#### As Amended by House Committee

[As Amended by Senate Committee of the Whole]

As Amended by Senate Committee

Session of 2011

#### SENATE BILL No. 134

By Committee on Public Health and Welfare

2-7

1 AN ACT relating to nursing; concerning advanced practice nursing; [renewal 2 of licences;] amending K.S.A. 40-2250, 65-1113, 65-1114, 65-1118, 65-1120, 65-1122, 65-1130, 65-1131, 65-1133, 65-1154, 65-1163, 74-32, 131, 3 74-32,132, 74-32,133, 74-32,134, 74-32,135, 74-32,136, 74-32,137 and 74-4 5 32,138 and K.S.A. 2010 Supp. 8-1,125, 39-7,119, 40-2,111, 65-468, [65-1117, 65-1132, 65-1626, 65-2921, 65-4101, 65-5402, 65-6112, 65-6119, 6 65-6120, 65-6121, 65-6123, 65-6124, 65-6129c, 65-6135, 65-6144, 72-7 5213, 72-8252 and 74-1106 and repealing the existing sections; also 8 9 repealing K.S.A. 2010 Supp. 65-1626d.

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

12 Section 1. **[On January 1, 2012,]** K.S.A. 65-1113 is hereby amended to 13 read as follows: 65-1113. When used in this act and the act of which this 14 section is amendatory:

15 (a) "Board" means the board of nursing.

16 (b) "Diagnosis" in the context of nursing practice means that 17 identification of and discrimination between physical and psychosocial signs 18 and symptoms essential to effective execution and management of the nursing 19 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.

(d) Practice of nursing. (1) The practice of professional nursing as 23 performed by a registered professional nurse for compensation or gratuitously. 24 except as permitted by K.S.A. 65-1124, and amendments thereto, means the 25 process in which substantial specialized knowledge derived from the 26 biological, physical, and behavioral sciences is applied to: the care, diagnosis, 27 treatment, counsel and health teaching of persons who are experiencing 28 29 changes in the normal health processes or who require assistance in the maintenance of health or the prevention or management of illness, injury or 30

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

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

16 (g) "Advanced *practice* registered nurse <del>practitioner</del>" or <u>"ARNP"</u>"*APRN*" 17 means a professional nurse who holds a <del>certificate of qualification</del> *license* 18 from the board to function as a professional nurse in an <del>expanded</del> *advanced* 19 role, and this <del>expanded</del> *advanced* role shall be defined by rules and regulations 20 adopted by the board in accordance with K.S.A. 65-1130, *and amendments* 21 *thereto*.

Sec. 2. **[On January 1, 2012,]** K.S.A. 65-1114 is hereby amended to read as follows: 65-1114. (a) It shall be unlawful for any person:

(1) To practice or to offer to practice professional nursing in this state; <del>or</del>

(2) to use any title, abbreviation, letters, figures, sign, card or device to
 indicate that any person is a registered professional nurse; or

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(3) to practice or offer to practice practical nursing in this state; or

(4) to use any title, abbreviation, letters, figures, sign, card or device to
 indicate that any person is a licensed practical nurse, unless such person has
 been duly licensed under the provisions of this act.

31 (b) It shall be unlawful for any person:

(1) To practice or offer to practice as an advanced *practice* registered
 nurse practitioner in this state; or

(2) to use any title, abbreviation, letters, figures, sign, card or device to
indicate that any person is an advanced *practice* registered nurse practitioner,
unless such person has been duly issued a *license* eertificate of qualification as
an advanced *practice* registered nurse practitioner under the Kansas nurse
practice act.

Sec. 3. [On January 1, 2012,] K.S.A. 65-1118 is hereby amended to read
as follows: 65-1118. (a) The board shall collect in advance fees provided for in
this act as fixed by the board, but not exceeding:

42	Application for license—professional nurse\$75	
43	Application for license—practical nurse50	

1	Application for biennial renewal of license-professional nurse and
2	practical nurse
3	Application for reinstatement of license
4	Application for reinstatement of licenses with temporary permit
5	Certified copy of license
6	Duplicate of license
7	Inactive license
8	Application for license eertificate of qualification advanced practice
9	registered nurse practitioner
10	Application for license eertificate of qualification with temporary permit
11	-advanced <i>practice</i> registered nurse <del>practitioner</del>
12	Application for renewal of license eertificate of qualification-advanced
13	<i>practice</i> registered nurse <del>practitioner</del>
14	Application for reinstatement of license eertificate of qualification-
15	advanced <i>practice</i> registered nurse practitioner
16	Application for authorization—registered nurse anesthetist75
17	Application for authorization with temporary authorization-registered
18	nurse anesthetist
19	Application for biennial renewal of authorization-registered nurse
20	anesthetist
21	Application for reinstatement of authorization-registered nurse
22	anesthetist
23	Application for reinstatement of authorization with temporary
24	authorization—registered nurse anesthetist100
25	Verification of license to another state
26	Application for exempt license—professional and practical nurse
27	Application for biennial renewal of exempt license-professional and
28	practical nurse
29	Application for exempt <i>license</i> eertification advanced <i>practice</i>
30	registered nurse practitioner
31	Application for biennial renewal of exempt <i>license</i> eertificate advanced
32	<i>practice</i> registered nurse practitioner
33	(b) The board may require that fees paid for any examination under the
34	Kansas nurse practice act be paid directly to the examination service by the
35	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.

42 Sec. 4. **[On January 1, 2012,]** K.S.A. 65-1120 is hereby amended to read 43 as follows: 65-1120. (a) *Grounds for disciplinary actions*. The board may

deny, revoke, limit or suspend any license, eertificate of qualification or 1 authorization to practice nursing as a registered professional nurse, as a 2 3 licensed practical nurse, as an advanced *practice* registered nurse practitioner or as a registered nurse anesthetist that is issued by the board or applied for 4 under this act or may publicly or privately censure a licensee or holder of a 5 6 certificate of qualification temporary permit or authorization, if the applicant, 7 licensee or holder of a temporary permit certificate of qualification or 8 authorization is found after hearing:

9 (1) To be guilty of fraud or deceit in practicing nursing or in procuring or 10 attempting to procure a license to practice nursing;

(2) to have been guilty of a felony or to have been guilty of a 11 misdemeanor involving an illegal drug offense unless the applicant or licensee 12 establishes sufficient rehabilitation to warrant the public trust, except that 13 notwithstanding K.S.A. 74-120, and amendments thereto, no license,-14 eertificate of qualification or authorization to practice nursing as a licensed 15 16 professional nurse, as a licensed practical nurse, as an advanced practice registered nurse practitioner or registered nurse anesthetist shall be granted to 17 a person with a felony conviction for a crime against persons as specified in 18 article 34 of chapter 21 of the Kansas Statutes Annotated and acts amendatory 19 20 thereof or supplemental thereto, prior to its repeal, or sections 36 through 21 64, 174, 210 or 211 of chapter 136 of the 2010 Session Laws of Kansas, and 22 amendments thereto;

