision or agency, business trust, estate, trust,
8 partnership or association or any other legal entity.

9 (hh) "Pharmacist" means any natural person licensed under K.S.A. 10 65-1625 et seq., to practice pharmacy.

(ii) "Pharmacist intern" means: (1) A student currently enrolled in an
accredited pharmacy program; (2) a graduate of an accredited pharmacy
program serving such person's internship; or (3) a graduate of a pharmacy
program located outside of the United States which is not accredited and
who had successfully passed equivalency examinations approved by the
board.

(jj) "Pharmacy prescription application" means software that is used
to process prescription information, is installed on a pharmacy's computers
and servers, and is controlled by the pharmacy.

20 (kk) "Poppy straw" means all parts, except the seeds, of the opium 21 poppy, after mowing.

22 (1) "Practitioner" means a person licensed to practice medicine and surgery, dentist, podiatrist, veterinarian, optometrist, advanced practice 23 24 registered nurse who is licensed pursuant to K.S.A. 65-1131, and 25 amendments thereto, and who has authority to prescribe drugs in accordance with K.S.A. 65-1130, and amendments thereto, or scientific 26 27 investigator or other person authorized by law to use a controlled 28 substance in teaching or chemical analysis or to conduct research with 29 respect to a controlled substance.

30 (mm) "Prescriber" means a practitioner or a mid-level practitioner.

(nn) "Production" includes the manufacture, planting, cultivation,growing or harvesting of a controlled substance.

(oo) "Readily retrievable" means that records kept by automatic data
processing applications or other electronic or mechanized recordkeeping
systems can be separated out from all other records within a reasonable
time not to exceed 48 hours of a request from the board or other authorized
agent or that hard-copy records are kept on which certain items are
asterisked, redlined or in some other manner visually identifiable apart
from other items appearing on the records.

40 (pp) "Ultimate user" means a person who lawfully possesses a 41 controlled substance for such person's own use or for the use of a member 42 of such person's household or for administering to an animal owned by 43 such person or by a member of such person's household. Sec. 18. K.S.A. 2014 Supp. 65-4116 is hereby amended to read as follows: 65-4116. (a) Every person who manufactures, distributes or dispenses any controlled substance within this state or who proposes to engage in the manufacture, distribution or dispensing of any controlled substance within this state shall obtain annually a registration issued by the board in accordance with the uniform controlled substances act and with rules and regulations adopted by the board.

8 (b) Persons registered by the board under this act to manufacture, 9 distribute, dispense or conduct research with controlled substances may 10 possess, manufacture, distribute, dispense or conduct research with those 11 substances to the extent authorized by their registration and in conformity 12 with the other provisions of this act.

(c) The following persons need not register and may lawfully possess
 controlled substances under this act, as specified in this subsection:

(1) An agent or employee of any registered manufacturer, distributor
or dispenser of any controlled substance if the agent or employee is acting
in the usual course of such agent or employee's business or employment;

(2) a common carrier or warehouseman or an employee thereof
whose possession of any controlled substance is in the usual course of
business or employment;

(3) an ultimate user or a person in possession of any controlled
 substance pursuant to a lawful order of a practitioner or a mid-level
 practitioner or in lawful possession of a schedule V substance;

(4) persons licensed and registered by the board under the provisions 24 25 of the acts contained in article 16 of chapter 65 of the Kansas Statutes Annotated, and amendments thereto, to manufacture, dispense or distribute 26 drugs are considered to be in compliance with the registration provision of 27 the uniform controlled substances act without additional proceedings 28 before the board or the payment of additional fees, except that 29 30 manufacturers and distributors shall complete and file the application form 31 required under the uniform controlled substances act;

32 (5) any person licensed by the state board of healing arts under the33 Kansas healing arts act;

34 (6) any person licensed by the state board of veterinary examiners;

35 (7) any person licensed by the Kansas dental board;

36 (8) a mid-level practitioner;-and

(9) any person who is a member of the Native American Church, with
respect to use or possession of peyote, whose use or possession of peyote
is in, or for use in, bona fide religious ceremonies of the Native American
Church, but nothing in this paragraph shall authorize the use or possession
of peyote in any place used for the confinement or housing of persons
arrested, charged or convicted of criminal offenses or in the state security
hospital; and

1 (10) any person licensed as an advanced practice registered nurse 2 under K.S.A. 65-1131, and amendments thereto, and who has authority to 3 prescribe drugs in accordance with K.S.A. 65-1130, and amendments 4 thereto.

(d)(1)5 The board may waive by rules and regulations the requirement 6 for registration of certain manufacturers, distributors or dispensers if the board finds it consistent with the public health and safety, except that 7 licensure of any person by the state board of healing arts to practice any 8 9 branch of the healing arts, Kansas dental board-or, the state board of veterinary examiners or the board of nursing of advanced practice 10 registered nurses shall constitute compliance with the registration 11 requirements of the uniform controlled substances act by such person for 12 13 such person's place of professional practice.

14 (2) Evidence of abuse as determined by the board relating to a person 15 licensed by the state board of healing arts shall be submitted to the state 16 board of healing arts and the attorney general within 60 days. The state 17 board of healing arts shall, within 60 days, make findings of fact and take 18 such action against such person as it deems necessary. All findings of fact 19 and any action taken shall be reported by the state board of healing arts to 20 the board of pharmacy and the attorney general.

21 (3) Evidence of abuse as determined by the board relating to a person 22 licensed by the state board of veterinary examiners shall be submitted to 23 the state board of veterinary examiners and the attorney general within 60 24 days. The state board of veterinary examiners shall, within 60 days, make 25 findings of fact and take such action against such person as it deems 26 necessary. All findings of fact and any action taken shall be reported by the state board of veterinary examiners to the board of pharmacy and the 27 28 attorney general.

29 (4) Evidence of abuse as determined by the board relating to a dentist 30 licensed by the Kansas dental board shall be submitted to the Kansas 31 dental board and the attorney general within 60 days. The Kansas dental 32 board shall, within 60 days, make findings of fact and take such action 33 against such dentist as it deems necessary. All findings of fact and any 34 action taken shall be reported by the Kansas dental board to the board of 35 pharmacy and the attorney general.

(5) Evidence of abuse as determined by the board relating to an 36 advanced practice registered nurse licensed by the board of nursing shall 37 38 be submitted to the board of nursing and the attorney general within 60 days. The board of nursing shall, within 60 days, make findings of fact and 39 take such action against such advanced practice registered nurse as it 40 41 deems necessary. All findings of fact and any action taken shall be reported by the board of nursing to the board of pharmacy and the 42 43 attorney general.

1 (e) A separate annual registration is required at each place of business 2 or professional practice where the applicant manufactures, distributes or 3 dispenses controlled substances.

4 (f) The board may inspect the establishment of a registrant or 5 applicant for registration in accordance with the board's rules and 6 regulations.

7 (g) (1) The registration of any person or location shall terminate when 8 such person or authorized representative of a location dies, ceases legal 9 existence, discontinues business or professional practice or changes the location as shown on the certificate of registration. Any registrant who 10 11 ceases legal existence, discontinues business or professional practice, or changes location as shown on the certificate of registration, shall notify the 12 board promptly of such fact and forthwith deliver the certificate of 13 registration directly to the secretary or executive secretary of the board. In 14 15 the event of a change in name or mailing address the person or authorized representative of the location shall notify the board promptly in advance of 16 the effective date of this change by filing the change of name or mailing 17 address with the board. This change shall be noted on the original 18 19 application on file with the board.

20 (2) No registration or any authority conferred thereby shall be 21 assigned or otherwise transferred except upon such conditions as the board 22 may specifically designate and then only pursuant to the written consent of 23 the board.

24 Sec. 19. K.S.A. 65-4134 is hereby amended to read as follows: 65-4134. A practitioner engaged in medical practice or research, a25 practitioner who is an advanced practice registered nurse acting in the 26 27 usual course of such practitioner's practice or a mid-level practitioner acting in the usual course of such mid-level practitioner's practice is not 28 required or compelled to furnish the name or identity of a patient or 29 research subject to the board, nor may such practitioner or mid-level 30 practitioner be compelled in any state or local civil, criminal, 31 32 administrative, legislative or other proceedings to furnish the name or identity of an individual that the practitioner or mid-level practitioner is 33 34 obligated to keep confidential.

Sec. 20. K.S.A. 2014 Supp. 65-4202 is hereby amended to read as follows: 65-4202. As used in this act: (a) "Board" means the state board of nursing.

(b) The "practice of mental health technology" means the
performance, under the direction of a physician licensed to practice
medicine and surgery or registered professional nurse, of services in caring
for and treatment of the mentally ill, emotionally disturbed, or people with
intellectual disability for compensation or personal profit, which services:
(1) Involve responsible nursing and therapeutic procedures for

patients with mental illness or intellectual disability requiring interpersonal and technical skills in the observations and recognition of symptoms and reactions of such patients, the accurate recording of such symptoms and reactions and the carrying out of treatments and medications as prescribed by a licensed physician, *a licensed advanced practice registered nurse* or a mid-level practitioner as defined-in-subsection (ii) of by K.S.A. 65-1626, and amendments thereto; and

8 (2) require an application of techniques and procedures that involve 9 understanding of cause and effect and the safeguarding of life and health 10 of the patient and others; and

(3) require the performance of duties that are necessary to facilitate rehabilitation of the patient or are necessary in the physical, therapeutic and psychiatric care of the patient and require close work with persons licensed to practice medicine and surgery, psychiatrists, psychologists, rehabilitation therapists, social workers, registered nurses, and other professional personnel.

17 (c) A "licensed mental health technician" means a person who18 lawfully practices mental health technology as defined in this act.

(d) An "approved course in mental health technology" means a
program of training and study including a basic curriculum which shall be
prescribed and approved by the board in accordance with the standards
prescribed herein, the successful completion of which shall be required
before licensure as a mental health technician, except as hereinafter
provided.

25 Sec. 21. K.S.A. 2014 Supp. 65-5402 is hereby amended to read as 26 follows: 65-5402. As used in K.S.A. 65-5401 to 65-5417, inclusive, and 27 K.S.A. 65-5418 to 65-5420, inclusive, and amendments thereto:

(a) "Board" means the state board of healing arts.

29 (b) "Practice of occupational therapy" means the therapeutic use of 30 purposeful and meaningful occupations (goal-directed activities) to evaluate and treat, pursuant to the referral, supervision, order or direction 31 32 of a physician, a licensed podiatrist, a licensed dentist, a licensed physician 33 assistant, or a licensed advanced practice registered nurse working 34 pursuant to the order or direction of a person licensed to practice medicine and surgery, a licensed advanced practice registered nurse, a licensed 35 chiropractor, or a licensed optometrist, individuals who have a disease or 36 37 disorder, impairment, activity limitation or participation restriction that 38 interferes with their ability to function independently in daily life roles and 39 to promote health and wellness. Occupational therapy intervention may 40 include:

41 (1) Remediation or restoration of performance abilities that are
42 limited due to impairment in biological, physiological, psychological or
43 neurological cognitive processes;

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(2) adaptation of tasks, process, or the environment or the teaching of compensatory techniques in order to enhance performance;

3 (3) disability prevention methods and techniques that facilitate the 4 development or safe application of performance skills; and

5 (4) health promotion strategies and practices that enhance 6 performance abilities.

(c) "Occupational therapy services" include, but are not limited to:

8 (1) Evaluating, developing, improving, sustaining, or restoring skills 9 in activities of daily living (ADL), work or productive activities, including 10 instrumental activities of daily living (IADL) and play and leisure 11 activities;

(2) evaluating, developing, remediating, or restoring sensorimotor,cognitive or psychosocial components of performance;

(3) designing, fabricating, applying, or training in the use of assistive
 technology or orthotic devices and training in the use of prosthetic devices;

16 (4) adapting environments and processes, including the application of 17 ergonomic principles, to enhance performance and safety in daily life 18 roles;

19 (5) applying physical agent modalities as an adjunct to or in 20 preparation for engagement in occupations;

21 (6) evaluating and providing intervention in collaboration with the 22 client, family, caregiver or others;

(7) educating the client, family, caregiver or others in carrying outappropriate nonskilled interventions; and

(8) consulting with groups, programs, organizations or communitiesto provide population-based services.

(d) "Occupational therapist" means a person licensed to practiceoccupational therapy as defined in this act.

(e) "Occupational therapy assistant" means a person licensed to assist
in the practice of occupational therapy under the supervision of an
occupational therapist.

32 (f) "Person" means any individual, partnership, unincorporated 33 organization or corporation.

34 (g) "Physician" means a person licensed to practice medicine and 35 surgery.

(h) "Occupational therapy aide," "occupational therapy tech" or
"occupational therapy paraprofessional" means a person who provides
supportive services to occupational therapists and occupational therapy
assistants in accordance with K.S.A. 65-5419, and amendments thereto.

40 Sec. 22. K.S.A. 2014 Supp. 65-5418 is hereby amended to read as 41 follows: 65-5418. (a) Nothing in the occupational therapy practice act is 42 intended to limit, preclude or otherwise interfere with the practices of 43 other health care providers formally trained and licensed, registered,

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1 credentialed or certified by appropriate agencies of the state of Kansas.

2 (b) The practice of occupational therapy shall not be construed to 3 include the following:

(1) Persons rendering assistance in the case of an emergency;

(2) members of any church practicing their religious tenets;

6 (3) persons whose services are performed pursuant to the delegation 7 of and under the supervision of an occupational therapist who is licensed 8 under this act;

9 (4) any person employed as an occupational therapist or occupational 10 therapy assistant by the government of the United States or any agency 11 thereof, if such person practices occupational therapy solely under the 12 direction or control of the organization by which such person is employed;

(5) licensees under the healing arts act when licensed and practicing
in accordance with the provisions of law or persons performing services
pursuant to a delegation authorized under subsection (g) of K.S.A. 652872(g), and amendments thereto;

(6) dentists practicing their professions, when licensed and practicingin accordance with the provisions of law;

(7) nurses practicing their professions, when licensed and practicing
in accordance with the provisions of law or persons performing services
pursuant to the delegation of a licensed nurse under-subsection-(m) of
K.S.A. 65-1124(m), and amendments thereto;

(8) health care providers who have been formally trained and are
practicing in accordance with the training or have received specific
training in one or more functions included in the occupational therapy
practice act pursuant to established educational protocols, or both;

(9) any person pursuing a supervised course of study leading to a
degree or certificate in occupational therapy at an accredited or approved
educational program, if the person is designated by the title which clearly
indicates such person's status as a student or trainee;

(10) any person fulfilling the supervised fieldwork experience
 requirements as part of the experience necessary to meet the requirement
 of the occupational therapy practice act;

(11) self-care by a patient or gratuitous care by a friend or family
 member who does not represent or hold oneself out to the public to be an
 occupational therapist or an occupational therapy assistant;

(12) optometrists practicing their profession when licensed and
 practicing in accordance with the provisions of article 15 of chapter 65 of
 the Kansas Statutes Annotated, and amendments thereto;

40 (13) podiatrists practicing their profession when licensed and
41 practicing in accordance with the provisions of article 15 of chapter 65 of
42 the Kansas Statutes Annotated, and amendments thereto;

43 (14) physical therapists practicing their profession when licensed and

practicing in accordance with K.S.A. 65-2901 et seq., and amendments
 thereto;

3 (15) physician assistants practicing their profession when licensed
 4 and practicing in accordance with the physician assistant licensure act;

5 (16) athletic trainers practicing their profession when licensed and 6 practicing in accordance with the athletic trainers licensure act;

(17) manufacturers of prosthetic devices;

8 (18) any person performing occupational therapy services, if these 9 services are performed for no more than 45 days in a calendar year in association with an occupational therapist licensed under the occupational 10 11 therapy practice act so long as: (A) The person is registered or licensed 12 under the laws of another state which has licensure requirements at least as stringent as the licensure requirements of this act;; or (B) the person meets 13 14 the requirements for certification as an occupational therapist registered 15 (OTR) or a certified occupational therapy assistant (COTA) established by 16 the national board for certification in occupational therapy (NBCOT).

(c) Any patient monitoring, assessment or other procedures designed
to evaluate the effectiveness of prescribed occupational therapy must be
performed by or pursuant to the delegation of a licensed occupational
therapist or other health care provider.