(3) to have committed an act of professional incompetency as defined insubsection (e);

(4) to be unable to practice with skill and safety due to current abuse ofdrugs or alcohol;

(5) to be a person who has been adjudged in need of a guardian or
conservator, or both, under the act for obtaining a guardian or conservator, or
both, and who has not been restored to capacity under that act;

30 (6) to be guilty of unprofessional conduct as defined by rules and 31 regulations of the board;

(7) to have willfully or repeatedly violated the provisions of the Kansas
nurse practice act or any rules and regulations adopted pursuant to that act,
including K.S.A. 65-1114 and 65-1122, and amendments thereto;

35 (8) to have a license to practice nursing as a registered nurse or as a 36 practical nurse denied, revoked, limited or suspended, or to be publicly or 37 privately censured, by a licensing authority of another state, agency of the 38 United States government, territory of the United States or country or to have other disciplinary action taken against the applicant or licensee by a licensing 39 authority of another state, agency of the United States government, territory of 40 the United States or country. A certified copy of the record or order of public 41 or private censure, denial, suspension, limitation, revocation or other 42 43 disciplinary action of the licensing authority of another state, agency of the

United States government, territory of the United States or country shall
 constitute prima facie evidence of such a fact for purposes of this paragraph
 (8); or

4 (9) to have assisted suicide in violation of K.S.A. 21-3406 K.S.A. 21-5 3406, prior to its repeal, or section 42 of chapter 136 of the 2010 Session 6 Laws of Kansas, and amendments thereto, as established by any of the 7 following:

8 (A) A copy of the record of criminal conviction or plea of guilty for a 9 felony in violation of K.S.A. 21-3406 K.S.A. 21-3406, prior to its repeal, or 10 section 42 of chapter 136 of the 2010 Session Laws of Kansas, and 11 amendments thereto.

(B) A copy of the record of a judgment of contempt of court for violating
 an injunction issued under K.S.A. 2002 Supp. 60-4404, and amendments
 thereto.

15 (C) A copy of the record of a judgment assessing damages under K.S.A.
 2002 Supp. 60-4405, and amendments thereto.

17 (b) Proceedings. Upon filing of a sworn complaint with the board 18 charging a person with having been guilty of any of the unlawful practices 19 specified in subsection (a), two or more members of the board shall investigate the charges, or the board may designate and authorize an employee or 20 employees of the board to conduct an investigation. After investigation, the 21 22 board may institute charges. If an investigation, in the opinion of the board, reveals reasonable grounds for believing the applicant or licensee is guilty of 23 24 the charges, the board shall fix a time and place for proceedings, which shall 25 be conducted in accordance with the provisions of the Kansas administrative 26 procedure act.

27 Witnesses. No person shall be excused from testifying in any (c) proceedings before the board under this act or in any civil proceedings under 28 29 this act before a court of competent jurisdiction on the ground that such 30 testimony may incriminate the person testifying, but such testimony shall not 31 be used against the person for the prosecution of any crime under the laws of 32 this state except the crime of perjury as defined in K.S.A. 21-3805 K.S.A. 21-33 3805, prior to its repeal, or section 128 of chapter 136 of the 2010 Session 34 Laws of Kansas, and amendments thereto.

(d) Costs. If final agency action of the board in a proceeding under this 35 section is adverse to the applicant or licensee, the costs of the board's 36 37 proceedings shall be charged to the applicant or licensee as in ordinary civil actions in the district court, but if the board is the unsuccessful party, the costs 38 39 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 court. All costs 40 accrued by the board, when it is the successful party, and which the attorney 41 general certifies cannot be collected from the applicant or licensee shall be 42 43 paid from the board of nursing fee fund. All moneys collected following board

1 proceedings shall be credited in full to the board of nursing fee fund.

2 (e) *Professional incompetency defined.* As used in this section, 3 "professional incompetency" means:

4 (1) One or more instances involving failure to adhere to the applicable 5 standard of care to a degree which constitutes gross negligence, as determined 6 by the board;

7 (2) repeated instances involving failure to adhere to the applicable 8 standard of care to a degree which constitutes ordinary negligence, as 9 determined by the board; or

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

12 (f) *Criminal justice information.* The board upon request shall receive 13 from the Kansas bureau of investigation such criminal history record 14 information relating to arrests and criminal convictions as necessary for the 15 purpose of determining initial and continuing qualifications of licensees of and 16 applicants for licensure by the board.

17 Sec. 5. **[On January 1, 2012,]** K.S.A. 65-1122 is hereby amended to read 18 as follows: 65-1122. It is a violation of law for any person, firm, corporation or 19 association to:

(a) Sell or fraudulently obtain or furnish any nursing diploma, license; or
 record or certificate of qualification or aid or abet therein;

(b) practice professional nursing, practical nursing or practice as an
 advanced *practice* registered nurse practitioner, unless duly licensed or
 certified to do so;

(c) use in connection with such person's name any designation implying that such person is a licensed professional nurse, a licensed practical nurse or an advanced *practice* registered nurse <del>practitioner</del> unless duly licensed <del>or</del> eertified so to practice under the provisions of the Kansas nurse practice act, and such license <del>or certificate</del> is then in full force;

(d) practice professional nursing, practical nursing or as an advanced
 *practice* registered nurse practitioner during the time a license or certificate
 issued under the provisions of the Kansas nurse practice act shall have expired
 or shall have been suspended or revoked;

(e) represent that a school for nursing is approved for educating either
professional nurses or practical nurses, unless such school has been duly
approved by the board and such approval is then in full force;

(f) violate any provisions of the Kansas nurse practice act or rules and
 regulations adopted pursuant to that act; or

(g) represent that a provider of continuing nursing education is approved
by the board for educating either professional nurses or practical nurses, unless
the provider of continuing nursing education has been approved by the board
and the approval is in full force.

43 Any person who violates this section is guilty of a class B misdemeanor,

except that, upon conviction of a second or subsequent violation of this
 section, such person is guilty of a class A misdemeanor.

Sec. 6. **[On January 1, 2012,]** K.S.A. 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 *practitioner* unless such professional nurse has complied with requirements established by the board and holds a valid *license* certificate of qualification as an advanced *practice* registered nurse *practitioner* in accordance with the provisions of this section.

10 (b) The board shall establish standards and requirements for any professional nurse who desires to obtain licensure a certificate of qualification 11 as an advanced *practice* registered nurse. practitioner. Such standards and 12 requirements shall include, but not be limited to, standards and requirements 13 relating to the education of advanced practice registered nurses.nurse-14 practitioners. The board may require that some, but not all, types of advanced 15 registered nurse practitioners hold an academic degree beyond the minimum 16 educational requirement for qualifying for a license to practice as a 17 18 professional nurse. The board may give such examinations and secure such 19 assistance as it deems necessary to determine the qualifications of applicants.