21 (d) Education related therapy services provided by an occupational therapist to school systems or consultation regarding prevention, 22 23 ergonomics and wellness within the occupational therapy scope of practice 24 shall not require a referral, supervision, order or direction of a physician, an advanced practice registered nurse, a licensed podiatrist, a licensed 25 26 dentist or a licensed optometrist. However, when in the course of providing such services an occupational therapist reasonably believes that 27 28 an individual may have an underlying injury, illness, disease, disorder or 29 impairment, the occupational therapist shall refer the individual to a 30 physician, an advanced practice registered nurse, a licensed podiatrist, a 31 licensed dentist or a licensed optometrist, as appropriate.

(e) Nothing in the occupational therapy practice act shall be construed
to permit the practice of medicine and surgery. No statute granting
authority to licensees of the state board of healing arts shall be construed
to confer authority upon occupational therapists to engage in any activity
not conferred by the occupational therapy practice act.

37 (f) This section shall be part of and supplemental to the occupational38 therapy practice act.

Sec. 23. K.S.A. 65-5502 is hereby amended to read as follows: 655502. As used in K.S.A. 65-5501 to 65-5517, inclusive and amendments
thereto:

42 (a) "Board" means the state board of healing arts.

43 (b) "Respiratory therapy" is a health care profession whose therapists

1 practice under the supervision of a qualified medical director and with the 2 prescription of a licensed physician *or an advanced practice registered* 3 *murse* providing therapy, management, rehabilitation, respiratory 4 assessment and care of patients with deficiencies and abnormalities which 5 affect the pulmonary system and associated other systems functions. The 6 duties which may be performed by a respiratory therapist include:

7 (1) Direct and indirect respiratory therapy services that are safe, 8 aseptic, preventative and restorative to the patient.

9 (2) Direct and indirect respiratory therapy services, including but not 10 limited to, the administration of pharmacological and diagnostic and 11 therapeutic agents related to respiratory therapy procedures to implement a 12 treatment, disease prevention or pulmonary rehabilitative regimen 13 prescribed by a physician *or an advanced practice registered nurse*.

14 (3) Administration of medical gases, exclusive of general anesthesia,15 aerosols, humidification and environmental control systems.

(4) Transcription and implementation of written or verbal orders of a
physician *or an advanced practice registered nurse* pertaining to the
practice of respiratory therapy.

19 (5) Implementation of respiratory therapy protocols as defined by the 20 medical staff of an institution or a qualified medical director or other 21 written protocol, changes in treatment pursuant to the written or verbal 22 orders of a physician *or an advanced practice registered nurse* or the 23 initiation of emergency procedures as authorized by written protocols.

(c) "Respiratory therapist" means a person who is licensed to practicerespiratory therapy as defined in this act.

26 (d) "Person" means any individual, partnership, unincorporated27 organization or corporation.

(e) "Physician" means a person who is licensed by the board topractice medicine and surgery.

30 (f) "Qualified medical director" means the medical director of any 31 inpatient or outpatient respiratory therapy service, department or home care agency. The medical director shall be a physician who has interest and 32 33 knowledge in the diagnosis and treatment of respiratory problems. This 34 physician shall be responsible for the quality, safety and appropriateness of 35 the respiratory services provided and require that respiratory therapy be 36 ordered by a physician or an advanced practice registered nurse who has 37 medical responsibility for the patient. The medical director shall be readily 38 accessible to the respiratory therapy practitioner.

39 (g) "Advanced practice registered nurse" means an advanced 40 practice registered nurse who is licensed pursuant to K.S.A. 65-1131, and 41 amendments thereto, and who has authority to prescribe drugs in 42 accordance with K.S.A. 65-1130, and amendments thereto.

43 Sec. 24. K.S.A. 2013 Supp. 65-6112, as amended by section 51 of

chapter 131 of the 2014 Session Laws of Kansas, is hereby amended to
 read as follows: 65-6112. As used in this act:

3 (a) "Administrator" means the executive director of the emergency
4 medical services board.

5 (b) "Advanced emergency medical technician" means a person who 6 holds an advanced emergency medical technician certificate issued 7 pursuant to this act.

8 (c) "Advanced practice registered nurse" means an advanced practice 9 registered nurse as defined in K.S.A. 65-1113, and amendments thereto.

10 (d) "Ambulance" means any privately or publicly owned motor 11 vehicle, airplane or helicopter designed, constructed, prepared, staffed and 12 equipped for use in transporting and providing emergency care for 13 individuals who are ill or injured.

(e) "Ambulance service" means any organization operated for the
purpose of transporting sick or injured persons to or from a place where
medical care is furnished, whether or not such persons may be in need of
emergency or medical care in transit.

(f) "Attendant" means a first responder, an emergency medical
responder, emergency medical technician, emergency medical technicianintermediate, emergency medical technician-defibrillator, emergency
medical technician-intermediate/defibrillator, advanced emergency
medical technician, mobile intensive care technician or paramedic certified
pursuant to this act.

(g) "Board" means the emergency medical services board established
 pursuant to K.S.A. 65-6102, and amendments thereto.

(h) "Emergency medical service" means the effective and coordinated
delivery of such care as may be required by an emergency which includes
the care and transportation of individuals by ambulance services and the
performance of authorized emergency care by a physician, advanced
practice registered nurse, professional nurse, a licensed physician assistant
or attendant.

(i) "Emergency medical technician" means a person who holds an
 emergency medical technician certificate issued pursuant to this act.

(j) "Emergency medical technician-defibrillator" means a person who
 holds an emergency medical technician-defibrillator certificate issued
 pursuant to this act.

37 (k) "Emergency medical technician-intermediate" means a person
38 who holds an emergency medical technician-intermediate certificate issued
39 pursuant to this act.

40 (1) "Emergency medical technician-intermediate/defibrillator" means
41 a person who holds both an emergency medical technician-intermediate
42 and emergency medical technician-defibrillator certificate issued pursuant
43 to this act.

1 (m) "Emergency medical responder" means a person who holds an 2 emergency medical responder certificate issued pursuant to this act.

3 (n) "First responder" means a person who holds a first responder 4 certificate issued pursuant to this act.

5 (o) "Hospital" means a hospital as defined by K.S.A. 65-425, and 6 amendments thereto.

7 (p) "Instructor-coordinator" means a person who is certified under 8 this act to teach initial certification and continuing education classes.

(q) "Medical director" means a physician.

10 "Medical protocols" mean written guidelines which authorize (r) attendants to perform certain medical procedures prior to contacting a 11 12 physician, physician assistant authorized by a physician, advanced practice registered nurse-authorized by a physician or professional nurse authorized 13 14 by a physician. The medical protocols shall be approved by a county 15 medical society or the medical staff of a hospital to which the ambulance 16 service primarily transports patients, or if neither of the above are able or available to approve the medical protocols, then the medical protocols 17 18 shall be submitted to the medical advisory council for approval.

(s) "Mobile intensive care technician" means a person who holds amobile intensive care technician certificate issued pursuant to this act.

21 (t) "Municipality" means any city, county, township, fire district or 22 ambulance service district.

(u) "Nonemergency transportation" means the care and transport of a
sick or injured person under a foreseen combination of circumstances
calling for continuing care of such person. As used in this subsection,
transportation includes performance of the authorized level of services of
the attendant whether within or outside the vehicle as part of such
transportation services.

(v) "Operator" means a person or municipality who has a permit tooperate an ambulance service in the state of Kansas.

31 (w) "Paramedic" means a person who holds a paramedic certificate32 issued pursuant to this act.

33 (x) "Person" means an individual, a partnership, an association, a
 34 joint-stock company or a corporation.

(y) "Physician" means a person licensed by the state board of healingarts to practice medicine and surgery.

(z) "Physician assistant" means a person who is licensed under the
 physician assistant licensure act and who is acting under the direction of a
 supervising physician.

40 (aa) "Professional nurse" means a licensed professional nurse as 41 defined by K.S.A. 65-1113, and amendments thereto.

42 (bb) "Provider of training" means a corporation, partnership, 43 accredited postsecondary education institution, ambulance service, fire 1 department, hospital or municipality that conducts training programs that

2 include, but are not limited to, initial courses of instruction and continuing
3 education for attendants, instructor-coordinators or training officers.

4 (cc) "Supervising physician" means supervising physician as such 5 term is defined under K.S.A. 65-28a02, and amendments thereto.

6 (dd) "Training officer" means a person who is certified pursuant to 7 this act to teach, coordinate or both, initial courses of instruction for first 8 responders or emergency medical responders and continuing education as 9 prescribed by the board.

10 Sec. 25. K.S.A. 2014 Supp. 65-6119 is hereby amended to read as 11 follows: 65-6119. (a) Notwithstanding any other provision of law, mobile 12 intensive care technicians may:

(1) Perform all the authorized activities identified in K.S.A. 65-6120,
65-6121, 65-6123, 65-6144, and amendments thereto;

15 (2) when voice contact or a telemetered electrocardiogram is 16 monitored by a physician, physician assistant where authorized by a 17 physician, an advanced practice registered nurse-where-authorized by a 18 physician or licensed professional nurse where authorized by a physician 19 and direct communication is maintained, and upon order of such person 20 may administer such medications or procedures as may be deemed 21 necessary by a person identified in subsection (a)(2);

(3) perform, during an emergency, those activities specified in
subsection (a)(2) before contacting a person identified in subsection (a)(2)
when specifically authorized to perform such activities by medical
protocols; and

26 (4) perform, during nonemergency transportation, those activities
27 specified in this section when specifically authorized to perform such
28 activities by medical protocols.

(b) An individual who holds a valid certificate as a mobile intensive care technician once meeting the continuing education requirements prescribed by the rules and regulations of the board, upon application for renewal, shall be deemed to hold a certificate as a paramedic under this act, and such individual shall not be required to file an original application as a paramedic for certification under this act.

(c) "Renewal" as used in subsection (b), refers to the first opportunity
that a mobile intensive care technician has to apply for renewal of a
certificate following the effective date of this act.

38 (d) Upon transition notwithstanding any other provision of law, a39 paramedic may:

40 (1) Perform all the authorized activities identified in K.S.A. 65-6120,
41 65-6121, 65-6144, and amendments thereto;

42 (2) when voice contact or a telemetered electrocardiogram is 43 monitored by a physician, physician assistant where authorized by a 1 physician or an advanced practice registered nurse where authorized by a

2 physician or licensed professional nurse where authorized by a physician
3 and direct communication is maintained, and upon order of such person,
4 may administer such medications or procedures as may be deemed
5 necessary by a person identified in subsection (d)(2);

6 (3) perform, during an emergency, those activities specified in
7 subsection (d)(2) before contacting a person identified in subsection (d)(2)
8 when specifically authorized to perform such activities by medical
9 protocols; and

(4) perform, during nonemergency transportation, those activities
specified in this section when specifically authorized to perform such
activities by medical protocols.

Sec. 26. K.S.A. 2014 Supp. 65-6120 is hereby amended to read as
follows: 65-6120. (a) Notwithstanding any other provision of law to the
contrary, an emergency medical technician-intermediate may:

16 (1) Perform any of the activities identified by K.S.A. 65-6121, and 17 amendments thereto;

18 (2) when approved by medical protocols or where voice contact by 19 radio or telephone is monitored by a physician, physician assistant where authorized by a physician, advanced practice registered nurse-where-20 21 authorized by a physician or licensed professional nurse where authorized by a physician, and direct communication is maintained, upon order of 22 23 such person, may perform veni-puncture for the purpose of blood sampling 24 collection and initiation and maintenance of intravenous infusion of saline solutions, dextrose and water solutions or ringers lactate IV solutions, 25 26 endotracheal intubation and administration of nebulized albuterol;

(3) perform, during an emergency, those activities specified in
subsection (a)(2) before contacting the persons identified in subsection (a)
(2) when specifically authorized to perform such activities by medical
protocols; or

(4) perform, during nonemergency transportation, those activities
 specified in this section when specifically authorized to perform such
 activities by medical protocols.

34 (b) An individual who holds a valid certificate as an emergency 35 medical technician-intermediate once successfully completing the board 36 prescribed transition course, and validation of cognitive and psychomotor 37 competency as determined by rules and regulations of the board, may 38 apply to transition to become an advanced emergency medical technician. 39 Alternatively, upon application for renewal, such individual shall be deemed to hold a certificate as an advanced emergency medical technician 40 41 under this act, provided such individual has completed all continuing education hour requirements inclusive of the successful completion of a 42 43 transition course and such individual shall not be required to file an

original application for certification as an advanced emergency medical
 technician under this act.

3 (c) "Renewal" as used in subsection (b), refers to the first or second 4 opportunity after December 31, 2011, that an emergency medical 5 technician-intermediate has to apply for renewal of a certificate.

6 (d) Emergency medical technician-intermediates who fail to meet the 7 transition requirements as specified may complete either the board 8 prescribed emergency medical technician transition course or emergency 9 medical responder transition course, provide validation of cognitive and psychomotor competency and all continuing education hour requirements 10 inclusive of the successful completion of a transition course as determined 11 by rules and regulations of the board. Upon completion, such emergency 12 13 medical technician-intermediate may apply to transition to become an emergency medical technician or an emergency medical responder, 14 15 depending on the transition course that was successfully completed. Alternatively, upon application for renewal of an emergency medical 16 17 technician-intermediate certificate, the applicant shall be renewed as an emergency medical technician or an emergency medical responder, 18 depending on the transition course that was successfully completed. Such 19 20 individual shall not be required to file an original application for 21 certification as an emergency medical technician or emergency medical 22 responder.

(e) Failure to successfully complete either an advanced emergency
 medical technician transition course, an emergency medical technician
 transition course or emergency medical responder transition course will
 result in loss of certification.

(f) Upon transition, notwithstanding any other provision of law to thecontrary, an advanced emergency medical technician may:

(1) Perform any of the activities identified by K.S.A. 65-6121, andamendments thereto; and

31 (2) perform any of the following interventions, by use of the devices, 32 medications and equipment, or any combination thereof, as specifically 33 identified in rules and regulations, after successfully completing an 34 approved course of instruction, local specialized device training and 35 competency validation and when authorized by medical protocols, or upon order when direct communication is maintained by radio, telephone or 36 37 video conference with a physician, physician assistant where authorized by 38 a physician, an advanced practice registered nurse-where authorized by a 39 physician, or licensed professional nurse where authorized by a physician upon order of such a person: (A) Continuous positive airway pressure 40 devices; (B) advanced airway management; (C) referral of patient of 41 42 alternate medical care site based on assessment; (D) transportation of a 43 patient with a capped arterial line; (E) veni-puncture for obtaining blood

1 sample; (F) initiation and maintenance of intravenous infusion or saline 2 lock; (G) initiation of intraosseous infusion; (H) nebulized therapy; (I) 3 manual defibrillation and cardioversion; (J) cardiac monitoring; (K) 4 electrocardiogram interpretation; (L) administration of generic or trade 5 name medications by one or more of the following methods: (i) 6 Aerosolization; (ii) nebulization; (iii) intravenous; (iv) intranasal; (v) 7 rectal; (vi) subcutaneous; (vii) intraosseous; (viii) intramuscular; or (ix) 8 sublingual.

9 (g) An individual who holds a valid certificate as both an emergency 10 medical technician-intermediate and as an emergency medical technician-11 defibrillator once successfully completing the board prescribed transition course, and validation of cognitive and psychomotor competency as 12 13 determined by rules and regulations of the board, may apply to transition 14 to an advanced emergency medical technician. Alternatively, upon 15 application for renewal, such individual shall be deemed to hold a 16 certificate as an advanced emergency medical technician under this act, 17 provided such individual has completed all continuing education hour 18 requirements inclusive of successful completion of a transition course, and 19 such individual shall not be required to file an original application for 20 certification as an advanced emergency medical technician under this act.

(h) "Renewal" as used in subsection (g), refers to the first or second
opportunity after December 31, 2011, that an emergency medical
technician-intermediate and emergency medical technician-defibrillator
has to apply for renewal of a certificate.

25 (i) An individual who holds both an emergency medical technician-26 intermediate certificate and an emergency medical technician-defibrillator 27 certificate, who fails to meet the transition requirements as specified may 28 complete either the board prescribed emergency medical technician 29 transition course or emergency medical responder transition course, and 30 provide validation of cognitive and psychomotor competency and all 31 continuing education hour requirements inclusive of successful completion 32 of a transition course as determined by rules and regulations of the board. 33 Upon completion, such individual may apply to transition to become an 34 emergency medical technician or emergency medical responder, depending 35 on the transition course that was successfully completed. Alternatively, 36 upon application for renewal of an emergency medical technician-37 intermediate certificate and an emergency medical technician-defibrillator 38 certificate, the applicant shall be renewed as an emergency medical 39 technician or an emergency medical responder, depending on the transition 40 course that was successfully completed. Such individual shall not be 41 required to file an original application for certification as an emergency 42 medical technician or emergency medical responder.

43 (j) Failure to successfully complete either the advanced emergency

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1 medical technician transition requirements, an emergency medical 2 technician transition course or the emergency medical responder transition 3 course will result in loss of certification.

Sec. 27. K.S.A. 2014 Supp. 65-6121 is hereby amended to read as 4 5 follows: 65-6121. (a) Notwithstanding any other provision of law to the contrary, an emergency medical technician may perform any of the 6 7 following activities: 8

(1) Patient assessment and vital signs;

(2) airway maintenance including the use of:

10 (A) Oropharyngeal and nasopharyngeal airways:

11 esophageal obturator airways with or without gastric suction (B) 12 device:

13 (C) multi-lumen airway; and

14 (D) oxygen demand valves.

(3) Oxygen therapy; 15

16 (4) oropharyngeal suctioning;

17 (5) cardiopulmonary resuscitation procedures;

18 (6) control accessible bleeding;

19 (7) apply pneumatic anti-shock garment;

20 (8) manage outpatient medical emergencies;

21 (9) extricate patients and utilize lifting and moving techniques;

22 (10) manage musculoskeletal and soft tissue injuries including 23 dressing and bandaging wounds or the splinting of fractures, dislocations, 24 sprains or strains;

(11) use of backboards to immobilize the spine;

administer activated charcoal and glucose; (12)

27 (13) monitor intravenous line delivering intravenous fluids during 28 interfacility transport with the following restrictions:

29 (A) The physician approves the transfer by an emergency medical 30 technician;

31 (B) no medications or nutrients have been added to the intravenous 32 fluids; and

33 (C) the emergency medical technician may monitor, maintain and 34 shut off the flow of intravenous fluid;

(14) use automated external defibrillators:

(15) administer epinephrine auto-injectors provided that:

The emergency medical technician successfully completes a 37 (A) 38 course of instruction approved by the board in the administration of 39 epinephrine;

40 (B) the emergency medical technician serves with an ambulance 41 service or a first response organization that provides emergency medical 42 services; and

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(C) the emergency medical technician is acting pursuant to medical

1 protocols;

2 (16) perform, during nonemergency transportation, those activities
3 specified in this section when specifically authorized to perform such
4 activities by medical protocols; or

5 (17) when authorized by medical protocol, assist the patient in the 6 administration of the following medications which have been prescribed 7 for that patient: Auto-injection epinephrine, sublingual nitroglycerin and 8 inhalers for asthma and emphysema.

9 (b) An individual who holds a valid certificate as an emergency medical technician at the current basic level once successfully completing 10 11 the board prescribed transition course, and validation of cognitive and psychomotor competency as determined by rules and regulations of the 12 13 board, may apply to transition to become an emergency medical 14 technician. Alternatively, upon application for renewal, such individual 15 shall be deemed to hold a certificate as an emergency medical technician 16 under this act, provided such individual has completed all continuing 17 education hour requirements inclusive of successful completion of a 18 transition course, and such individual shall not be required to file an 19 original application for certification as an emergency medical technician.

20 (c) "Renewal" as used in subsection (b), refers to the first opportunity 21 after December 31, 2011, that an emergency medical technician has to 22 apply for renewal of a certificate following the effective date of this act.

23 (d) Emergency medical technicians who fail to meet the transition 24 requirements as specified may successfully complete the board prescribed 25 emergency medical responder transition course, provide validation of cognitive and psychomotor competency and all continuing education hour 26 27 requirements inclusive of the successful completion of a transition course 28 as determined by rules and regulations of the board. Alternatively, upon 29 application for renewal of an emergency medical technician certificate, the 30 applicant shall be deemed to hold a certificate as an emergency medical 31 responder under this act, and such individual shall not be required to file 32 an original application for certification as an emergency medical 33 responder.

(e) Failure to successfully complete either an emergency medical
 technician transition course or emergency medical responder transition
 course will result in loss of certification.

(f) Upon transition, notwithstanding any other provision of law to the contrary, an emergency medical technician may perform any activities identified in K.S.A. 65-6144, and amendments thereto, and any of the following interventions, by use of the devices, medications and equipment, or any combination thereof, after successfully completing an approved course of instruction, local specialized device training and competency validation and when authorized by medical protocols, or upon order when

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direct communication is maintained by radio, telephone or video

conference is monitored by a physician, physician assistant when

authorized by a physician, an advanced practice registered nurse-when-

authorized by a physician or a licensed professional nurse when authorized

by a physician, upon order of such person:

(1) Airway maintenance including use of: 6 (A) Single lumen airways as approved by the board; 7 8 (B) multilumen airways; 9 (C) ventilator devices; (D) forceps removal of airway obstruction; 10 (E) CO2 monitoring; 11 12 (F) airway suctioning; apply pneumatic anti-shock garment; 13 (2)assist with childbirth; 14 (3) 15 (4) monitoring urinary catheter; capillary blood sampling; 16 (5) 17 cardiac monitoring; (6) administration of patient assisted medications as approved by the 18 (7)19 board: (8) administration of medications as approved by the board by 20 21 appropriate routes; and (9) monitor, maintain or discontinue flow of IV line if a physician 22 approves transfer by an emergency medical technician. 23 Sec. 28. K.S.A. 2014 Supp. 65-6123 is hereby amended to read as 24 follows: 65-6123. (a) Notwithstanding any other provision of law to the 25 contrary, an emergency medical technician-defibrillator may: 26 (1) Perform any of the activities identified in K.S.A. 65-6121, and 27 28 amendments thereto: 29 (2) when approved by medical protocols or where voice contact by radio or telephone is monitored by a physician, physician assistant where 30 authorized by a physician, advanced practice registered nurse-where-31

authorized by a physician, or licensed professional nurse where authorized
 by a physician, and direct communication is maintained, upon order of
 such person, may perform electrocardiographic monitoring and
 defibrillation;

36 (3) perform, during an emergency, those activities specified in
37 subsection (b) before contacting the persons identified in subsection (b)
38 when specifically authorized to perform such activities by medical
39 protocols; or

- 40 (4) perform, during nonemergency transportation, those activities
 41 specified in this section when specifically authorized to perform such
 42 activities by medical protocols.
- 43 (b) An individual who holds a valid certificate as an emergency

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1 medical technician-defibrillator once successfully completing an 2 emergency medical technician-intermediate, initial course of instruction 3 and the board prescribed transition course, and validation of cognitive and 4 psychomotor competency as determined by rules and regulations of the 5 board, may apply to transition to become an advanced emergency medical technician. Alternatively, upon application for renewal, such individual 6 7 shall be deemed to hold a certificate as an advanced emergency medical 8 technician under this act, provided such individual has completed all 9 continuing education hour requirements inclusive of successful completion 10 of a transition course, and such individual shall not be required to file an original application for certification as an advanced emergency medical 11 12 technician.

13 (c) "Renewal" as used in subsection (b), refers to the second 14 opportunity after December 31, 2011, that an attendant has to apply for 15 renewal of a certificate.

(d) Emergency medical technician-defibrillator attendants who fail to 16 17 meet the transition requirements as specified may complete either the board prescribed emergency medical technician transition course or 18 emergency medical responder transition course, provide validation of 19 20 cognitive and psychomotor competency provided such individual has completed all continuing education hour requirements inclusive of the 21 22 successful completion of a transition course as determined by rules and regulations of the board. Upon completion, such emergency medical 23 24 technician-defibrillator may apply to transition to become an emergency 25 medical technician or an emergency medical responder, depending on the transition course that was successfully completed. Alternatively, upon 26 application for renewal of an emergency medical technician-defibrillator 27 28 certificate, the applicant shall be renewed as an emergency medical 29 technician or an emergency medical responder, depending on the transition course that was successfully completed. Such individual shall not be 30 31 required to file an original application for certification as an emergency medical technician or emergency medical responder. 32

(e) Failure to complete either the advanced emergency medical
 technician transition requirements, an emergency medical technician
 transition course or an emergency medical responder transition course will
 result in loss of certification.

Sec. 29. K.S.A. 2013 Supp. 65-6124, as amended by section 52 of chapter 131 of the 2014 Session Laws of Kansas, is hereby amended to read as follows: 65-6124. (a) No physician, physician assistant, advanced practice registered nurse or licensed professional nurse, who gives emergency instructions to an attendant as defined by K.S.A. 65-6112, and amendments thereto, during an emergency, shall be liable for any civil damages as a result of issuing the instructions, except such damages which 1 may result from gross negligence in giving such instructions.

2 (b) No attendant as defined by K.S.A. 65-6112, and amendments 3 thereto, who renders emergency care during an emergency pursuant to 4 instructions given by a physician, an advanced practice registered nurse, 5 the supervising physician for a physician assistant; advanced practice-6 registered-nurse or licensed professional nurse shall be liable for civil 7 damages as a result of implementing such instructions, except such damages which may result from gross negligence or by willful or wanton 8 acts or omissions on the part of such attendant as defined by K.S.A. 65-9 6112, and amendments thereto. 10

(c) No person certified as an instructor-coordinator and no training officer shall be liable for any civil damages which may result from such instructor-coordinator's or training officer's course of instruction, except such damages which may result from gross negligence or by willful or wanton acts or omissions on the part of the instructor-coordinator or training officer.

(d) No medical adviser who reviews, approves and monitors the
activities of attendants shall be liable for any civil damages as a result of
such review, approval or monitoring, except such damages which may
result from gross negligence in such review, approval or monitoring.

Sec. 30. K.S.A. 2014 Supp. 65-6144 is hereby amended to read as
follows: 65-6144. (a) A first responder may perform any of the following
activities:

(1) Initial scene management including, but not limited to, gaining
 access to the individual in need of emergency care, extricating, lifting and
 moving the individual;

(2) cardiopulmonary resuscitation and airway management;

(3) control of bleeding;

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29 (4) extremity splinting excluding traction splinting;

30 (5) stabilization of the condition of the individual in need of 31 emergency care;

(6) oxygen therapy;

33 (7) use of oropharyngeal airways;

34 (8) use of bag valve masks;

35 (9) use automated external defibrillators; and

36 (10) other techniques of preliminary care a first responder is trained37 to provide as approved by the board.

(b) An individual who holds a valid certificate as a first responder,
once completing the board prescribed transition course, and validation of
cognitive and psychomotor competency as determined by rules and
regulations of the board, may apply to transition to become an emergency
medical responder. Alternatively, upon application for renewal of such
certificate, such individual shall be deemed to hold a certificate as an

emergency medical responder under this act, provided such individual has
 completed all continuing education hour requirements inclusive of a
 transition course and such individual shall not be required to file an
 original application for certification as an emergency medical responder.

5 (c) "Renewal" as used in subsection (b), refers to the first opportunity 6 after December 31, 2011, that an attendant has to apply for renewal of a 7 certificate.

8 (d) First responder attendants who fail to meet the transition 9 requirements as specified will forfeit their certification.

10 (e) Upon transition, notwithstanding any other provision of law to the contrary, an emergency medical responder may perform any of the 11 following interventions, by use of the devices, medications and equipment, 12 13 or any combination thereof, after successfully completing an approved course of instruction, local specialized device training and competency 14 15 validation and when authorized by medical protocols, or upon order when 16 direct communication is maintained by radio, telephone or video conference is monitored by a physician, physician assistant when 17 18 authorized by a physician, an advanced practice registered nurse-when-19 authorized by a physician or a licensed professional nurse when authorized 20 by a physician, upon order of such person: (1) Emergency vehicle 21 operations; (2) initial scene management; (3) patient assessment and stabilization; (4) cardiopulmonary resuscitation and airway management; 22 23 (5) control of bleeding; (6) extremity splinting; (7) spinal immobilization; (8) oxygen therapy; (9) use of bag-valve-mask; (10) use of automated 24 25 external defibrillator; (11) nebulizer therapy; (12) intramuscular injections with auto-injector; (13) administration of oral glucose; (14) administration 26 27 of aspirin; (15) recognize and comply with advanced directives; (16) insertion and maintenance of oral and nasal pharyngeal airways; (17) use 28 29 of blood glucose monitoring; and (18) other techniques and devices of 30 preliminary care an emergency medical responder is trained to provide as 31 approved by the board.

32 Sec. 31. K.S.A. 2014 Supp. 65-7003 is hereby amended to read as 33 follows: 65-7003. As used in K.S.A. 65-7001 through 65-7015, and 34 amendments thereto:

(a) "Act" means the Kansas chemical control act;

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(b) "administer" means the application of a regulated chemical
whether by injection, inhalation, ingestion or any other means, directly
into the body of a patient or research subject, such administration to be
conducted by: (1) A practitioner, or in the practitioner's presence, by such
practitioner's authorized agent; or

41 (2) the patient or research subject at the direction and in the presence 42 of the practitioner;

43 (c) "agent or representative" means a person who is authorized to

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receive, possess, manufacture or distribute or in any other manner control
 or has access to a regulated chemical on behalf of another person;

(d) "bureau" means the Kansas bureau of investigation;

4 (e) "department" means the Kansas department of health and 5 environment;

6 (f) "director" means the director of the Kansas bureau of 7 investigation;

8 (g) "dispense" means to deliver a regulated chemical to an ultimate 9 user, patient or research subject by, or pursuant to the lawful order of, a 10 practitioner, including the prescribing, administering, packaging, labeling 11 or compounding necessary to prepare the regulated chemical for that 12 delivery;

(h) "distribute" means to deliver other than by administering ordispensing a regulated chemical;

(i) "manufacture" means to produce, prepare, propagate, compound,
convert or process a regulated chemical directly or indirectly, by extraction
from substances of natural origin, chemical synthesis or a combination of
extraction and chemical synthesis, and includes packaging or repackaging
of the substance or labeling or relabeling of its container. The term
excludes the preparation, compounding, packaging, repackaging, labeling
or relabeling of a regulated chemical:

(1) By a practitioner as an incident to the practitioner's administering
 or dispensing of a regulated chemical in the course of the practitioner's
 professional practice; or

(2) by a practitioner, or by the practitioner's authorized agent under
the practitioner's supervision, for the purpose of, or as an incident to
research, teaching or chemical analysis and not for sale;

(j) "person" means individual, corporation, business trust, estate,
 trust, partnership, association, joint venture, government, governmental
 subdivision or agency, or any other legal or commercial entity;

31 (k) "practitioner" means a person licensed to practice medicine and 32 surgery, pharmacist, dentist, podiatrist, veterinarian, optometrist, advanced 33 practice registered nurse who is licensed pursuant to K.S.A. 65-1131, and 34 amendments thereto, and who has authority to prescribe drugs in 35 accordance with K.S.A. 65-1130, and amendments thereto, or scientific 36 investigator or other person authorized by law to use a controlled 37 substance in teaching or chemical analysis or to conduct research with 38 respect to a controlled substance;

(1) "regulated chemical" means a chemical that is used directly or indirectly to manufacture a controlled substance or other regulated chemical, or is used as a controlled substance analog, in violation of the state controlled substances act or this act. The fact that a chemical may be used for a purpose other than the manufacturing of a controlled substance

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1 or regulated chemical does not exempt it from the provisions of this act.