(c) The board shall adopt rules and regulations applicable to advanced
 *practice* registered *nurses* <del>nurse</del> <del>practitioners</del> which:

(1) Establish *roles and identify titles and abbreviations* eategories of
 advanced *practice* registered *nurses* nurse practitioners which are consistent
 with nursing practice specialties recognized by the nursing profession.

(2) Establish education and qualifications necessary for *licensure* 25 certification for each category role of advanced practice registered nurse 26 practitioner established by the board at a level adequate to assure the 27 competent performance by advanced practice registered nurses nurse-28 practitioners of functions and procedures which advanced *practice* registered 29 30 nurses nurse practitioners are authorized to perform. Advanced practice 31 registered nursing is based on knowledge and skills acquired in basic nursing education, licensure as a registered nurse and graduation from or completion 32 33 of a masters or higher degree in one of the advanced practice registered nurse roles approved by the board of nursing. 34

(3) Define the role of advanced practice registered nurses nurse-35 practitioners and establish limitations and restrictions on such role. The board 36 37 shall adopt a definition of the role under this subsection (c)(3) which is consistent with the education and qualifications required to obtain a license 38 eertificate of qualification as an advanced *practice* registered nurse 39 practitioner, which protects the public from persons performing functions and 40 procedures as advanced *practice* registered *nurses* nurse practitioners for 41 which they lack adequate education and qualifications and which authorizes 42 43 advanced practice registered nurses nurse practitioners to perform acts

generally recognized by the profession of nursing as capable of being 1 performed, in a manner consistent with the public health and safety, by persons 2 3 with postbasic education in nursing. In defining such role the board shall 4 consider: (A) The education required for a *licensure* certificate of qualification 5 as an advanced *practice* registered nurse <del>practitioner</del>; (B) the type of nursing 6 practice and preparation in specialized *advanced practice* practitioner skills 7 involved in each role eategory of advanced practice registered nurse 8 practitioner established by the board; (C) the scope and limitations of 9 advanced practice of nursing specialties and limitations thereon prescribed by national *advanced practice* organizations which certify nursing specialties; and 10 (D) acts recognized by the nursing profession as appropriate to be performed 11 by persons with postbasic education in nursing. 12

(d) An advanced *practice* registered nurse practitioner may prescribe 13 drugs pursuant to a written protocol as authorized by a responsible physician. 14 Each written protocol shall contain a precise and detailed medical plan of care 15 for each classification of disease or injury for which the advanced practice 16 registered nurse practitioner is authorized to prescribe and shall specify all 17 18 drugs which may be prescribed by the advanced *practice* registered nurse. 19 practitioner. Any written prescription order shall include the name, address and telephone number of the responsible physician. The advanced *practice* 20 registered nurse practitioner may not dispense drugs, but may request, receive 21 22 and sign for professional samples and may distribute professional samples to patients pursuant to a written protocol as authorized by a responsible 23 physician. In order to prescribe controlled substances, the advanced *practice* 24 25 registered nurse practitioner shall (1) register with the federal drug enforcement administration; and (2) notify the board of the name and address 26 27 of the responsible physician or physicians. In no case shall the scope of authority of the advanced practice registered nurse practitioner exceed the 28 29 normal and customary practice of the responsible physician. An advanced 30 practice registered nurse practitioner certified in the role eategory of registered 31 nurse anesthetist while functioning as a registered nurse anesthetist under 32 K.S.A. 65-1151 to 65-1164, inclusive, and amendments thereto, shall be 33 subject to the provisions of K.S.A. 65-1151 to 65-1164, inclusive, and 34 amendments thereto, with respect to drugs and anesthetic agents and shall not be subject to the provisions of this subsection. For the purposes of this 35 subsection, "responsible physician" means a person licensed to practice 36 37 medicine and surgery in Kansas who has accepted responsibility for the protocol and the actions of the advanced practice registered nurse practitioner 38 39 when prescribing drugs.

40 (e) As used in this section, "drug" means those articles and substances 41 defined as drugs in K.S.A. 65-1626 and 65-4101, and amendments thereto.

42 (f) A person registered to practice as an advanced registered nurse 43 practitioner in the state of Kansas immediately prior to the effective date of

1 this act shall be deemed to be licensed to practice as an advanced practice

2 registered nurse under this act and such person shall not be required to file an
3 original application for licensure under this act. Any application for
4 registration filed which has not been granted prior to the effective date of this
5 act shall be processed as an application for licensure under this act.

6 Sec. 7. [On January 1, 2012,] K.S.A. 65-1131 is hereby amended to read 7 as follows: 65-1131. (a) (1) *Certification.Licensure*. Upon application to the board by any professional nurse in this state and upon satisfaction of the 8 9 standards and requirements established by the board under K.S.A. 65-1130, and amendments thereto, the board may issue a license eertificate of 10 qualification to such applicant authorizing the applicant to perform the duties 11 of an advanced *practice* registered nurse <del>practitioner</del> as defined by the board 12 under K.S.A. 65-1130, and amendments thereto. 13

(2) The board may issue a *license* certificate to practice nursing as an 14 advanced *practice* registered nurse practitioner to an applicant who has been 15 duly licensed or certified as an advanced practice registered nurse practitioner 16 17 under the laws of another state or territory if, in the opinion of the board, the 18 applicant meets the *licensure* qualifications required of an advanced *practice* 19 registered nurse practitioner in this state. Verification of the applicant's licensure or certification status shall be required from the original state of 20 21 licensure or certification.

22 (3) An application to the board for a *license* eertificate of qualification, for a *license* eertificate of qualification with temporary permit, for renewal of a 23 license eertificate of qualification and for reinstatement of a license eertificate 24 of qualification shall be upon such form and contain such information as the 25 board may require and shall be accompanied by a fee, to be established by 26 rules and regulations adopted by the board, to assist in defraying the expenses 27 in connection with the issuance of licenses eertificates of qualification as 28 29 advanced *practice* registered *nurses* <del>nurse</del> <del>practitioners</del>, in an amount fixed by the board under K.S.A. 65-1118, and amendments thereto. 30

(4) An application for initial *licensure* certification or endorsement will
 be held awaiting completion of meeting qualifications for a time period
 specified in rules and regulations.

(5) The executive administrator of the board shall remit all moneys
received pursuant to this section to the state treasurer as provided by K.S.A.
74-1108, and amendments thereto.

(b) The board may grant a one-time temporary permit to practice as an
advanced *practice* registered nurse <del>practitioner</del> for a period of not more than
180 days pending completion of the application for a *license*.eertificate of
qualification.