2 **Regulated chemical includes:**

3 (1) Acetic anhydride (CAS No. 108-24-7);

4 (2) benzaldehyde (CAS No. 100-52-7);

5 (3) benzyl chloride (CAS No. 100-44-7);

6 benzyl cyanide (CAS No. 140-29-4); (4) 7

diethylamine and its salts (CAS No. 109-89-7); (5)

(6) ephedrine, its salts, optical isomers and salts of optical isomers

9 (CAS No. 299-42-3), except products containing ephedra or ma huang, 10 which do not contain any chemically synthesized ephedrine alkaloids, and 11 are lawfully marketed as dietary supplements under federal law;

12 (7) hydriodic acid (CAS No. 10034-85-2);

13 (8) iodine (CAS No. 7553-56-2);

(9) lithium (CAS No. 7439-93-2); 14

(10) methylamine and its salts (CAS No. 74-89-5); 15

16 nitroethane (CAS No. 79-24-3); (11)

17 (12)chloroephedrine, its salts, optical isomers, and salts of optical isomers (CAS No. 30572-91-9); 18

19 (13) phenylacetic acid, its esters and salts (CAS No. 103-82-2);

(14) phenylpropanolamine, its salts, optical isomers, and salts of 20 optical isomers (CAS No. 14838-15-4); 21

(15) piperidine and its salts (CAS No. 110-89-4);

23 (16) pseudoephedrine, its salts, optical isomers, and salts of optical 24 isomers (CAS No. 90-82-4);

(17) red phosphorous (CAS No. 7723-14-0);

26 sodium (CAS No. 7440-23-5); and (18)

(19)thionylchloride (CAS No. 7719-09-7);

butyrolactone 28 (20)gamma (GBL). including butyrolactone; 29 butyrolactone gamma; 4-butyrolactone; 2(3H)-furanone dihydro; dihydro-30 2(3H)-furanone; tetrahydro-2-furanone; 1,2-butanolide; 1,4-butanolide; 4butanolide; gamma-hydroxybutyric acid lactone; 3-hydroxybutyric acid 31 32 lactone and 4-hydroxybutanoic acid lactone; CAS No. 96-48-0; and

33 (21) 1,4 butanediol, including butanediol; butane-1,4-diol; 1,4butylene glycol; butylene glycol; 1,4-dihydroxybutane; 1,4-tetramethylene 34 glycol; tetramethylene glycol; tetramethylene 1,4-diol; CAS No. 110-63-4; 35

36 (m) "regulated chemical distributor" means any person subject to the 37 provisions of the Kansas chemical control act who manufactures or 38 distributes a regulated chemical;

39 (n) "regulated chemical retailer" means any person who sells 40 regulated chemicals directly to the public;

(o) "regulated chemical transaction" means the manufacture of a 41 42 regulated chemical or the distribution, sale, exchange or other transfer of a regulated chemical within or into the state or from this state into another 43

1 state; and

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(p) "secretary" means the secretary of health and environment.

3 Sec. 32. K.S.A. 2014 Supp. 65-7302 is hereby amended to read as 4 follows: 65-7302. As used in this act:

(a) "Board" means the state board of healing arts.

6 (b) "Ionizing radiation" means x-rays, gamma rays, alpha and beta 7 particles, high speed electrons, protons, neutrons and other nuclear 8 particles capable of producing ions directly or indirectly in its passage 9 through matter.

10 (c) "License" means a certificate issued by the board authorizing the 11 licensee to perform radiologic technology procedures on humans for 12 diagnostic or therapeutic purposes.

(d) "Licensed practitioner" means a person licensed to practice
 medicine and surgery, dentistry, podiatry-or, chiropractic or advanced
 practice registered nursing in this state.

16 (e) "Licensure" and "licensing" mean a method of regulation by 17 which the state grants permission to persons who meet predetermined 18 qualifications to engage in a health related occupation or profession.

(f) "Nuclear medicine technologist" means a person who uses radiopharmaceutical agents on humans for diagnostic or therapeutic purposes.

(g) "Nuclear medicine technology" means the use of radio nuclides on
 human beings for diagnostic or therapeutic purposes.

(h) "Radiation therapist" means a person who applies radiation tohumans for therapeutic purposes.

(i) "Radiation therapy" means the use of any radiation procedure or
article intended for the cure, mitigation or prevention of disease in
humans.

(j) "Radiographer" means a person who applies radiation to humansfor diagnostic purposes.

30 (k) "Radiography" means the use of ionizing radiation on human31 beings for diagnostic purposes.

32 (1) "Radiologic technologist" means any person who is a33 radiographer, radiation therapist or nuclear medicine technologist.

(m) "Radiologic technology" means the use of radioactive substance or equipment emitting or detecting ionizing radiation on humans for diagnostic or therapeutic purposes upon prescription of a licensed practitioner. The term includes the practice of radiography, nuclear medicine technology and radiation therapy, but does not include echocardiography, diagnostic sonography and magnetic resonance imaging.

41 (n) This section shall take effect on and after July 1, 2005.

42 Sec. 33. K.S.A. 2014 Supp. 72-5213 is hereby amended to read as 43 follows: 72-5213. (a) Every board of education shall require all employees

1 of the school district, who come in regular contact with the pupils of the 2 school district, to submit a certification of health on a form prescribed by 3 the secretary of health and environment and signed by a person licensed to 4 practice medicine and surgery under the laws of any state, or by a person 5 who is licensed as a physician assistant under the laws of this state when 6 such person is working at the direction of or in collaboration with a person 7 licensed to practice medicine and surgery, or by a person holding a license 8 to practice as an advanced practice registered nurse under the laws of this 9 state-when-such-person-is-working-at-the-direction-of-or-in collaboration-10 with a person licensed to practice medicine and surgery. The certification 11 shall include a statement that there is no evidence of a physical condition 12 that would conflict with the health, safety, or welfare of the pupils; and 13 that freedom from tuberculosis has been established by chest x-ray or 14 negative tuberculin skin test. If at any time there is reasonable cause to 15 believe that any such employee of the school district is suffering from an 16 illness detrimental to the health of the pupils, the school board may require 17 a new certification of health.

18 (b) Upon presentation of a signed statement by the employee of a 19 school district, to whom the provisions of subsection (a) apply, that the 20 employee is an adherent of a religious denomination whose religious 21 teachings are opposed to physical examinations, the employee shall be 22 permitted to submit, as an alternative to the certification of health required 23 under subsection (a), certification signed by a person licensed to practice 24 medicine and surgery under the laws of any state, or by a person who is 25 licensed as a physician assistant under the laws of this state when such 26 person is working at the direction of or in collaboration with a person 27 licensed to practice medicine and surgery, or by a person holding a license 28 to practice as an advanced practice registered nurse under the laws of this 29 state-when such person is working at the direction of or in collaboration. 30 with a person-licensed to practice medicine and surgery that freedom of 31 the employee from tuberculosis has been established.

32 (c) Every board of education may require persons, other than 33 employees of the school district, to submit to the same certification of 34 health requirements as are imposed upon employees of the school district 35 under the provisions of subsection (a) if such persons perform or provide 36 services to or for a school district which require such persons to come in 37 regular contact with the pupils of the school district. No such person shall 38 be required to submit a certification of health if the person presents a 39 signed statement that the person is an adherent of a religious denomination 40 whose religious teachings are opposed to physical examinations. Such 41 persons shall be permitted to submit, as an alternative to a certification of 42 health, certification signed by a person licensed to practice medicine and surgery under the laws of any state, or by a person who is licensed as a 43

physician assistant under the laws of this state when such person is working at the direction of or in collaboration with a person licensed to practice medicine and surgery, or by a person holding a license to practice as an advanced practice registered nurse under the laws of this state-when such person is working at the direction of or in collaboration with a person licensed to practice medicine and surgery that freedom of such persons from tuberculosis has been established.

8 (d) The expense of obtaining certifications of health and certifications 9 of freedom from tuberculosis may be borne by the board of education.

Sec. 34. K.S.A. 2014 Supp. 75-7429 is hereby amended to read as 10 11 follows: 75-7429. (a) As used in this section, "medical home" means a health care delivery model in which a patient establishes an ongoing 12 13 relationship with a physician or other personal care provider in a 14 physician-directed team, or with an advanced practice registered nurse to 15 provide comprehensive, accessible and continuous evidence-based primary and preventive care, and to coordinate the patient's health care needs 16 across the health care system in order to improve quality and health 17 18 outcomes in a cost effective manner.

(b) The department of health and environment shall incorporate theuse of the medical home delivery system within:

(1) The Kansas program of medical assistance established in
accordance with title XIX of the federal social security act, 42 U.S.C. §
1396 et seq., and amendments thereto;

(2) the health benefits program for children established under K.S.A.
38-2001 et seq., and amendments thereto, and developed and submitted in
accordance with federal guidelines established under title XXI of the
federal social security act, section 4901 of public law 105-33, 42 U.S.C. §
1397aa et seq., and amendments thereto; and

29 (3) the state mediKan program.

30 (c) The Kansas state employees health care commission established under K.S.A. 75-6502, and amendments thereto, shall incorporate the use 31 32 of a medical home delivery system within the state health care benefits program as provided in K.S.A. 75-6501 through 75-6523, and amendments 33 34 thereto. Except that compliance with a medical home delivery system shall 35 not be required of program participants receiving treatment in accordance 36 with a religious method of healing pursuant to the provisions of K.S.A. 37 2014 Supp. 75-6501, and amendments thereto.

Sec. 35. K.S.A. 40-4602, 59-2976, 65-1660, 65-2892, 65-4134 and 65-5502 and K.S.A. 2013 Supp. 65-1626, as amended by section 4 of chapter 131 of the 2014 Session Laws of Kansas, 65-4101, as amended by section 50 of chapter 131 of the 2014 Session Laws of Kansas, 65-6112, as amended by section 51 of chapter 131 of the 2014 Session Laws of Kansas 43 and 65-6124, as amended by section 52 of chapter 131 of the 2014 Session

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- 1 Laws of Kansas and K.S.A. 2014 Supp. 39-923, 39-1401, 39-1430, 39-
- 2 1504, 65-468, 65-507, 65-1113, 65-1130, 65-1682, 65-2837a, 65-2921, 65-
- 3 4116, 65-4202, 65-5402, 65-5418, 65-6119, 65-6120, 65-6121, 65-6123,
- 4 65-6144, 65-7003, 65-7302, 72-5213 and 75-7429 are hereby repealed.
- 5 Sec. 36. This act shall take effect and be in force from and after July
- 6 1, 2016, and its publication in the statute book.

HOUSE BILL No. 2280

By Committee on Health and Human Services

2-10

 AN ACT concerning the board of nursing; relating to the certified nursemidwives; amending K.S.A. 2014 Supp. 65-1130 and repealing the existing section.

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Be it enacted by the Legislature of the State of Kansas:

6 Section 1. K.S.A. 2014 Supp. 65-1130 is hereby amended to read as 7 follows: 65-1130. (a) No professional nurse shall announce or represent to 8 the public that such person is an advanced practice registered nurse unless 9 such professional nurse has complied with requirements established by the 10 board and holds a valid license as an advanced practice registered nurse in 11 accordance with the provisions of this section.

12 (b) The board shall establish standards and requirements for any 13 professional nurse who desires to obtain licensure as an advanced practice 14 registered nurse. Such standards and requirements shall include, but not be 15 limited to, standards and requirements relating to the education of 16 advanced practice registered nurses. The board may give such 17 examinations and secure such assistance as it deems necessary to 18 determine the qualifications of applicants.

(c) The board shall adopt rules and regulations applicable to advancedpractice registered nurses which:

(1) Establish roles and identify titles and abbreviations of advanced
 practice registered nurses which are consistent with nursing practice
 specialties recognized by the nursing profession.

24 (2) Establish education and qualifications necessary for licensure for each role of advanced practice registered nurse established by the board at 25 26 a level adequate to assure the competent performance by advanced practice registered nurses of functions and procedures which advanced 27 practice registered nurses are authorized to perform. Advanced practice 28 29 registered nursing is based on knowledge and skills acquired in basic 30 nursing education, licensure as a registered nurse and graduation from or 31 completion of a master's or higher degree in one of the advanced practice 32 registered nurse roles approved by the board of nursing.

33 (3) Define the role of advanced practice registered nurses and
34 establish limitations and restrictions on such role. The board shall adopt a
35 definition of the role under this subsection (c)(3) which is consistent with
36 the education and qualifications required to obtain a license as an

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advanced practice registered nurse, which protects the public from persons performing functions and procedures as advanced practice registered nurses for which they lack adequate education and qualifications and which authorizes advanced practice registered nurses to perform acts generally recognized by the profession of nursing as capable of being performed, in a manner consistent with the public health and safety, by persons with postbasic education in nursing. In defining such role the board shall consider: (A) The education required for a licensure as an advanced practice registered nurse; (B) the type of nursing practice and preparation in specialized advanced practice skills involved in each role of advanced practice registered nurse established by the board; (C) the scope and limitations of advanced practice nursing prescribed by national advanced practice organizations; and (D) acts recognized by the nursing

profession as appropriate to be performed by persons with postbasic

15 education in nursing. 16 (d) An advanced practice registered nurse may prescribe drugs 17 pursuant to a written protocol as authorized by a responsible physician. Each written protocol shall contain a precise and detailed medical plan of 18 care for each classification of disease or injury for which the advanced 19 practice registered nurse is authorized to prescribe and shall specify all 20 drugs which may be prescribed by the advanced practice registered nurse. 21 Any written prescription order shall include the name, address and 22 telephone number of the responsible physician. The advanced practice 23 24 registered nurse may not dispense drugs, but may request, receive and sign 25 for professional samples and may distribute professional samples to patients pursuant to a written protocol as authorized by a responsible 26 physician. In order to prescribe controlled substances, the advanced 27 28 practice registered nurse shall: (1) Register with the federal drug 29 enforcement administration; and (2) notify the board of the name and address of the responsible physician or physicians. In no case shall the 30 31 scope of authority of the advanced practice registered nurse exceed the 32 normal and customary practice of the responsible physician.

(e) An advanced practice registered nurse certified in the role of
 registered nurse anesthetist while functioning as a registered nurse
 anesthetist under K.S.A. 65-1151-to through 65-1164, inclusive, and
 amendments thereto, shall be subject to the provisions of K.S.A. 65-1151
 to through 65-1164, inclusive, and amendments thereto, with respect to
 drugs and anesthetic agents and shall not be subject to the provisions of
 this subsection (d).

40 *(f)* An advanced practice registered nurse certified in the role of 41 certified nurse-midwife while functioning as a certified nurse-midwife 42 under sections 2 through 10, and amendments thereto, shall be subject to 43 the provisions of sections 2 through 10, and amendments thereto, with

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respect to prescribing drugs and shall not be subject to the provisions of
 this section.

3 (g) As used in this section, "drug" means those articles and 4 substances defined as drugs in K.S.A. 65-1626 and 65-4101, and 5 amendments thereto.

6 (h) For the purposes of this subsection As used in the section, 7 "responsible physician" means a person licensed to practice medicine and 8 surgery in Kansas who has accepted responsibility for the protocol and the 9 actions of the advanced practice registered nurse when prescribing drugs.

(c) As used in this section, "drug" means those articles and substances
 defined as drugs in K.S.A. 65-1626 and 65-4101, and amendments thereto.

12 (f)(i) A person registered to practice as an advanced registered nurse 13 practitioner in the state of Kansas immediately prior to the effective date of 14 this act shall be deemed to be licensed to practice as an advanced practice 15 registered nurse under this act and such person shall not be required to file 16 an original application for licensure under this act. Any application for 17 registration filed which has not been granted prior to the effective date of 18 this act shall be processed as an application for licensure under this act.

19 New Sec. 2. (a) As used in sections 2 through 10, and amendments 20 thereto:

(1) "Active midwifery practice" means clinical practice and
 midwifery related administrative, educational and research activities.

23 (2) "Board" means the board of nursing.

24 (3) "Certified nurse-midwife" means an individual who meets the 25 following requirements:

(A) Is educated in the two disciplines of nursing and midwifery;

(B) is currently certified by a certifying board approved by the stateboard of nursing; and

29 (C) is currently licensed under the Kansas nurse practice act.

30 (b) The board may adopt rules and regulations as necessary to 31 administer the provisions of sections 2 through 10, and amendments 32 thereto.

New Sec. 3. (a) In order to obtain authorization from the board to
 practice as a certified nurse-midwife an individual shall meet the following
 requirements:

36 (1) Be licensed to practice professional nursing under the Kansas37 nurse practice act;

(2) has successfully completed a course of study in nurse-midwifery
 in a school of nurse-midwifery approved by the board;

40 (3) has successfully completed a national certification approved by 41 the board; and

42 (4) has successfully completed a refresher course as defined in rules 43 and regulations of the board if the individual has not been in active 1 midwifery practice for five years preceding the application.

2 (b) Approval of schools of nurse-midwifery shall be based on 3 approval standards specified in K.S.A. 65-1133, and amendments thereto.

4 (c) For the purposes of determining whether an individual meets the 5 requirements of subsection (a)(2), the board, by rules and regulations, shall 6 establish criteria for determining whether a particular school of nurse-7 midwifery maintains standards which are at least equal to schools of nurse-8 midwifery which are approved by the board.

9 New Sec. 4. Upon application to the board by any licensed 10 professional nurse in this state and upon satisfaction of the standards and requirements established under this act and K.S.A. 65-1130, and 11 12 amendments thereto, the board shall grant an authorization to the applicant to perform the duties of a certified nurse-midwife and be licensed as an 13 14 advanced practice registered nurse. An application to the board for an authorization, for an authorization with temporary authorization, for 15 biennial renewal of authorization, for reinstatement of authorization and 16 17 for reinstatement of authorization with temporary authorization shall be upon such form and contain such information as the board may require and 18 shall be accompanied by a fee to assist in defraying the expenses in 19 20 connection with the administration of the provisions of this act. The fee 21 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 22 23 shall be no fee assessed for the initial, renewal or reinstatement of the 24 advanced practice registered nurse license as long as the certified nurse-25 midwife maintains authorization. The executive administrator of the board 26 shall remit all moneys received to the state treasurer as provided by K.S.A. 27 74-1108, and amendments thereto.