41 (c) *Exempt license.eertificate.* The board may issue an exempt *license* 42 eertificate to any advanced *practice* registered nurse practitioner as defined in
 43 rules and regulations who makes written application for such *license* eertificate

on a form provided by the board, who remits a fee as established pursuant to 1 K.S.A. 65-1118, and amendments thereto, and who is not regularly engaged in 2 advanced *practice* registered *nursing* nurse practice in Kansas but volunteers 3 advanced *practice* registered nursing services or is a charitable health care 4 provider as defined by K.S.A. 75-6102, and amendments thereto. Each exempt 5 advanced practice registered nurse practitioner shall be subject to all 6 7 provisions of the nurse practice act. Each exempt license may be renewed biennially subject to the provisions of this section. To convert an exempt 8 9 license certificate to an active license certificate, the exempt advanced practice registered nurse practitioner shall meet all the requirements of 10 subsection (a) or K.S.A. 65-1132, and amendments thereto. The board shall 11 have authority to write rules and regulations to carry out the provisions of this 12 13 section.

Sec. 8. [On January 1, 2012,] K.S.A. 2010 Supp. 65-1132 is hereby 14 amended to read as follows: 65-1132. (a)(1) All licenses certificates of 15 qualification issued under the provisions of this act, whether initial or renewal, 16 17 shall expire every two years. The expiration date shall be established by rules 18 and regulations of the board. The board shall send a notice for renewal of a 19 license certificate of qualification to every advanced practice registered nurse practitioner at least 60 days prior to the expiration date of such person's 20 license. Every person who desires to renew such license eertificate of 21 qualification shall file with the board, on or before the date of expiration of 22 such license certificate of qualification,/: 23

(1)] A renewal application together with the prescribed biennial renewal
 fee: And[;

26 (2)] evidence of completion of continuing education in the advanced practice registered nurse role, which has met the continuing education 27 requirement for an advanced practice registered nurse as developed by the 28 29 board or by a national organization whose certifying standards are approved 30 by the board as equal to or greater than the corresponding standards 31 established by the board. These continuing education credits approved by the 32 board may be applied to satisfy the continuing education requirements 33 established by the board for licensed professional nurses under K.S.A. 65-1117, and amendments thereto, if the board finds such continuing education 34 credits are equivalent to those required by the board under K.S.A. 65-1117, 35 36 and amendments thereto; [and]

37 (2) be currently licensed [(3) evidence of current licensure] as a
 38 professional nurse; and[.]

39 (3) Upon receipt of such application and payment of any applicable fee,
40 and upon being satisfied that the applicant for renewal of a *license* certificate
41 of qualification meets the requirements established by the board under K.S.A.
42 65-1130, and amendments thereto, in effect at the time of initial qualification
43 of the applicant, the board shall verify the accuracy of the application and

1 grant a renewal *license*.eertificate of qualification.

2 Any person who fails to secure a renewal license certificate of (b) 3 qualification prior to the expiration of the license certificate of qualification may secure a reinstatement of such lapsed license eertificate of qualification 4 5 by making application therefor on a form provided by the board, upon furnishing proof that the applicant is competent and qualified to act as an 6 7 advanced *practice* registered nurse practitioner and upon satisfying all of the requirements for reinstatement including payment to the board of a 8 9 reinstatement fee as established by the board.

Sec. 9. [On January 1, 2012.] K.S.A. 65-1133 is hereby amended to read 10 as follows: 65-1133. (a) An approved educational and training program for 11 advanced practice registered nurses nurse practitioners is a program conducted 12 in Kansas which has been approved by the board as meeting the standards and 13 the rules and regulations of the board. An institution desiring to conduct an 14 educational and training program for advanced practice registered nurses 15 nurse practitioners shall apply to the board for approval and submit 16 17 satisfactory proof that it is prepared to and will maintain the standards and the 18 required curriculum for advanced *practice* registered *nurses* nurse practitioners 19 as prescribed by this act and by the rules and regulations of the board. Applications shall be made in writing on forms supplied by the board and shall 20 be submitted to the board together with the application fee fixed by the board. 21 22 The approval of an educational program for advanced *practice* registered 23 nurses nurse practitioners shall not exceed 10 years after the granting of such 24 approval by the board. An institution desiring to continue to conduct an approved educational program for advanced *practice* registered *nurses* nurse 25 26 practitioners shall apply to the board for the renewal of approval and submit satisfactory proof that it will maintain the standards and the required 27 28 curriculum for advanced *practice* registered *nurses* nurse practitioners as 29 prescribed by this act and by the rules and regulations of the board. 30 Applications for renewal of approval shall be made in writing on forms 31 supplied by the board. Each program shall submit annually to the board an 32 annual fee fixed by the board's rules and regulations to maintain the approved 33 status.

(b) A program to qualify as an approved educational program for advanced *practice* registered *nurses* <del>nurse</del> <del>practitioners</del> must be conducted in the state of Kansas, and the school conducting the program must apply to the board and submit evidence that: (1) It is prepared to carry out the curriculum prescribed by rules and regulations of the board; and (2) it is prepared to meet such other standards as shall be established by law and the rules and regulations of the board.

41 (c) The board shall prepare and maintain a list of programs which qualify
 42 as approved educational programs for advanced *practice* registered *nurses* 43 nurse practitioners whose graduates, if they have the other necessary

qualifications provided in this act, shall be eligible to apply for *licensure* 1 eertificates of qualification as advanced practice registered nurses.nurse-2 3 practitioners. A survey of the institution or school applying for approval of an 4 educational program for advanced *practice* registered *nurses* <del>nurse</del> 5 practitioners shall be made by an authorized employee of the board or members of the board, who shall submit a written report of the survey to the 6 7 board. If, in the opinion of the board, the requirements as prescribed by the board in its rules and regulations for approval are met, it shall so approve the 8 9 program. The board shall resurvey approved programs on a periodic basis as determined by rules and regulations. If the board determines that any approved 10 program is not maintaining the standards required by this act and by rules and 11 regulations prescribed by the board, notice thereof in writing, specifying the 12 failures of such program, shall be given. A program which fails to correct such 13 conditions to the satisfaction of the board within a reasonable time shall be 14 15 removed from the list of approved programs until such time as the program shall comply with such standards. All approved programs shall maintain 16 17 accurate and current records showing in full the theoretical and practical 18 courses given to each student.

(d) The board may accept nationally accredited *advanced* advance *practice* registered nurse practitioner programs as defined by in rules rule and
 *regulations adopted by the board in accordance with K.S.A.* 65-1130, and
 *amendments thereto* regulation:

(1) Advanced *practice* registered nurse practitioner programs which have
 received accreditation from a board recognized national nursing accreditation
 agency shall file evidence of initial accreditation with the board, and thereafter
 shall file all reports from the accreditation agency and any notice of any
 change in school accreditation status.