28 New Sec. 5, (a) All authorizations to practice under this act, whether 29 initial or renewal, shall expire every two years. The biennial authorizations to practice as a certified nurse-midwife shall expire at the same time as the 30 31 license to practice as a registered nurse. The board shall send a notice for renewal of the authorization to practice to every certified nurse-midwife at 32 33 least 60 days prior to the expiration date of such person's authorization to 34 practice. To renew such authorization to practice the certified nursemidwife shall file with the board, before the date of expiration of such 35 36 authorization to practice, a renewal application together with the prescribed biennial renewal fee. Upon satisfaction of the requirements of 37 38 section 7(a), and amendments thereto, the board shall grant the renewal of an authorization to practice as a certified nurse-midwife to the applicant. 39

(b) Any person who fails to secure the renewal of an authorization to
practice prior to the expiration of the authorization may secure a
reinstatement of such lapsed authorization by making application on a
form provided by the board. Such reinstatement shall be granted upon

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receipt of proof that the applicant is competent and qualified to act as a
 certified nurse-midwife, has satisfied all of the requirements and has paid
 the board a reinstatement fee as established by the board by rules and
 regulations in accordance with K.S.A. 65-1118, and amendments thereto.

New Sec. 6. (a) Each certified nurse-midwife shall be authorized to:

6 (1) Provide a full range of primary health care services for women 7 from adolescence to menopause and beyond. These services include 8 primary care, gynecologic and family planning services, pre-conception 9 care, care during pregnancy, childbirth and the postpartum period, care of 10 the normal newborn and treatment of male partners for sexually 11 transmitted infections;

12 (2) provide initial and ongoing comprehensive assessment, diagnosis13 and treatment;

14 (3) conduct physical examinations;

(4) prescribe, distribute and administer medications, devices and
contraceptive methods, and controlled substances in schedules II-V of the
uniform controlled substances act;

(5) admit, manage and discharge patients;

19 (6) utilize and order diagnostic services, including a clinical20 laboratory, sonography, radiology and electronic monitoring;

21 (7) interpret laboratory and diagnostic tests;

(8) order the use of medical devices; and

(9) provide health promotion, disease prevention and individualizedwellness education and counseling.

(b) The surgical procedures performed by a certified nurse-midwife
shall be limited to the following: (1) Episiotomy; (2) repair of episiotomy
or laceration; and (3) circumcision. Any certified nurse-midwife who may
perform other surgical procedures if such certified nurse-midwife meets
the requirements of competencies of the American college of nursemidwife as approved by the board.

(c) Any certified nurse-midwife shall practice within a coordinated
system of health care system and have clinical relationships that provide
for consultation, collaborative management, co-management or referral, as
indicated by the health status of the patient.

(d) Any certified nurse-midwife shall have a written plan for
emergency referrals, with names and contact information of physicians,
hospitals and other medical personnel or facilities to be used in case of
emergency.

New Sec. 7. (a) The applicant for renewal of an authorization to practice as a certified nurse-midwife shall:

41 (1) Have met the continuing education requirements for a certified
42 nurse-midwife as developed by the board or by a national organization
43 whose certifying standards are approved by the board as equal to or greater

1 than the corresponding standards established under this act;

(2) be currently licensed as a professional nurse; and

3 (3) have paid all applicable fees provided for in this act as fixed by 4 rules and regulations of the board.

5 (b) Continuing education credits approved by the board for purposes 6 of this section may be applied to satisfy the continuing education 7 requirements established by the board for licensed professional nurses 8 under K.S.A. 65-1117, and amendments thereto, if the board finds such 9 continuing education credits are equivalent to those required by the board 10 under K.S.A. 65-1117, and amendments thereto.

11 New Sec. 8. (a) Except as otherwise provided in sections 2 through 12 10, and amendments thereto, any licensed professional nurse or licensed 13 practical nurse who engages in nurse-midwifery without being authorized 14 by the board to practice as a certified nurse-midwife is guilty of a class A 15 misdemeanor.

(b) Any person, corporation, association or other entity, except as
otherwise provided in sections 2 through 10, and amendments thereto, who
engages in any of the following activities is guilty of a class B
misdemeanor except that upon conviction of a second or subsequent
violation of this subsection, the person is guilty of a class A misdemeanor:

(1) Employing or offering to employ any person as a certified nurse midwife with knowledge that such person is not authorized by the board to
 practice as a certified nurse-midwife;

(2) fraudulently seeking, obtaining or furnishing documents
indicating that a person is authorized by the board to practice as a certified
nurse-midwife when such person is not so authorized, or aiding and
abetting such activities; or

(3) using in connection with one's name the title certified nursemidwife, the abbreviation NM or CNM, or any other designation tending
to imply that such person is authorized by the board to practice as a
certified nurse-midwife when such person is not authorized by the board to
practice as a certified nurse-midwife.

New Sec. 9. (a) The board, by rules and regulations, shall establish a program of transition to full practice for all persons who, on and after the effective date of this act, are granted initial licensure as an advanced practice registered nurse in the classification of nurse- midwife, who have less than 1,500 hours of licensed active practice as an advanced practice registered nurse in their initial roles.

(b) As part of the program of transition to full practice, a certified
nurse-midwife shall complete, within two years from the commencement
of the program by the certified nurse- midwife, a transition to full practice
period of 1,500 hours of licensed active practice either with a certified
nurse-midwife or with a physician. The certified nurse-midwife shall

1 administer medications as needed for safety and therapeutic purposes.

(c) As part of the program of transition to full practice, the board shall
specify the manner and form in which the advanced practice registered
nurse in the classification of nurse-midwife participating in the program
may identify oneself professionally and to the public.

6 (d) The certified nurse-midwife shall be responsible for completing 7 the required documentation for the program of transition to full practice as 8 specified by the board. Upon the successful completion of the program of 9 transition to full practice, the board of nursing shall authorize the certified 10 nurse-midwife to engage in the practice of advanced practice registered 11 nursing without the limitations of this subsection and as otherwise 12 authorized by law.

(e) A person licensed to practice as a certified nurse-midwife in the
state immediately prior to the effective date of this act shall be deemed to
be licensed to practice as a certified nurse-midwife under this act and such
person shall not be required to file an original application for licensure
under this act. Any application for licensure filed which has not been
granted prior to the effective date of this act shall be processed as an
application for licensure under this act.

(f) All rules and regulations of the board in effect prior to the
effective date of this act which were adopted by the board and are
applicable to certified nurse-midwives shall continue to be effective until
revised, amended, revoked or nullified pursuant to law.

New Sec. 10. Sections 2 through 10, and amendments thereto, shall be part of and supplemental to the Kansas nurse practice act.

26 Sec. 11. K.S.A. 2014 Supp. 65-1130 is hereby repealed.

27 Sec. 12. This act shall take effect and be in force from and after its 28 publication in the statute book.

HOUSE BILL No. 2205

By Committee on Health and Human Services

2-3

AN ACT concerning advanced practice registered nurses; amending
 K.S.A. 2014 Supp. 65-1113 and 65-1130 and repealing the existing
 sections.

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Be it enacted by the Legislature of the State of Kansas:

New Section 1. (a) For the purposes of this act, the board of nursing 6 and the board of healing arts shall jointly adopt rules and regulations 7 relating to the role of advanced practice registered nurses including such 8 conditions, limitations and restrictions that the boards determine to be 9 necessary to protect the public health and safety, and to protect the public 10 from advanced practice registered nurses performing functions and 11 procedures for which they lack adequate education, training and 12 qualifications. Such rules and regulations shall include the authority to 13 prescribe medications, sign for and order tests and treatments, and perform 14 other delegated medical acts and functions, and shall specify those services 15 or clinical settings which shall require a collaborative practice agreement 16 or protocol with a physician. In such cases, the scope of authority of the 17 advanced practice registered nurse shall be within and consistent with the 18 normal and customary specialty, practice and competence of any 19 20 collaborating, delegating or supervising physician.

21 (b) In developing the rules and regulations defining the role of the 22 advanced practice registered nurse, the boards shall consider:

(1) The different practice and clinical settings in which advanced
 practice registered nurses function, and the differing degrees of
 collaboration, direction or supervision appropriate for such settings;

26 (2) the education required for licensure as an advanced practice 27 registered nurse;

(3) the type of nursing practice and preparation in specialized
advanced practice skills involved in each role of the advanced practice
registered nurse established by the board;

31 (4) the scope and limitations of advanced practice nursing prescribed32 by national advanced practice organizations; and

(5) acts recognized by the nursing profession as appropriate to beperformed by persons with post basic education in nursing.

35 (c) Subject to the provisions of subsection (a), the rules and 36 regulations adopted pursuant to this section shall:

1 (1) Establish roles and identify titles and abbreviations of advanced 2 practice registered nurses which are consistent with nursing practice 3 specialties recognized by the nursing profession; and

4 (2) establish education and qualifications necessary for licensure for each role of advanced practice registered nurse established by the board at 5 a level adequate to assure the competent performance by advanced 6 practice registered nurses of functions and procedures which advanced 7 8 practice registered nurses are authorized to perform. Advanced practice registered nursing is based on knowledge and skills acquired in basic 9 10 nursing education, licensure as a registered nurse and graduation from or completion of a master's or higher degree in one of the advanced practice 11 registered nurse roles approved by the board of nursing. 12

13 (d) The board of nursing and the state board of healing arts shall constitute a joint adopting authority for the purpose of adopting rules and 14 regulations as provided in this section. On and before July 1, 2016, rules 15 and regulations adopted under this section shall be to implement the 16 provisions of K.S.A. 2014 Supp. 65-1130, as that section will be amended 17 18 on July 1, 2016, by section 4 of this act even though such section will not be effective until July 1, 2016, and such rules and regulations shall become 19 effective on July 1, 2016. On and after July 1, 2016, rules and regulations 20 adopted by the joint adopting authority under this section shall apply as 21 22 provided in this section.

(e) The joint adopting authority shall provide, on or before January
15, 2016, a report to the senate committee on public health and welfare
and to the house committee on health and human services concerning the
progress made toward adopting rules and regulations under this section
which report shall include a copy of the rules and regulations which have
been developed.

29 New Sec. 2. (a) For the purposes of assisting the board of nursing and board of healing arts to develop the rules and regulations required to be 30 adopted jointly under section 1, and amendments thereto, there is hereby 31 established a joint APRN advisory committee, which shall be attached to 32 the board of nursing. The committee shall be advisory to the boards of 33 nursing and healing arts on matters relating to APRN licensure, regulation 34 35 and practice and shall assist with the development of regulations which define the role of advanced practice registered nurses and establish 36 37 limitations and restrictions on such role.

(b) The joint committee shall be composed of six members. Three members shall be appointed by the board of nursing, and three members shall be appointed by the board of healing arts. All appointees of the board of nursing must hold a license as an advanced practice registered nurse and be actively engaged in advanced practice nursing. All appointees of the board of healing arts must hold a license to practice medicine and surgery

and be actively engaged in the practice of medicine and surgery. One member appointed by the board of nursing must be a member of that board, and one member appointed by the board of healing arts must be a member of that board. In appointing their remaining representatives on the joint committee, the boards shall consider any names submitted by the respective professional associations.

7 (c) All members shall serve at the pleasure of the appointing board, 8 and any vacancies shall be filled by the respective appointing boards. 9 During odd-numbered years, the member of the joint committee who is a 10 member of the board of nursing shall serve as chairperson, and during 11 even-numbered years, the member of the joint committee who is a member 12 of the board of healing arts shall serve as chairperson. A quorum of the joint committee shall be four, and all actions of the committee shall be 13 14 taken by a majority of those present when there is a quorum.

15 (d) The joint committee shall meet within the state on the call of the 16 chairperson or as requested by the two appointing boards.

17 (e) Members of the joint committee shall receive from their 18 appointing board amounts as provided in K.S.A. 75-3223(e), and 19 amendments thereto, when attending meetings of the committee. The 20 expenses of the committee shall be shared equally by the board of nursing 21 and the board of healing arts.

Sec. 3. On and after July 1, 2016, K.S.A. 2014 Supp. 65-1113 is
hereby amended to read as follows: 65-1113. When used in this act and the
act of which this section is amendatory:

(a) "Board" means the board of nursing.

(b) "Diagnosis" in the context of nursing practice means that
identification of and discrimination between physical and psychosocial
signs and symptoms essential to effective execution and management of
the nursing regimen and shall be construed as distinct from a medical
diagnosis.

(c) "Treatment" means the selection and performance of those
 therapeutic measures essential to effective execution and management of
 the nursing regimen, and any prescribed medical regimen.

34 (d) Practice of nursing. (1) The practice of professional nursing as 35 performed by a registered professional nurse for compensation or 36 gratuitously, except as permitted by K.S.A. 65-1124, and amendments 37 thereto, means the process in which substantial specialized knowledge 38 derived from the biological, physical, and behavioral sciences is applied 39 to: the care, diagnosis, treatment, counsel and health teaching of persons 40 who are experiencing changes in the normal health processes or who 41 require assistance in the maintenance of health or the prevention or 42 management of illness, injury or infirmity; administration, supervision or 43 teaching of the process as defined in this section; and the execution of the

1 medical regimen as prescribed by a person licensed to practice medicine 2 and surgery or a person licensed to practice dentistry. (2) The practice of 3 nursing as a licensed practical nurse means the performance for 4 compensation or gratuitously, except as permitted by K.S.A. 65-1124, and 5 any amendments thereto, of tasks and responsibilities defined in-part (1) of 6 this subsection (d)(1) which tasks and responsibilities are based on 7 acceptable educational preparation within the framework of supportive and 8 restorative care under the direction of a registered professional nurse, a 9 person licensed to practice medicine and surgery or a person licensed to 10 practice dentistry.

11 (e) A "professional nurse" means a person who is licensed to practice 12 professional nursing as defined in part (1) of subsection (d)(1) of this 13 section.

14 (f) A "practical nurse" means a person who is licensed to practice 15 practical nursing as defined in-part (2) of subsection (d)(2) of this section.

(g) "Advanced practice registered nurse" or "APRN" means a 16 17 professional nurse who holds a license from the board to function as a 18 professional nurse in an advanced role by virtue of additional knowledge 19 and skills gained through a formal advanced practice education program 20 of nursing in a specialty area, and this advanced role shall be defined by 21 rules and regulations which are jointly adopted by the board of nursing 22 and the board of healing arts in accordance with section 1, and 23 amendments thereto, and K.S.A. 65-1130, and amendments thereto.

(h) "Joint adopting authority" means the state board of nursing and
the state board of healing arts as specified in section 1, and amendments
thereto.

Sec. 4. On and after July 1, 2016, K.S.A. 2014 Supp. 65-1130 is hereby amended to read as follows: 65-1130. (a) No professional nurse shall announce or represent to the public that such person is an advanced practice registered nurse unless such professional nurse has complied with requirements established-by-the board pursuant to law and holds a valid license as an advanced practice registered nurse in accordance with the provisions of this section.

34 (b) The-board joint adopting authority shall establish standards and 35 requirements for any professional nurse who desires to obtain licensure as 36 an advanced practice registered nurse. Such standards and requirements 37 shall include, but not be limited to, standards and requirements relating to 38 the education of advanced practice registered nurses. The board of nursing 39 may give such examinations and secure such assistance as it deems 40 necessary to determine the qualifications of applicants.

41 (c) The board shall adopt rules and regulations applicable to advanced
 42 practice registered nurses which:

43 (1) Establish roles and identify titles and abbreviations of advanced

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practice-registered-nurses-which-are consistent-with-nursing-practice specialtics recognized by the nursing profession.

3 (2) Establish education and qualifications necessary for licensure-for 4 each role of advanced practice registered nurse established by the board at 5 a-level-adequate-to-assure-the-competent-performance by advancedpractice registered nurses of functions and procedures which advanced 6 7 practice registered nurses are authorized to perform. Advanced practice-8 registered nursing is based on knowledge and skills acquired in basic-9 nursing education, licensure as a registered nurse and graduation from or 10 completion of a master's or higher degree in one of the advanced practice 11 registered nurse roles approved by the board of nursing.

12 (3) Define the role of advanced practice registered nurses and 13 establish-limitations-and-restrictions on such role. The board-shall adopt a 14 definition of the role under this subsection (c)(3) which is consistent with 15 the education and qualifications required to obtain a license-as an-16 advanced practice registered nurse, which protects the public from persons 17 performing functions and procedures as advanced practice registered 18 nurses-for-which they lack adequate education and qualifications and 19 which authorizes advanced practice registered nurses to perform acts 20generally recognized by the profession of nursing as capable of being-21 performed, in a manner consistent with the public health and safety, by-22 persons-with postbasic education in nursing. In defining-such role the-23 board shall-consider: (A) The education-required for a licensure as an 24 advanced practice registered nurse; (B) the type of nursing practice and 25 preparation in specialized advanced practice skills involved in each role of 26 advanced practice registered nurse established by the board; (C) the scope 27 and limitations-of-advanced practice nursing-prescribed by national-28 advanced-practice organizations; and (D) acts-recognized by the nursing-29 profession as appropriate to be performed by persons with postbasic-30 education in nursing. 31 (d) An advanced practice registered nurse may prescribe drugs 32 pursuant to a written protocol as authorized by a responsible physician.

33 Each written protocol shall contain a precise and detailed medical plan of 34 eare for each classification of disease or injury for which the advanced-35 practice-registered nurse is authorized to prescribe and shall specify-all-36 drugs which may be prescribed by the advanced practice registered nurse. 37 Any written prescription order shall include the name, address and 38 telephone number of the responsible physician pursuant to the rules and 39 regulations adopted by the joint adopting authority. The advanced practice 40 registered nurse may not dispense drugs, but may request, receive and sign 41 for professional samples and may distribute professional samples to 42 patients-pursuant to a written protocol-as-authorized by a responsible-43 physician. In order to prescribe controlled substances, the advanced

1 practice registered nurse shall (1) register with the federal drug 2 enforcement administration; and (2) notify the board of the name and address of the responsible physician or physicians. In no case shall-the-3 4 scope of authority of the advanced practice-registered nurse exceed-thenormal and customary-practice-of-the-responsible physician. An advanced 5 practice registered nurse certified in the role of registered nurse anesthetist 6 7 while functioning as a registered nurse anesthetist under K.S.A. 65-1151 to 8 65-1164, inclusive, and amendments thereto, shall be subject to the 9 provisions of K.S.A. 65-1151 to 65-1164, inclusive, and amendments 10 thereto, with respect to drugs and anesthetic agents and shall not be subject to the provisions of this subsection. For the purposes of this subsection, 11 12 "responsible physician" means a person licensed to practice medicine and surgery in Kansas who has accepted responsibility for the protocol and the 13 14 actions of the advanced practice registered nurse when preseribing drugs.

15 (e)(d) As used in this section, "drug" means those articles and 16 substances defined as drugs in K.S.A. 65-1626 and 65-4101, and 17 amendments thereto.

(f)(e) A person-registered licensed to practice as an advanced 18 registered nurse practitioner in the state of Kansas immediately prior to the 19 effective date of this act July 1, 2016, shall be deemed to be licensed to 20 practice as an advanced practice registered nurse under this act and such 21 22 person shall not be required to file an original application for licensure under this act. Any application for registration filed which has not been 23 24 granted prior to the effective date of this act July 1, 2016, shall be 25 processed as an application for licensure under this act.

(f) All rules and regulations of the board in effect prior to July 1,
2016, which were adopted under this section and are applicable to
advanced practice registered nurses shall continue to be effective until
revised, amended, revoked or multified pursuant to law.

30 Sec. 5. On July 1, 2016, K.S.A. 2014 Supp. 65-1113 and 65-1130 are 31 hereby repealed.

32 Sec. 6. This act shall take effect and be in force from and after and its 33 publication in the statute book.

6

Session of 2015

SENATE BILL No. 218

By Committee on Ways and Means

2-12

AN ACT concerning advanced practice registered nurses; amending
 K.S.A. 2014 Supp. 65-1113 and 65-1130 and repealing the existing
 sections.

4 5

Be it enacted by the Legislature of the State of Kansas:

6 New Section 1. (a) For the purposes of this act, the board of nursing and the board of healing arts shall jointly adopt rules and regulations 7 relating to the role of advanced practice registered nurses including such 8 9 conditions, limitations and restrictions that the boards determine to be necessary to protect the public health and safety, and to protect the public 10 from advanced practice registered nurses performing functions and 11 procedures for which they lack adequate education, training and 12 qualifications. Such rules and regulations shall include the authority to 13 prescribe medications, sign for and order tests and treatments, and perform 14 other delegated medical acts and functions, and shall specify those services 15 or clinical settings which shall require a collaborative practice agreement 16 or protocol with a physician. In such cases, the scope of authority of the 17 advanced practice registered nurse shall be within and consistent with the 18 normal and customary specialty, practice and competence of any 19 collaborating, delegating or supervising physician. 20

21 (b) In developing the rules and regulations defining the role of the 22 advanced practice registered nurse, the boards shall consider:

(1) The different practice and clinical settings in which advanced
 practice registered nurses function, and the differing degrees of
 collaboration, direction or supervision appropriate for such settings;

26 (2) the education required for licensure as an advanced practice 27 registered nurse;

(3) the type of nursing practice and preparation in specialized
advanced practice skills involved in each role of the advanced practice
registered nurse established by the board;

(4) the scope and limitations of advanced practice nursing prescribedby national advanced practice organizations; and

(5) acts recognized by the nursing profession as appropriate to beperformed by persons with post basic education in nursing.

35 (c) Subject to the provisions of subsection (a), the rules and 36 regulations adopted pursuant to this section shall: 1 (1) Establish roles and identify titles and abbreviations of advanced 2 practice registered nurses which are consistent with nursing practice 3 specialties recognized by the nursing profession; and

(2) establish education and qualifications necessary for licensure for 4 5 each role of advanced practice registered nurse established by the board at 6 a level adequate to assure the competent performance by advanced practice registered nurses of functions and procedures which advanced 7 practice registered nurses are authorized to perform. Advanced practice 8 9 registered nursing is based on knowledge and skills acquired in basic nursing education, licensure as a registered nurse and graduation from or 10 completion of a master's or higher degree in one of the advanced practice 11 registered nurse roles approved by the board of nursing. 12

(d) The board of nursing and the state board of healing arts shall 13 14 constitute a joint adopting authority for the purpose of adopting rules and regulations as provided in this section. On and before July 1, 2016, rules 15 16 and regulations adopted under this section shall be to implement the provisions of K.S.A. 2014 Supp. 65-1130, as that section will be amended 17 on July 1, 2016, by section 4 of this act even though such section will not 18 be effective until July 1, 2016, and such rules and regulations shall become 19 20 effective on July 1, 2016. On and after July 1, 2016, rules and regulations adopted by the joint adopting authority under this section shall apply as 21 22 provided in this section.

(e) The joint adopting authority shall provide, on or before January
15, 2016, a report to the senate committee on public health and welfare
and to the house committee on health and human services concerning the
progress made toward adopting rules and regulations under this section,
which report shall include a copy of the rules and regulations which have
been developed.

29 New Sec. 2. (a) For the purposes of assisting the board of nursing and board of healing arts to develop the rules and regulations required to be 30 31 adopted jointly under section 1, and amendments thereto, there is hereby established a joint APRN advisory committee, which shall be attached to 32 the board of nursing. The committee shall be advisory to the boards of 33 34 nursing and healing arts on matters relating to APRN licensure, regulation and practice and shall assist with the development of regulations which 35 define the role of advanced practice registered nurses and establish 36 37 limitations and restrictions on such role.

(b) The joint committee shall be composed of six members. Three members shall be appointed by the board of nursing, and three members shall be appointed by the board of healing arts. All appointees of the board of nursing must hold a license as an advanced practice registered nurse and be actively engaged in advanced practice nursing. All appointees of the board of healing arts must hold a license to practice medicine and surgery and be actively engaged in the practice of medicine and surgery. One member appointed by the board of nursing must be a member of that board, and one member appointed by the board of healing arts must be a member of that board. In appointing their remaining representatives on the joint committee, the boards shall consider any names submitted by the respective professional associations.

7 (c) All members shall serve at the pleasure of the appointing board, 8 and any vacancies shall be filled by the respective appointing boards. 9 During odd-numbered years, the member of the joint committee who is a 10 member of the board of nursing shall serve as chairperson, and during 11 even-numbered years, the member of the joint committee who is a member of the board of healing arts shall serve as chairperson. A quorum of the 12 13 joint committee shall be four, and all actions of the committee shall be 14 taken by a majority of those present when there is a quorum.

15 (d) The joint committee shall meet within the state on the call of the 16 chairperson or as requested by the two appointing boards.

17 (e) Members of the joint committee shall receive from their 18 appointing board amounts as provided in K.S.A. 75-3223(e), and 19 amendments thereto, when attending meetings of the committee. The 20 expenses of the committee shall be shared equally by the board of nursing 21 and the board of healing arts.

Sec. 3. On and after July 1, 2016, K.S.A. 2014 Supp. 65-1113 is
hereby amended to read as follows: 65-1113. When used in this act and the
act of which this section is amendatory:

25 (a) "Board" means the board of nursing.

(b) "Diagnosis" in the context of nursing practice means that
identification of and discrimination between physical and psychosocial
signs and symptoms essential to effective execution and management of
the nursing regimen and shall be construed as distinct from a medical
diagnosis.

(c) "Treatment" means the selection and performance of those
 therapeutic measures essential to effective execution and management of
 the nursing regimen, and any prescribed medical regimen.

34 (d) Practice of nursing. (1) The practice of professional nursing as 35 performed by a registered professional nurse for compensation or 36 gratuitously, except as permitted by K.S.A. 65-1124, and amendments thereto, means the process in which substantial specialized knowledge 37 38 derived from the biological, physical, and behavioral sciences is applied 39 to: the care, diagnosis, treatment, counsel and health teaching of persons 40 who are experiencing changes in the normal health processes or who 41 require assistance in the maintenance of health or the prevention or 42 management of illness, injury or infirmity; administration, supervision or 43 teaching of the process as defined in this section; and the execution of the

medical regimen as prescribed by a person licensed to practice medicine 1 and surgery or a person licensed to practice dentistry. (2) The practice of 2 3 nursing as a licensed practical nurse means the performance for compensation or gratuitously, except as permitted by K.S.A. 65-1124, and 4 5 any amendments thereto, of tasks and responsibilities defined in part (1) of this subsection (d)(1) which tasks and responsibilities are based on 6 acceptable educational preparation within the framework of supportive and 7 8 restorative care under the direction of a registered professional nurse, a person licensed to practice medicine and surgery or a person licensed to 9 10 practice dentistry.

11 (e) A "professional nurse" means a person who is licensed to practice 12 professional nursing as defined in part (1) of subsection (d)(1) of this 13 section.

14 (f) A "practical nurse" means a person who is licensed to practice 15 practical nursing as defined in part (2) of subsection (d)(2) of this section.

(g) "Advanced practice registered nurse" or "APRN" means a 16 professional nurse who holds a license from the board to function as a 17 professional nurse in an advanced role by virtue of additional knowledge 18 19 and skills gained through a formal advanced practice education program 20 of nursing in a specialty area, and this advanced role shall be defined by rules and regulations which are jointly adopted by the board of mursing 21 and the board of healing arts in accordance with section 1, and 22 23 amendments thereto, and K.S.A. 65-1130, and amendments thereto.

(h) "Joint adopting authority" means the state board of nursing and
the state board of healing arts as specified in section 1, and amendments
thereto.

Sec. 4. On and after July 1, 2016, K.S.A. 2014 Supp. 65-1130 is hereby amended to read as follows: 65-1130. (a) No professional nurse shall announce or represent to the public that such person is an advanced practice registered nurse unless such professional nurse has complied with requirements established by the board *pursuant to law* and holds a valid license as an advanced practice registered nurse in accordance with the provisions of this section.

(b) The-board joint adopting authority shall establish standards and requirements for any professional nurse who desires to obtain licensure as an advanced practice registered nurse. Such standards and requirements shall include, but not be limited to, standards and requirements relating to the education of advanced practice registered nurses. The board of nursing may give such examinations and secure such assistance as it deems necessary to determine the qualifications of applicants.

41 (c) The board-shall adopt rules and regulations applicable to advanced
 42 practice registered nurses which:

43 (1) Establish roles and identify titles and abbreviations of advanced

1 practice registered nurses which are consistent with nursing practice

2 specialties recognized by the nursing profession.

3 (2) Establish education and qualifications necessary for licensure for 4 each role of advanced practice registered nurse established by the board at 5 a-level-adequate-to-assure-the competent performance-by-advanced-6 practice registered nurses of functions and procedures which advanced 7 practice registered nurses are authorized to perform. Advanced practice-8 registered nursing is based on knowledge and skills acquired in basic-9 nursing education, licensure as a registered nurse and graduation from or 10 completion of a master's or higher degree in one of the advanced practice 11 registered nurse roles approved by the board of nursing.

12 (3) Define the role of advanced practice registered nurses and 13 establish limitations and restrictions on such role. The board shall-adopt a 14 definition of the role under this subsection (c)(3) which is consistent with 15 the education and qualifications required to obtain a license as an-16 advanced practice registered nurse, which protects the public from persons 17 performing functions and procedures as advanced practice registered 18 nurses for which they lack adequate education and qualifications and-19 which authorizes advanced practice registered nurses to perform acts-20 generally-recognized by the profession of nursing as capable of being-21 performed, in a manner consistent with the public health and safety, by-22 persons with postbasic education in nursing. In defining such role the-23 board-shall consider: (A) The education required for a licensure as an-24 advanced practice registered nurse; (B) the type of nursing practice and 25 preparation in specialized advanced practice skills involved in each role of advanced practice registered nurse established by the board; (C) the scope 26 27 and-limitations of advanced-practice-nursing prescribed-by national-28 advanced practice organizations; and (D) acts recognized by the nursing 29 profession as appropriate to be performed by persons with postbasic-30 education in nursing. 31 (d)—An advanced practice registered nurse may prescribe drugs 32 pursuant to a written protocol as authorized by a responsible physician. Each written-protocol-shall contain a precise and detailed medical plan of 33

34 eare for each classification of disease or injury for which the advanced-35 practice registered nurse is authorized-to-prescribe and shall-specify all-36 drugs which may be prescribed by the advanced practice registered nurse. 37 Any written-prescription order shall include the name, address-and-38 telephone-number of the responsible physician pursuant to the rules and 39 regulations adopted by the joint adopting authority. The advanced practice 40 registered nurse may not dispense drugs, but may request, receive and sign 41 for professional samples and may distribute professional samples to 42 patients pursuant to a written protocol as authorized by a responsible-

43 physician. In order to prescribe controlled substances, the advanced

practice registered nurse shall-(1) register with the federal drug 1 2 enforcement administration; and (2) notify the board of the name andaddress-of-the-responsible-physician-or-physicians. In no case shall the 3 4 scope of authority of the advanced practice registered nurse exceed the 5 normal and customary practice of the responsible physician. An advanced practice registered nurse certified in the role of registered nurse anesthetist 6 7 while functioning as a registered nurse anesthetist under K.S.A. 65-1151 to 65-1164, inclusive, and amendments thereto, shall be subject to the 8 9 provisions of K.S.A. 65-1151 to 65-1164, inclusive, and amendments 10 thereto, with respect to drugs and anesthetic agents and shall not be subject to the provisions of this subsection. For the purposes of this subsection, 11 12 "responsible physician" means a person licensed to practice medicine and 13 surgery in Kansas who has accepted responsibility for the protocol and the 14 actions of the advanced practice registered nurse when prescribing drugs.

15 (c)(d) As used in this section, "drug" means those articles and 16 substances defined as drugs in K.S.A. 65-1626 and 65-4101, and 17 amendments thereto.

18 (f)(e) A person-registered licensed to practice as an advanced registered nurse practitioner in the state of Kansas immediately prior to-the 19 20 effective date of this act July 1, 2016, shall be deemed to be licensed to 21 practice as an advanced practice registered nurse under this act and such person shall not be required to file an original application for licensure 22 23 under this act. Any application for registration filed which has not been granted prior to-the effective date of this act July 1, 2016, shall be 24 25 processed as an application for licensure under this act.

(f) All rules and regulations of the board in effect prior to July 1,
2016, which were adopted under this section and are applicable to
advanced practice registered nurses shall continue to be effective until
revised, amended, revoked or nullified pursuant to law.