(2) Advanced *practice* registered nurse practitioner programs holding
 approval based upon national accreditation are also responsible for complying
 with all other requirements as determined by rules and regulations of the
 board.

(3) The board may grant approval to an advanced *practice* registered
 nurse practitioner program with national accreditation for a continuing period
 not to exceed 10 years.

Sec. 10. [On January 1, 2012,] K.S.A. 65-1154 is hereby amended to 35 read as follows: 65-1154. Upon application to the board by any licensed 36 37 professional nurse in this state and upon satisfaction of the standards and requirements established under this act and K.S.A. 65-1130, and amendments 38 39 thereto, the board shall grant an authorization to the applicant to perform the duties of a registered nurse anesthetist and be *licensed* eertified as an advanced 40 practice registered nurse. practitioner. An application to the board for an 41 authorization, for an authorization with temporary authorization, for biennial 42 43 renewal of authorization, for reinstatement of authorization and for

reinstatement of authorization with temporary authorization shall be upon such 1 2 form and contain such information as the board may require and shall be 3 accompanied by a fee to assist in defraying the expenses in connection with 4 the administration of the provisions of this act. The fee shall be fixed by rules 5 and regulations adopted by the board in an amount fixed by the board under 6 K.S.A. 65-1118, and amendments thereto. There shall be no fee assessed for 7 the initial, renewal or reinstatement of the advanced *practice* registered nurse 8 license practitioner certificate as long as the registered nurse anesthetist 9 maintains authorization. The executive administrator of the board shall remit 10 all moneys received to the state treasurer as provided by K.S.A. 74-1108, and 11 amendments thereto.

12 Sec. 11. **[On January 1, 2012,]** K.S.A. 65-1163 is hereby amended to 13 read as follows: 65-1163. Nothing in this act shall:

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

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

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

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

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

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

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

[On January 1, 2012,] K.S.A. 2010 Supp. 8-1,125 is hereby 36 Sec. 12. 37 amended to read as follows: 8-1,125. (a) Any Kansas resident who submits satisfactory proof to the director of vehicles, on a form provided by the 38 39 director, that such person is a person with a disability or is responsible for the transportation of a person with a disability shall be issued a special license 40 plate or a permanent placard for any motor vehicle owned by such person or 41 shall be issued a temporary placard. Satisfactory proof of disability, condition 42 43 or impairment shall include a statement from a person licensed to practice the

healing arts in any state, a licensed optometrist, an advanced practice 1 registered nurse practitioner registered licensed under K.S.A. 65-1131, and 2 3 amendments thereto, a licensed physician assistant or a Christian Science 4 practitioner listed in The Christian Science Journal certifying that such person is a person with a disability. The placard shall be suspended immediately 5 6 below the rear view mirror of any motor vehicle used for the transportation of 7 a person with a disability so as to be maximally visible from outside the 8 vehicle. In addition to the special license plate or permanent placard, the 9 director of vehicles shall issue to the person with a disability an individual identification card which must be carried by the person with a disability when 10 the motor vehicle being operated by or used for the transportation of such 11 person is parked in accordance with the provisions of K.S.A. 8-1,126, and 12 amendments thereto. In addition to the temporary placard, a person issued 13 such temporary placard shall carry the state or county receipt showing the 14 name of the person who is issued such temporary placard. A person submitting 15 satisfactory proof that such person's disability, condition or impairment is 16 17 permanent in nature, and upon such person's request and payment of the fees prescribed in subsection (b), shall be issued a permanent placard or a 18 19 permanent placard and a special license plate and an individual identification card. Upon proper request, one additional permanent placard shall be issued to 20 the applicant who has not requested and received a special license plate. Upon 21 22 proper request, one additional temporary placard shall be issued to the applicant certified as temporarily disabled. Temporary placards shall have an 23 expiration date of not longer than six months from the date of issuance. The 24 special license plates and placards shall display the international symbol of 25 26 access to the physically disabled.

(b) Special license plates issued pursuant to this section shall be issued 27 for the same period of time as other license plates are issued or for the 28 29 remainder of such period if an existing license plate is to be exchanged for the 30 special license plate. There shall be no fee for such special license plates in 31 addition to the regular registration fee. No person shall be issued more than 32 one special license plate, except that agencies or businesses which provide 33 transportation for persons with a disability as a service, may obtain additional 34 special license plates for vehicles which are utilized in the provision of that service. Special license plates may be personalized license plates subject to the 35 provisions of K.S.A. 8-132, and amendments thereto, including the payment of 36 37 the additional fee.

(c) Except as otherwise provided in this section, placards and individual identification cards issued pursuant to this section shall be issued for such period of time as the person to whom issued continues to be a person with a disability or a person responsible for the transportation of a person with a disability, except that the secretary of revenue shall make a determination of continued eligibility for a special license plate or placard at least every three 1 years from the original date of issuance of such license plate and placard.

2 (d) On and after July 1, 1992, the color of the permanent placard shall be 3 white on a blue background and the temporary placard shall be white on a red 4 background.

5 (e) In addition to such other information contained on identification 6 cards, cards issued or reissued on and after July 1, 2000, shall have the date of 7 birth and the sex of the person to whom the card is issued.

8 (f) Permanent placards and individual identification cards shall be 9 returned to the department of revenue upon the death of the person with a disability. Temporary placards shall be returned to the department of revenue 10 upon the expiration of the placard or upon the death of the person with a 11 disability. Special license plates shall be returned to the county treasurer to be 12 exchanged for another license plate upon the death of the person with a 13 disability. The individual identification cards issued with the special license 14 plates shall be returned to the department of revenue upon the death of the 15 16 person with a disability.

(g) Violation of subsection (f) is an unclassified misdemeanor punishableby a fine of not more than \$50.

Sec. 13. **[On January 1, 2012,]** K.S.A. 2010 Supp. 39-7,119 is hereby amended to read as follows: 39-7,119. (a) There is hereby created the medicaid drug utilization review board which shall be responsible for the implementation of retrospective and prospective drug utilization programs under the Kansas medicaid program.

(b) Except as provided in subsection (i), the board shall consist of at leastseven members appointed as follows:

(1) Two licensed physicians actively engaged in the practice of medicine,
 nominated by the Kansas medical society and appointed by the Kansas health
 policy authority from a list of four nominees;

(2) one licensed physician actively engaged in the practice of osteopathic
 medicine, nominated by the Kansas association of osteopathic medicine and
 appointed by the Kansas health policy authority from a list of four nominees;

(3) two licensed pharmacists actively engaged in the practice of
 pharmacy, nominated by the Kansas pharmacy association and appointed by
 the Kansas health policy authority from a list of four nominees;

(4) one person licensed as a pharmacist and actively engaged in academic
 pharmacy, appointed by the Kansas health policy authority from a list of four
 nominees provided by the university of Kansas;

(5) one licensed professional nurse actively engaged in long-term care
 nursing, nominated by the Kansas state nurses association and appointed by
 the Kansas health policy authority from a list of four nominees.