30 Sec. 5. On July 1, 2016, K.S.A. 2014 Supp. 65-1113 and 65-1130 are 31 hereby repealed.

32 Sec. 6. This act shall take effect and be in force from and after its 33 publication in the statute book.

SENATE BILL No. 141

By Committee on Public Health and Welfare

2-3

AN ACT concerning the state board of healing arts; podiatrists; scope of
practice; amending K.S.A. 65-28a02, as amended by section 42 of
chapter 131 of the 2014 Session Laws of Kansas and K.S.A. 2014
Supp. 65-1130 and repealing the existing sections.

5 6

Be it enacted by the Legislature of the State of Kansas:

New Section 1. (a) A podiatrist may delegate to a licensed physician 7 assistant and licensed advanced practice registered nurse the authority to 8 9 perform acts that constitute the practice of podiatry to the extent and in the manner authorized by rules and regulations promulgated by the state board 10 of healing arts. Such acts shall be consistent with sound practices of 11 podiatry. Each prescription issued by a physician assistant and an 12 advanced practice registered nurse shall have the name of the supervising 13 podiatrist printed on the prescription. Nothing in this section shall limit the 14 ability of otherwise licensed health care providers to perform delegated 15 acts. The dispensing of prescription medication by a physician assistant 16 and an advanced practice registered nurse shall be subject to the provisions 17 of K.S.A. 65-28a08, and amendments thereto. The dispensing of 18 prescription medication by an advanced practice registered nurse shall be 19 subject to the provisions of K.S.A. 65-1130, and amendments thereto. 20

(b) The board shall limit the number of physician assistants and 21 advanced practice registered nurses a supervising podiatrist may be 22 responsible for at any one time to the equivalent of two full-time physician 23 assistants and advanced practice registered nurses combined as approved 24 in each case by the board. Any limitation on the number of physician 25 assistants and advanced practice registered nurses combined in this 26 subsection shall not apply to services performed in a medical care facility, 27 28 as defined in K.S.A. 65-425, and amendments thereto.

(c) The board shall adopt rules and regulations governing the
direction and supervision of a physician assistant and an advanced practice
registered nurse by the supervising podiatrist.

Sec. 2. K.S.A. 2014 Supp. 65-1130 is hereby amended to read as follows: 65-1130. (a) No professional nurse shall announce or represent to the public that such person is an advanced practice registered nurse unless such professional nurse has complied with requirements established by the board and holds a valid license as an advanced practice registered nurse in 1 accordance with the provisions of this section.

(b) The board shall establish standards and requirements for any professional nurse who desires to obtain licensure as an advanced practice registered nurse. Such standards and requirements shall include, but not be limited to, standards and requirements relating to the education of advanced practice registered nurses. The board may give such examinations and secure such assistance as it deems necessary to determine the qualifications of applicants.

9 (c) The board shall adopt rules and regulations applicable to advanced 10 practice registered nurses which:

(1) Establish roles and identify titles and abbreviations of advanced
 practice registered nurses which are consistent with nursing practice
 specialties recognized by the nursing profession.

(2) Establish education and qualifications necessary for licensure for 14 each role of advanced practice registered nurse established by the board at 15 a level adequate to assure the competent performance by advanced 16 practice registered nurses of functions and procedures which advanced 17 practice registered nurses are authorized to perform. Advanced practice 18 19 registered nursing is based on knowledge and skills acquired in basic nursing education, licensure as a registered nurse and graduation from or 20 completion of a master's or higher degree in one of the advanced practice 21 registered nurse roles approved by the board of nursing. 22

(3) Define the role of advanced practice registered nurses and 23 24 establish limitations and restrictions on such role. The board shall adopt a definition of the role under this subsection (c)(3) which is consistent with 25 the education and qualifications required to obtain a license as an 26 advanced practice registered nurse, which protects the public from persons 27 performing functions and procedures as advanced practice registered 28 nurses for which they lack adequate education and qualifications and 29 30 which authorizes advanced practice registered nurses to perform acts generally recognized by the profession of nursing as capable of being 31 performed, in a manner consistent with the public health and safety, by 32 persons with postbasic education in nursing. In defining such role the 33 board shall consider: (A) The education required for a licensure as an 34 35 advanced practice registered nurse; (B) the type of nursing practice and preparation in specialized advanced practice skills involved in each role of 36 advanced practice registered nurse established by the board; (C) the scope 37 38 and limitations of advanced practice nursing prescribed by national advanced practice organizations; and (D) acts recognized by the nursing 39 profession as appropriate to be performed by persons with postbasic 40 41 education in nursing.

42 (d) An advanced practice registered nurse may prescribe drugs 43 pursuant to a written protocol as authorized by a responsible physician.

1 Each written protocol shall contain a precise and detailed medical plan of 2 care for each classification of disease or injury for which the advanced practice registered nurse is authorized to prescribe and shall specify all 3 drugs which may be prescribed by the advanced practice registered nurse. 4 5 Any written prescription order shall include the name, address and 6 telephone number of the responsible physician. The advanced practice 7 registered nurse may not dispense drugs, but may request, receive and sign 8 for professional samples and may distribute professional samples to 9 patients pursuant to a written protocol as authorized by a responsible 10 physician. In order to prescribe controlled substances, the advanced practice registered nurse shall: (1) Register with the federal drug 11 enforcement administration; and (2) notify the board of the name and 12 13 address of the responsible physician or physicians. In no case shall the scope of authority of the advanced practice registered nurse exceed the 14 15 normal and customary practice of the responsible physician. An advanced practice registered nurse certified in the role of registered nurse anesthetist 16 17 while functioning as a registered nurse anesthetist under K.S.A. 65-1151 to 18 65-1164, inclusive, and amendments thereto, shall be subject to the provisions of K.S.A. 65-1151 to 65-1164, inclusive, and amendments 19 20 thereto, with respect to drugs and anesthetic agents and shall not be subject to the provisions of this subsection. For the purposes of this subsection, 21 22 "responsible physician" means a person licensed to practice medicine and 23 surgery and a person licensed to practice podiatry in Kansas who has 24 accepted responsibility for the protocol and the actions of the advanced 25 practice registered nurse when prescribing drugs.

(e) As used in this section, "drug" means those articles and substances
defined as drugs in K.S.A. 65-1626 and 65-4101, and amendments thereto.

(f) A person registered to practice as an advanced registered nurse practitioner in the state of Kansas immediately prior to the effective date of this act shall be deemed to be licensed to practice as an advanced practice registered nurse under this act and such person shall not be required to file an original application for licensure under this act. Any application for registration filed which has not been granted prior to the effective date of this act shall be processed as an application for licensure under this act.

Sec. 3. K.S.A. 65-28a02, as amended by section 42 of chapter 131 of the 2014 Session Laws of Kansas is hereby amended to read as follows: 65-28a02. (a) The following words and phrases when used in the physician assistant licensure act shall have the meanings respectively ascribed to them in this section:

40 (1) "Board" means the state board of healing arts.

41 (2) "Direction and supervision" means the guidance, direction and 42 coordination of activities of a physician assistant by such physician 43 assistant's supervising physician, whether written or verbal, whether immediate or by prior arrangement, in accordance with standards established by the board by rules and regulations, which standards shall be designed to ensure adequate direction and supervision by the supervising physician of the physician assistant. The term "direction and supervision" shall not be construed to mean that the immediate or physical presence of the supervising physician is required during the performance of the physician assistant.

8 (3) "Physician" means any person licensed by the state board of 9 healing arts to practice medicine and surgery *and any person licensed by* 10 *the state board of healing arts to practice podiatry.*

11 (4) "Physician assistant" means a person who is licensed in 12 accordance with the provisions of K.S.A. 65-28a04, and amendments 13 thereto, and who provides patient services under the direction and 14 supervision of a supervising physician.

15 (5) "Supervising physician" means a physician who has accepted 16 responsibility for the medical services rendered and actions of the 17 physician assistant while performing under the direction and supervision 18 of the supervising physician.

(6) "Licensee," for purposes of the physician assistant licensure act,
 means all persons issued a license or temporary license pursuant to the
 physician assistant licensure act.

(7) "License," for purposes of the physician assistant licensure act,
 means any license or temporary license granted by the physician assistant
 licensure act.

25 Sec. 4. K.S.A. 65-28a02, as amended by section 42 of chapter 131 of 26 the 2014 Session Laws of Kansas and K.S.A. 2014 Supp. 65-1130 are 27 hereby repealed.

28 Sec. 5. This act shall take effect and be in force from and after July 1, 29 2016 and its publication in the statute book. Session of 2015

HOUSE BILL No. 2321

By Committee on Health and Human Services

2-11

1 AN ACT concerning health care; expanding the definition of charitable 2 health care provider; amending K.S.A. 2014 Supp. 75-6102 and 3 repealing the existing section. 4 5 Be it enacted by the Legislature of the State of Kansas: Section 1. K.S.A. 2014 Supp. 75-6102 is hereby amended to read as 6 follows: 75-6102. As used in K.S.A. 75-6101 through 75-6118, and 7 amendments thereto, unless the context clearly requires otherwise: 8 9 (a) "State" means the state of Kansas and any department or branch of state government, or any agency, authority, institution or other 10 11 instrumentality thereof. 12 (b) "Municipality" means any county, township, city, school district or other political or taxing subdivision of the state, or any agency, 13 authority, institution or other instrumentality thereof. 14 (c) "Governmental entity" means state or municipality. 15 (d) (1) "Employee" means: (A) Any officer, employee, servant or 16 17 member of a board, commission, committee, division, department, branch or council of a governmental entity, including elected or appointed 18 officials and persons acting on behalf or in service of a governmental 19 entity in any official capacity, whether with or without compensation and a 20 21 charitable health care provider; 22 (B) any steward or racing judge appointed pursuant to K.S.A. 74-8818, and amendments thereto, regardless of whether the services of such 23 steward or racing judge are rendered pursuant to contract as an 24 25 independent contractor; (C) employees of the United States marshal's service engaged in the 26 transportation of inmates on behalf of the secretary of corrections; 27 (D) a person who is an employee of a nonprofit independent 28 contractor, other than a municipality, under contract to provide educational 29 or vocational training to inmates in the custody of the secretary of 30 corrections and who is engaged in providing such service in an institution 31 under the control of the secretary of corrections provided that such 32 33 employee does not otherwise have coverage for such acts and omissions within the scope of their employment through a liability insurance contract 34 35 of such independent contractor; 36 (E) a person who is an employee or volunteer of a nonprofit program,

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other than a municipality, who has contracted with the commissioner of juvenile justice or with another nonprofit program that has contracted with the commissioner of juvenile justice to provide a juvenile justice program for juvenile offenders in a judicial district provided that such employee or volunteer does not otherwise have coverage for such acts and omissions within the scope of their employment or volunteer activities through a liability insurance contract of such nonprofit program;

8 (F) a person who contracts with the Kansas guardianship program to 9 provide services as a court-appointed guardian or conservator;

(G) an employee of an indigent health care clinic;

11 (H) former employees for acts and omissions within the scope of their 12 employment during their former employment with the governmental 13 entity;

(I) any member of a regional medical emergency response team,
 created under the provisions of K.S.A. 48-928, and amendments thereto, in
 connection with authorized training or upon activation for an emergency
 response; and

18 (J) medical students enrolled at the university of Kansas medical 19 center who are in clinical training, on or after July 1, 2008, at the 20 university of Kansas medical center or at another health care institution.

21 (2) "Employee" does not include: (A) An individual or entity for 22 actions within the scope of K.S.A. 60-3614, and amendments thereto; or

(B) any independent contractor under contract with a governmental
 entity except those contractors specifically listed in paragraph (1) of this
 subsection.

"Charitable health care provider" means a person licensed by the 26 (e) state board of healing arts as an exempt licensee or a federally active 27 licensee, a person issued a limited permit by the state board of healing arts, 28 a physician assistant licensed by the state board of healing arts, a mental 29 health practitioner licensed by the behavioral sciences regulatory board, an 30 ultrasound technologist currently registered in any area of sonography 31 credentialed through the American registry of radiology technologists, the 32 American registry for diagnostic medical sonography or cardiovascular 33 credentialing international and working under the supervision of a person 34 licensed to practice medicine and surgery, or a health care provider as the 35 term "health care provider" is defined under K.S.A. 65-4921, and 36 37 amendments thereto, who has entered into an agreement with:

38 (1) The secretary of health and environment under K.S.A. 75-6120, 39 and amendments thereto, who, pursuant to such agreement, gratuitously 40 renders professional services to a person who has provided information 41 which would reasonably lead the health care provider to make the good 42 faith assumption that such person meets the definition of medically 43 indigent person as defined by this section or to a person receiving medical assistance from the programs operated by the department of health and
 environment, and who is considered an employee of the state of Kansas
 under K.S.A. 75-6120, and amendments thereto;

4 (2) the secretary of health and environment and who, pursuant to such 5 agreement, gratuitously renders professional services in conducting 6 children's immunization programs administered by the secretary;

(3) a local health department or indigent health care clinic, which 7 renders professional services to medically indigent persons or persons 8 9 receiving medical assistance from the programs operated by the department of health and environment gratuitously or for a fee paid by the 10 local health department or indigent health care clinic to such provider and 11 who is considered an employee of the state of Kansas under K.S.A. 75-12 13 6120, and amendments thereto. Professional services rendered by a 14 provider under this paragraph (3) shall be considered gratuitous 15 notwithstanding fees based on income eligibility guidelines charged by a local health department or indigent health care clinic and notwithstanding 16 any fee paid by the local health department or indigent health care clinic to 17 18 a provider in accordance with this paragraph (3);-or

(4) the secretary of health and environment to provide dentistry 19 services defined by K.S.A. 65-1422 et seq., and amendments thereto, or 20 dental hygienist services defined by K.S.A. 65-1456, and amendments 21 thereto, that are targeted, but are not limited to, medically indigent 22 23 persons, and are provided on a gratuitous basis: (A) At a location sponsored by a not-for-profit organization that is not the dentist or dental 24 hygienist office location; or (B) at the office location of a dentist or dental 25 26 hygienist provided the care be delivered as part of a program organized by a not-for-profit organization and approved by the secretary of health and 27 environment; or (C) as part of a charitable program organized by the 28 dentist that has been approved by the secretary of health and environment 29 upon a showing that the dentist seeks to treat medically indigent patients 30 on a gratuitous basis, except that such dentistry services and dental 31 hygienist services shall not include "oral and maxillofacial surgery" as 32 defined by K.A.R. 71-2-2, or use sedation or general anesthesia that result 33 34 in "deep sedation" or "general anesthesia" as defined by K.A.R. 71-5-7-; 35 or

(5) the shriners national network of hospitals for children to
participate in free medical care given by means of tele-medicine services.
Services rendered by a provider under this paragraph shall be considered
gratuitous notwithstanding compensation received for such services.

(f) "Medically indigent person" means a person who lacks resources
to pay for medically necessary health care services and who meets the
eligibility criteria for qualification as a medically indigent person
established by the secretary of health and environment under K.S.A. 75-

1 6120, and amendments thereto.

2 (g) "Indigent health care clinic" means an outpatient medical care 3 clinic operated on a not-for-profit basis which has a contractual agreement 4 in effect with the secretary of health and environment to provide health 5 care services to medically indigent persons.

6 (h) "Local health department" shall have the meaning ascribed to 7 such term under K.S.A. 65-241, and amendments thereto.

8 (i) "Fire control, fire rescue or emergency medical services 9 equipment" means any vehicle, firefighting tool, protective clothing, 10 breathing apparatus and any other supplies, tools or equipment used in 11 firefighting or fire rescue or in the provision of emergency medical 12 services.