41 (c) The Kansas health policy authority may add two additional members
42 so long as no class of professional representatives exceeds 51% of the
43 membership.

1 (d) The physician and pharmacist members shall have expertise in the 2 clinically appropriate prescribing and dispensing of outpatient drugs.

(e) The appointments to the board shall be for terms of three years. In
making the appointments, the Kansas health policy authority shall provide for
geographic balance in the representation on the board to the extent possible.
Subject to the provisions of subsection (i), members may be reappointed.

7 (f) The board shall elect a chairperson from among board members who 8 shall serve a one-year term. The chairperson may serve consecutive terms.

9 (g) The board, in accordance with K.S.A. 75-4319, and amendments 10 thereto, may recess for a closed or executive meeting when it is considering 11 matters relating to identifiable patients or providers.

(h) All actions of the medicaid drug utilization review board shall be
upon the affirmative vote of five members of the board and the vote of each
member present when action was taken shall be recorded by roll call vote.

(i) Upon the expiration of the term of office of any member of the 15 medicaid drug utilization review board on or after the effective date of this act 16 17 and in any case of a vacancy existing in the membership position of any 18 member of the medicaid drug utilization review board on or after the effective 19 date of this act, a successor shall be appointed by the Kansas health policy authority so that as the terms of members expire, or vacancies occur, members 20 are appointed and the composition of the board is changed in accordance with 21 22 the following and such appointment shall be made by the Kansas health policy 23 authority in the following order of priority:

(1) One member shall be a licensed pharmacist who is actively
performing or who has experience performing medicaid pharmacy services for
a hospital and who is nominated by the Kansas hospital association and
appointed by the Kansas health policy authority from a list of two or more
nominees;

(2) one member shall be a licensed pharmacist who is actively performing
or who has experience performing medicaid pharmacy services for a licensed
adult care home and who is nominated by the state board of pharmacy and
appointed by the Kansas health policy authority from a list of two or more
nominees;

(3) one member shall be a licensed physician who is actively engaged in
the general practice of allopathic medicine and who has practice experience
with the state medicaid plan and who is nominated by the Kansas medical
society and appointed by the Kansas health policy authority from a list of two
or more nominees;

(4) one member shall be a licensed physician who is actively engaged in
mental health practice providing care and treatment to persons with mental
illness, who has practice experience with the state medicaid plan and who is
nominated by the Kansas psychiatric society and appointed by the Kansas
health policy authority from a list of two or more nominees;

(5) one member shall be a licensed physician who is the medical director 1 2 of a nursing facility, who has practice experience with the state medicaid plan 3 and who is nominated by the Kansas medical society and appointed by the 4 Kansas health policy authority from a list of two or more nominees:

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(6) one member shall be a licensed physician who is actively engaged in 6 the general practice of osteopathic medicine, who has practice experience with 7 the state medicaid plan and who is nominated by the Kansas association of 8 osteopathic medicine and who is appointed by the Kansas health policy 9 authority from a list of two or more nominees:

(7) one member shall be a licensed pharmacist who is actively engaged in 10 retail pharmacy, who has practice experience with the state medicaid plan and 11 who is nominated by the state board of pharmacy and appointed by the Kansas 12 health policy authority from a list of two or more nominees; 13

(8) one member shall be a licensed pharmacist who is actively engaged in 14 or who has experience in research pharmacy and who is nominated jointly by 15 the Kansas task force for the pharmaceutical research and manufacturers 16 association and the university of Kansas and appointed by the Kansas health 17 18 policy authority from a list of two or more jointly nominated persons; and

19 (9) one member shall be a licensed advanced *practice* registered nurse practitioner or physician assistant actively engaged in the practice of providing 20 the health care and treatment services such person is licensed to perform, who 21 22 has practice experience with the state medicaid plan and who is nominated jointly by the Kansas state nurses' association and the Kansas academy of 23 24 physician assistants and appointed by the Kansas health policy authority from 25 a list of two or more jointly nominated persons.

Sec. 14. [On January 1, 2012,] K.S.A. 2010 Supp. 40-2,111 is hereby 26 amended to read as follows: 40-2,111. As used in K.S.A. 40-2,111 through 40-27 2,113, and amendments thereto: (a) "Adverse underwriting decision" means: 28 29 Any of the following actions with respect to insurance transactions involving 30 insurance coverage which is individually underwritten:

31 32

(1) A declination of insurance coverage;

(2) a termination of insurance coverage;

33 (3) an offer to insure at higher than standard rates, with respect to life, 34 health or disability insurance coverage; or

the charging of a higher rate on the basis of information which differs 35 (4)from that which the applicant or policyholder furnished, with respect to 36 37 property or casualty insurance coverage.

(b) "Declination of insurance coverage" means a denial, in whole or in 38 39 part, by an insurance company or agent of requested insurance coverage.

(c) "Health care institution" means any medical care facility, adult care 40 home, drug abuse and alcoholic treatment facility, home-health agency 41 42 certified for federal reimbursement, mental health center or mental health 43 clinic licensed by the secretary of social and rehabilitation services, kidney

disease treatment center, county, city-county or multicounty health
 departments and health-maintenance organization.

3 (d) "Health care provider" means any person licensed to practice any 4 branch of the healing arts, licensed dentist, licensed professional nurse, 5 licensed practical nurse, *licensed* advanced *practice* registered nurse 6 <del>practitioner</del>, licensed optometrist, licensed physical therapist, licensed social 7 worker, licensed physician assistant, licensed podiatrist or licensed 8 psychologist.

9 (e) "Institutional source" means any natural person, corporation, 10 association, partnership or governmental or other legal entity that provides 11 information about an individual to an agent or insurance company, other than:

12 (1) An agent;

(2) the individual who is the subject of the information; or

(3) a natural person acting in a personal capacity rather than a business orprofessional capacity.

(f) "Insurance transaction" means any transaction involving insurance,
but not including group insurance coverage, primarily for personal, family or
household needs rather than business or professional needs.

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(g) "Medical-record information" means personal information which:

20 (1) Relates to an individual's physical or mental condition, medical21 history or medical treatment; and

(2) is obtained from a health care provider or health care institution, from
the individual, or from the individual's spouse, parent or legal guardian.

(h) "Termination of insurance coverage" or "termination of an insurance
policy" means either a cancellation, nonrenewal or lapse of an insurance
policy, in whole or in part, for any reason other than:

27 28 (1) The failure to pay a premium as required by the policy; or

(2) at the request or direction of the insured.