13 Sec. 2. K.S.A. 2014 Supp. 75-6102 is hereby repealed.

14 Sec. 3. This act shall take effect and be in force from and after its 15 publication in the statute book. Session of 2015

HOUSE BILL No. 2313

By Committee on Corrections and Juvenile Justice

2-11

AN ACT concerning crimes, punishment and criminal procedure; relating 1 2 to assault; battery; unlawful interference with a firefighter; unlawful 3 interference with an emergency medical services attendant; creating the crime of unlawful interference with a health care provider; amending 4 K.S.A. 2014 Supp. 21-5412, 21-5413, 21-6325 and 21-6326 and 5 6 repealing the existing sections. 7 8 Be it enacted by the Legislature of the State of Kansas: Section 1. K.S.A. 2014 Supp. 21-5412 is hereby amended to read as 9 follows: 21-5412. (a) Assault is knowingly placing another person in 10 11 reasonable apprehension of immediate bodily harm; (b) Aggravated assault is assault, as defined in subsection (a), 12 13 committed: 14 (1) With a deadly weapon; while disguised in any manner designed to conceal identity; or 15 (2)(3) with intent to commit any felony. 16 (c) Assault of a law enforcement officer is assault, as defined in 17 subsection (a), committed against: 18 (1) A uniformed or properly identified state, county or city law 19 enforcement officer while such officer is engaged in the performance of 20 21 such officer's duty; or (2) a uniformed or properly identified university or campus police 22 officer while such officer is engaged in the performance of such officer's 23 24 duty. (d) Aggravated assault of a law enforcement officer is assault of a law 25 enforcement officer, as defined in subsection (c), committed: 26 27 (1) With a deadly weapon; (2) while disguised in any manner designed to conceal identity; or 28 with intent to commit any felony. 29 (3) (e) Assault of a health care provider is assault, as defined in 30 31 subsection (a), committed against a health care provider while such provider is engaged in the performance of such provider's duty. 32 (f) Aggravated assault of a health care provider is assault of a health 33 care provider; as defined in subsection (e), committed: 34 35 (1) With a deadly weapon; (2) while disguised in any manner designed to conceal identity; or 36

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1 (3) with intent to commit any felony.

2 (e) (g) (1) Assault is a class C person misdemeanor.

3 (2) Aggravated assault is a severity level 7, person felony.

4 (3) Assault of a law enforcement officer is a class A person 5 misdemeanor.

6 (4) Aggravated assault of a law enforcement officer is a severity level 7 6, person felony. A person convicted of aggravated assault of a law 8 enforcement officer shall be subject to the provisions of subsection (g) of 9 K.S.A. 2014 Supp. 21-6804(g), and amendments thereto.

10 (5) Assault of a health care provider is a class A person 11 misdemeanor.

12 (6) Aggravated assault of a health care provider is a severity level 6, 13 person felony.

14 (h) As used in this section, "health care provider" means:

15 (1) A person licensed by the state board of healing arts;

16 (2) a person engaged in a postgraduate training program approved 17 by the state board of healing arts;

(3) an attendant certified by the emergency medical services board;

(4) a person registered or licensed by the state board of pharmacy;

20 (5) a person licensed by the behavioral sciences regulatory board;

(6) a licensed optometrist, dietician, speech-language pathologist,
 audiologist, dentist, dental hygienist, practical nurse or professional
 nurse;

24 (7) a person certified by the secretary for aging and disability 25 services as a nurse aide, medication aide or paid nutrition assistant;

(8) a person performing services for a medical care facility licensed
under K.S.A. 65-425 et seq., and amendments thereto, but who does not
receive compensation, either directly or indirectly, for those services;

(9) a person currently enrolled in a postsecondary educational
institution, as defined in K.S.A. 74-3201b, and amendments thereto, and
performing health care related services for a medical care facility licensed
under K.S.A. 65-425 et seq., and amendments thereto; and

(10) a person currently enrolled in a training program approved by
 the emergency medical services board pursuant to K.S.A. 65-6111, and
 amendments thereto.

36 Sec. 2. K.S.A. 2014 Supp. 21-5413 is hereby amended to read as 37 follows: 21-5413. (a) Battery is:

38 (1) Knowingly or recklessly causing bodily harm to another person;39 or

40 (2) knowingly causing physical contact with another person when 41 done in a rude, insulting or angry manner;

42 (b) Aggravated battery is:

43 (1) (A) Knowingly causing great bodily harm to another person or

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1 disfigurement of another person;

2 (B) knowingly causing bodily harm to another person with a deadly 3 weapon, or in any manner whereby great bodily harm, disfigurement or 4 death can be inflicted; or

5 (C) knowingly causing physical contact with another person when 6 done in a rude, insulting or angry manner with a deadly weapon, or in any 7 manner whereby great bodily harm, disfigurement or death can be 8 inflicted;

9 (2) (A) recklessly causing great bodily harm to another person or 10 disfigurement of another person; or

(B) recklessly causing bodily harm to another person with a deadly
weapon, or in any manner whereby great bodily harm, disfigurement or
death can be inflicted; or

14 (3) (A) committing an act described in K.S.A. 8-1567, and 15 amendments thereto, when great bodily harm to another person or 16 disfigurement of another person results from such act; or

17 (B) committing an act described in K.S.A. 8-1567, and amendments 18 thereto, when bodily harm to another person results from such act under 19 circumstances whereby great bodily harm, disfigurement or death can 20 result from such act.

(c) Battery against a law enforcement officer is:

(1) Battery, as defined in subsection (a)(2), committed against a:

(A) Uniformed or properly identified university or campus police
 officer while such officer is engaged in the performance of such officer's
 duty; or

(B) uniformed or properly identified state, county or city law
enforcement officer, other than a state correctional officer or employee, a
city or county correctional officer or employee, a juvenile correctional
facility officer or employee or a juvenile detention facility officer, or
employee, while such officer is engaged in the performance of such
officer's duty; or

32 (2) battery, as defined in subsection (a)(1), committed against a:

(A) Uniformed or properly identified university or campus police
 officer while such officer is engaged in the performance of such officer's
 duty; or

36 (B) uniformed or properly identified state, county or city law 37 enforcement officer, other than a state correctional officer or employee, a 38 city or county correctional officer or employee, a juvenile correctional 39 facility officer or employee or a juvenile detention facility officer, or 40 employee, while such officer is engaged in the performance of such 41 officer's duty; or

42 (3) battery, as defined in subsection (a) committed against a:

43 (A) State correctional officer or employee by a person in custody of

the secretary of corrections, while such officer or employee is engaged in
 the performance of such officer's or employee's duty;

3 (B) juvenile correctional facility officer or employee by a person 4 confined in such juvenile correctional facility, while such officer or 5 employee is engaged in the performance of such officer's or employee's 6 duty;

7 (C) juvenile detention facility officer or employee by a person 8 confined in such juvenile detention facility, while such officer or employee 9 is engaged in the performance of such officer's or employee's duty; or

10 (D) city or county correctional officer or employee by a person 11 confined in a city holding facility or county jail facility, while such officer 12 or employee is engaged in the performance of such officer's or employee's 13 duty.

14 (d) Aggravated battery against a law enforcement officer is:

15 (1) An-Aggravated battery, as defined in subsection (b)(1)(A) 16 committed against a:

17 (A) Uniformed or properly identified state, county or city law
18 enforcement officer while the officer is engaged in the performance of the
19 officer's duty; or

20 (B) uniformed or properly identified university or campus police 21 officer while such officer is engaged in the performance of such officer's 22 duty;

(2) an-Aggravated battery, as defined in subsection (b)(1)(B) or (b)(1)
(24 (C), committed against a:

(A) Uniformed or properly identified state, county or city law
enforcement officer while the officer is engaged in the performance of the
officer's duty; or

(B) uniformed or properly identified university or campus police
officer while such officer is engaged in the performance of such officer's
duty; or

31 (3) knowingly causing, with a motor vehicle, bodily harm to a:

(A) Uniformed or properly identified state, county or city law
 enforcement officer while the officer is engaged in the performance of the
 officer's duty; or

(B) uniformed or properly identified university or campus police
 officer while such officer is engaged in the performance of such officer's
 duty.

(e) Battery against a school employee is a battery, as defined in
subsection (a), committed against a school employee in or on any school
property or grounds upon which is located a building or structure used by a
unified school district or an accredited nonpublic school for student
instruction or attendance or extracurricular activities of pupils enrolled in
kindergarten or any of the grades one through 12 or at any regularly

1 scheduled school sponsored activity or event, while such employee is 2 engaged in the performance of such employee's duty.

(f) Battery against a mental health employee is a battery, as defined in 3 4 subsection (a), committed against a mental health employee by a person in 5 the custody of the secretary for aging and disability services, while such 6 employee is engaged in the performance of such employee's duty. 7

(g) Battery against a health care provider is:

8 Battery, as defined in subsection (a)(2), committed against a (I)9 health care provider while such provider is engaged in the performance of 10 such provider's duty;

11 (2) battery, as defined in subsection (a)(1), committed against a 12 health care provider while such provider is engaged in the performance of 13 such provider's duty: or

14 (3) intentionally causing human bodily fluid to make physical contact 15 with a health care provider while such provider is engaged in the 16 performance of such provider's duty.

17 (h) Aggravated battery against a health care provider is:

(1) Aggravated battery, as defined in subsection (b)(1)(A), committed 18 19 against a health care provider while such provider is engaged in the 20 performance of such provider's duty;

(2) aggravated battery, as defined in subsection (b)(1)(B) or (b)(1)21 22 (C), committed against a health care provider while such provider is 23 engaged in the performance of such provider's duty; or

(3) intentionally causing human bodily fluid to make physical contact 24 25 with a health care provider while such provider is engaged in the performance of such provider's duty and the offender has knowledge that 26 the source of the human bodily fluid is infected with human 27 immunodeficiency virus, hepatitis B or hepatitis C at the time the offense 28 is committed. 29

30 (g) (i) (1) Battery is a class B person misdemeanor.

(2) Aggravated battery as defined in: 31

32 (A) Subsection (b)(1)(A) is a severity level 4, person felony;

subsection (b)(1)(B) or (b)(1)(C) is a severity level 7, person 33 (B) 34 felony;

35 (C) subsection (b)(2)(A) or (b)(3)(A) is a severity level 5, person 36 felony; and

37 subsection (b)(2)(B) or (b)(3)(B) is a severity level 8, person (D) 38 felony.

39 (3) Battery against a law enforcement officer as defined in:

(A) Subsection (c)(1) is a class A person misdemeanor; 40

41 subsection (c)(2) is a severity level 7, person felony; and (B)

subsection (c)(3) is a severity level 5, person felony. 42 (C)

(4) Aggravated battery against a law enforcement officer as defined 43

1 in:

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2 (A) Subsection (d)(1) or (d)(3) is a severity level 3, person felony; 3 and

4 (B) subsection (d)(2) is a severity level 4, person felony.

5 (5) Battery against a school employee is a class A person 6 misdemeanor.

7 (6) Battery against a mental health employee is a severity level 7, 8 person felony.

(7) Battery against a health care provider as defined in:

10 (A) Subsection (g)(1) is a class A person misdemeanor; and

11 (B) subsection (g)(2) or (g)(3) is a severity level 7, person felony.

12 (8) Aggravated battery against a health care provider as defined in:

13 (A) Subsection (h)(1) is a severity level 3, person felony; and

14 (B) subsection (h)(2) or (h)(3) is a severity level 4, person felony.

15 (h) (j) As used in this section:

16 (1) "Correctional institution" means any institution or facility under 17 the supervision and control of the secretary of corrections;

18 (2) "state correctional officer or employee" means any officer or 19 employee of the Kansas department of corrections or any independent 20 contractor, or any employee of such contractor, working at a correctional 21 institution;

(3) "juvenile correctional facility officer or employee" means any
officer or employee of the juvenile justice authority or any independent
contractor, or any employee of such contractor, working at a juvenile
correctional facility, as defined in K.S.A. 2014 Supp. 38-2302, and
amendments thereto;

(4) "juvenile detention facility officer or employee" means any officer
or employee of a juvenile detention facility as defined in K.S.A. 2014
Supp. 38-2302, and amendments thereto;

(5) "city or county correctional officer or employee" means any
correctional officer or employee of the city or county or any independent
contractor, or any employee of such contractor, working at a city holding
facility or county jail facility;

(6) "school employee" means any employee of a unified school
district or an accredited nonpublic school for student instruction or
attendance or extracurricular activities of pupils enrolled in kindergarten or
any of the grades one through 12;-and

(7) "mental health employee" means an employee of the Kansas
department for aging and disability services working at Larned state
hospital, Osawatomie state hospital and Rainbow mental health facility,
Kansas neurological institute and Parsons state hospital and training center
and the treatment staff as defined in K.S.A. 59-29a02, and amendments
thereto;

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(8) "health care provider" means:

(A) A person licensed by the state board of healing arts;

3 *(B) a person engaged in a postgraduate training program approved* 4 *by the state board of healing arts;*

(C) an attendant certified by the emergency medical services board;

(D) a person registered or licensed by the state board of pharmacy;

(E) a person licensed by the behavioral sciences regulatory board;

8 (F) a licensed optometrist, dietician, speech-language pathologist, 9 audiologist, dentist, dental hygienist, practical nurse or professional 10 nurse;

11 *(G) a person certified by the secretary for aging and disability* 12 *services as a nurse aide, medication aide or paid mutrition assistant;*

(H) a person performing services for a medical care facility licensed
 under K.S.A. 65-425 et seq., and amendments thereto, but who does not
 receive compensation, either directly or indirectly, for those services;

16 *(I)* a person currently enrolled in a postsecondary educational 17 institution, as defined in K.S.A. 74-3201b, and amendments thereto, and 18 performing health care related services for a medical care facility licensed 19 under K.S.A. 65-425 et seq., and amendments thereto; and

20 (J) a person currently enrolled in a training program approved by the 21 emergency medical services board pursuant to K.S.A. 65-6111, and 22 amendments thereto; and

(9) "human bodily fluid" means any naturally produced secretion or
waste product generated by the human body and shall include, but not be
limited to, any quantity of human blood, urine, saliva, mucus, vomitus,
seminal fluid or feces.

27 Sec. 3. K.S.A. 2014 Supp. 21-6325 is hereby amended to read as 28 follows: 21-6325. (a) Unlawful interference with a firefighter is 29 knowingly:

(1) Interfering with any firefighter while such firefighter is engaged in
 the performance of such firefighter's-duties duty; or

32 (2) obstructing, interfering with or impeding the efforts of any33 firefighter to reach the location of a fire or other emergency.

34 (b) Unlawful interference with a firefighter is a class- $\mathbf{B} A$ person 35 misdemeanor.

36 (c) A person who violates the provisions of this section may also be37 prosecuted for, convicted of, and punished for assault or battery.

38 Sec. 4. K.S.A. 2014 Supp. 21-6326 is hereby amended to read as 39 follows: 21-6326. (a) Unlawful interference with an emergency medical 40 services attendant is knowingly:

41 (1) Interfering with any attendant while *such attendant is* engaged in
42 the performance of such attendant's-duties *duty*; or

43 (2) obstructing, interfering with or impeding the efforts of any

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1 attendant to reach the location of an emergency.

2 (b) Unlawful interference with an emergency medical services 3 attendant is a class-B A person misdemeanor.

4 (c) As used in this section, "attendant" means the same as in K.S.A. 5 65-6112, and amendments thereto.

6 (d) A person who violates the provisions of this section may also be7 prosecuted for, convicted of, and punished for assault or battery.

8 New Sec. 5. (a) Unlawful interference with a health care provider is 9 knowingly interfering with any health care provider while such provider is 10 engaged in the performance of such provider's duty.

11 (b) Unlawful interference with a health care provider is a class A 12 person misdemeanor.

(c) As used in this section, "health care provider" means:

14 (1) A person licensed by the state board of healing arts;

15 (2) a person engaged in a postgraduate training program approved by 16 the state board of healing arts;

(3) a person registered or licensed by the state board of pharmacy;

(4) a person licensed by the behavioral sciences regulatory board;

19 (5) a licensed optometrist, dietician, speech-language pathologist, 20 audiologist, dentist, dental hygienist, practical nurse or professional nurse;

(6) a person certified by the secretary for aging and disability services
as a nurse aide, medication aide or paid nutrition assistant;

(7) a person performing services for a medical care facility licensed
 under K.S.A. 65-425 et seq., and amendments thereto, but who does not
 receive compensation, either directly or indirectly, for those services;

(8) a person currently enrolled in a postsecondary educational
institution, as defined in K.S.A. 74-3201b, and amendments thereto, and
performing health care related services for a medical care facility licensed
under K.S.A. 65-425 et seq., and amendments thereto; and

30 (9) a person currently enrolled in a training program approved by the 31 emergency medical services board pursuant to K.S.A. 65-6111, and 32 amendments thereto.

(d) A person who violates the provisions of this section may also beprosecuted for, convicted of, and punished for assault and battery.

35 (e) This section shall be part of and supplemental to the Kansas 36 criminal code.

37 Sec. 6. K.S.A. 2014 Supp. 21-5412, 21-5413, 21-6325 and 21-6326
38 are hereby repealed.

39 Sec. 7. This act shall take effect and be in force from and after its40 publication in the statute book.