Sec. 15. [On January 1, 2012,] K.S.A. 40-2250 is hereby amended to 29 read as follows: 40-2250. (a) Notwithstanding any provision of an individual 30 31 or group policy or contract for health and accident insurance delivered within the state, whenever such policy or contract shall provide for reimbursement for 32 33 any services within the lawful scope of practice of an a licensed advanced practice registered nurse practitioner within the state of Kansas, the insured, or 34 any other person covered by the policy or contract, shall be allowed and 35 entitled to reimbursement for such service irrespective of whether it was 36 37 provided or performed by a duly licensed physician or an a licensed advanced practice registered nurse. practitioner. 38

39 (b) Notwithstanding the provisions of subsection (a), reimbursement shall
 40 be mandated with respect to services performed by an advanced registered
 41 nurse practitioner in Douglas, Johnson, Leavenworth, Sedgwick, Shawnee or
 42 Wyandotte counties.

43 (c) The provisions of subsection (b) shall expire on July 1, 1998.

1 Sec. 16. **[On January 1, 2012,]** K.S.A. 2010 Supp. 65-468 is hereby 2 amended to read as follows: 65-468. As used in K.S.A. 65-468 to 65-474, 3 inclusive, and amendments thereto:

4 (a) "Health care provider" means any person licensed or otherwise 5 authorized by law to provide health care services in this state or a professional 6 corporation organized pursuant to the professional corporation law of Kansas 7 by persons who are authorized by law to form such corporation and who are 8 health care providers as defined by this subsection, or an officer, employee or 9 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.

13 (c) "Mid-level practitioner" means a physician assistant or advanced 14 *practice* registered nurse <del>practitioner</del> who has entered into a written protocol 15 with a rural health network physician.

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(d) "Physician" means a person licensed to practice medicine and surgery.

"Rural health network" means an alliance of members including at 17 (e) 18 least one critical access hospital and at least one other hospital which has 19 developed a comprehensive plan submitted to and approved by the secretary of health and environment regarding patient referral and transfer; the provision of 20 nonemergency transportation among 21 emergency and members; the development of a network-wide emergency services plan; and the development 22 of a plan for sharing patient information and services between hospital 23 members concerning medical staff credentialing, risk management, quality 24 25 assurance and peer review.

(f) "Critical access hospital" means a member of a rural health network 26 which makes available twenty-four hour emergency care services; provides not 27 more than 25 acute care inpatient beds or in the case of a facility with an 28 approved swing-bed agreement a combined total of extended care and acute 29 care beds that does not exceed 25 beds; provides acute inpatient care for a 30 31 period that does not exceed, on an annual average basis, 96 hours per patient; 32 and provides nursing services under the direction of a licensed professional 33 nurse and continuous licensed professional nursing services for not less than 24 hours of every day when any bed is occupied or the facility is open to 34 provide services for patients unless an exemption is granted by the licensing 35 agency pursuant to rules and regulations. The critical access hospital may 36 37 provide any services otherwise required to be provided by a full-time, on-site dietician, pharmacist, laboratory technician, medical technologist and 38 radiological technologist on a part-time, off-site basis under written 39 agreements or arrangements with one or more providers or suppliers 40 recognized under medicare. The critical access hospital may provide inpatient 41 services by a physician assistant, advanced practice registered nurse 42 practitioner or a clinical nurse specialist subject to the oversight of a physician 43

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who need not be present in the facility. In addition to the facility's 25 acute
beds or swing beds, or both, the critical access 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 limit, nor will these units be subject
to the average 96-hour length of stay restriction.

6 (g) "Hospital" means a hospital other than a critical access hospital which 7 has entered into a written agreement with at least one critical access hospital to 8 form a rural health network and to provide medical or administrative 9 supporting services within the limit of the hospital's capabilities.

10 Sec. 17. **[On January 1, 2012,]** K.S.A. 2010 Supp. 65-1626 is hereby 11 amended to read as follows: 65-1626. For the purposes of this act:

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

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

16 (2) the patient or research subject at the direction and in the presence of 17 the practitioner; or

18 (3) a pharmacist as authorized in K.S.A. 65-1635a, and amendments 19 thereto.

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

25 (c) "Authorized distributor of record" means a wholesale distributor with 26 whom a manufacturer has established an ongoing relationship to distribute the 27 manufacturer's prescription drug. An ongoing relationship is deemed to exist between such wholesale distributor and a manufacturer when the wholesale 28 29 distributor, including any affiliated group of the wholesale distributor, as 30 defined in section 1504 of the internal revenue code, complies with any one of 31 the following: (1) The wholesale distributor has a written agreement currently 32 in effect with the manufacturer evidencing such ongoing relationship; and (2) 33 the wholesale distributor is listed on the manufacturer's current list of 34 authorized distributors of record, which is updated by the manufacturer on no 35 less than a monthly basis.

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

(e) "Brand exchange" means the dispensing of a different drug product of
 the same dosage form and strength and of the same generic name *asthan* the
 brand name drug product prescribed.

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

43 (g) "Chain pharmacy warehouse" means a permanent physical location

for drugs or devices, or both, that *acts* act as a central warehouse and *performs* perform 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.

5 (h) "Co-licensee" means a pharmaceutical manufacturer that has entered 6 into an agreement with another pharmaceutical manufacturer to engage in a 7 business activity or occupation related to the manufacture or distribution of a 8 prescription drug and the national drug code on the drug product label shall be 9 used to determine the identity of the drug manufacturer.

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

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

(k) "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.

(1) "Dispenser" means a practitioner or pharmacist who dispensesprescription medication.

(m) "Distribute" means to deliver, other than by administering ordispensing, any drug.

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

26 "Drop shipment" means the sale, by a manufacturer, that (0) manufacturer's co-licensee, that manufacturer's third party logistics provider, 27 or that manufacturer's exclusive distributor, of the manufacturer's prescription 28 29 drug, to a wholesale distributor whereby the wholesale distributor takes title 30 but not possession of such prescription drug and the wholesale distributor 31 invoices the pharmacy, the chain pharmacy warehouse, or other designated 32 person authorized by law to dispense or administer such prescription drug, and 33 the pharmacy, the chain pharmacy warehouse, or other designated person 34 authorized by law to dispense or administer such prescription drug receives delivery of the prescription drug directly from the manufacturer, that 35 manufacturer's co-licensee, that manufacturer's third party logistics provider, 36 37 or that manufacturer's exclusive distributor, of such prescription drug. Drop shipment shall be part of the "normal distribution channel."-38

(p) "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) 1 articles intended for use as a component of any articles specified in clause (1), 2 3 (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 4 5 (laetrile) or any livestock remedy, if such livestock remedy had been registered 6 in accordance with the provisions of article 5 of chapter 47 of the Kansas 7 Statutes Annotated prior to its repeal.

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

"Exclusive distributor" means any entity that: (1) Contracts with a 19 (r) manufacturer to provide or coordinate warehousing, wholesale distribution or 20 other services on behalf of a manufacturer and who takes title to that 21 22 manufacturer's prescription drug, but who does not have general responsibility 23 to direct the sale or disposition of the manufacturer's prescription drug; (2) is 24 registered as a wholesale distributor under the pharmacy act of the state of 25 Kansas; and (3) to be considered part of the normal distribution channel, must be an authorized distributor of record. 26

"Electronic transmission" means transmission of information in 27 (s) 28 electronic form or the transmission of the exact visual image of a document by 29 way of electronic equipment.

30 "Generic name" means the established chemical name or official name (t) 31 of a drug or drug product.

32 (u) (1) "Institutional drug room" means any location where prescription-33 only drugs are stored and from which prescription-only drugs are administered 34 or dispensed and which is maintained or operated for the purpose of providing 35 the drug needs of:

36 (A)

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Inmates of a jail or correctional institution or facility;

37 residents of a juvenile detention facility, as defined by the revised (B) Kansas code for care of children and the revised Kansas juvenile justice code; 38

39 students of a public or private university or college, a community (C) college or any other institution of higher learning which is located in Kansas; 40 41

- employees of a business or other employer; or (D)
- (E) persons receiving inpatient hospice services.
- 43 (2)"Institutional drug room" does not include:

(A) Any registered pharmacy;

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(B) any office of a practitioner; or

3 (C) a location where no prescription-only drugs are dispensed and no 4 prescription-only drugs other than individual prescriptions are stored or 5 administered.

6 (v) "Intracompany transaction" means any transaction or transfer between 7 any division, subsidiary, parent or affiliated or related company under common 8 ownership or control of a corporate entity, or any transaction or transfer 9 between co-licensees of a co-licensed product.

10 (w) "Medical care facility" shall have the meaning provided in K.S.A. 65-11 425, and amendments thereto, except that the term shall also include facilities 12 licensed under the provisions of K.S.A. 75-3307b, and amendments thereto, 13 except community mental health centers and facilities for the mentally 14 retarded.

"Manufacture" means the production, preparation, propagation, 15 (x) compounding, conversion or processing of a drug either directly or indirectly 16 17 by extraction from substances of natural origin, independently by means of 18 chemical synthesis or by a combination of extraction and chemical synthesis 19 and includes any packaging or repackaging of the drug or labeling or relabeling of its container, except that this term shall not include the 20 preparation or compounding of a drug by an individual for the individual's 21 22 own use or the preparation, compounding, packaging or labeling of a drug by: 23 (1) A practitioner or a practitioner's authorized agent incident to such 24 practitioner's administering or dispensing of a drug in the course of the 25 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 26 27 an incident to, research, teaching or chemical analysis and not for sale; or (3) a pharmacist or the pharmacist's authorized agent acting under the direct 28 29 supervision of the pharmacist for the purpose of, or incident to, the dispensing 30 of a drug by the pharmacist.

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

(z) "Normal distribution channel" means a chain of custody for a
prescription-only drug that goes from a manufacturer of the prescription-only
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:

39 (1) A pharmacy to a patient or to other designated persons authorized by40 law to dispense or administer such drug to a patient;

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

43 (3) a wholesale distributor to a chain pharmacy warehouse to that chain

pharmacy warehouse's intracompany pharmacy to a patient or other designated
 persons authorized by law to dispense or administer such drug to a patient; or

3 (4) a chain pharmacy warehouse to the chain pharmacy warehouse's 4 intracompany pharmacy to a patient or other designated persons authorized by 5 law to dispense or administer such drug to a patient.

6 (aa) "Person" means individual, corporation, government, governmental7 subdivision or agency, partnership, association or any other legal entity.

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

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

19 "Pharmacy," "drug store" or "apothecary" means premises, (dd)laboratory, area or other place: (1) Where drugs are offered for sale where the 20 profession of pharmacy is practiced and where prescriptions are compounded 21 22 and dispensed; or (2) which has displayed upon it or within it the words chemist," "pharmacy," "apothecary," 23 "pharmacist," "pharmaceutical "drugstore," "druggist," "drugs," "drug sundries" or any of these words or 24 combinations of these words or words of similar import either in English or 25 any sign containing any of these words; or (3) where the characteristic 26 symbols of pharmacy or the characteristic prescription sign "Rx" may be 27 28 exhibited. As used in this subsection, premises refers only to the portion of any building or structure leased, used or controlled by the licensee in the conduct 29 30 of the business registered by the board at the address for which the registration 31 was issued.

(ee) "Pharmacy student" means an individual, registered with the board ofpharmacy, enrolled in an accredited school of pharmacy.

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

(gg) "Practitioner" means a person licensed to practice medicine and
surgery, dentist, podiatrist, veterinarian, optometrist licensed under theoptometry law as a therapeutic licensee or diagnostic and therapeutic licensee,
or scientific investigator or other person authorized by law to use a

prescription-only drug in teaching or chemical analysis or to conduct research
 with respect to a prescription-only drug.

3 (hh) "Preceptor" means a licensed pharmacist who possesses at least two 4 years' experience as a pharmacist and who supervises students obtaining the 5 pharmaceutical experience required by law as a condition to taking the 6 examination for licensure as a pharmacist.

7 (ii) "Prescription" means, according to the context, either a prescription 8 order or a prescription medication.

9 (jj) "Prescription medication" means any drug, including label and 10 container according to context, which is dispensed pursuant to a prescription 11 order.

(kk) "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
 United States Code section 353, as amended), to be dispensed only pursuant to
 a written or oral prescription or order of a practitioner or is restricted to use by
 practitioners only.

- (II) "Prescription order" means: (1) An order to be filled by a pharmacist
  for prescription medication issued and signed by a practitioner or a mid-level
  practitioner in the authorized course of professional practice; or (2) an order
  transmitted to a pharmacist through word of mouth, note, telephone or other
  means of communication directed by such practitioner or mid-level
  practitioner.
- (mm) "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.

29 (nn) "Professional incompetency" means:

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

(2) repeated instances involving failure to adhere to the applicable
 standard of pharmaceutical care to a degree which constitutes ordinary
 negligence, as determined by the board; or

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

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

"Secretary" means the executive secretary of the board. 1 (pp) "Third party logistics provider" means an entity that: (1) Provides or 2 (qq)3 coordinates warehousing, distribution or other services on behalf of a manufacturer, but does not take title to the prescription drug or have general 4 responsibility to direct the prescription drug's sale or disposition; (2) is 5 6 registered as a wholesale distributor under the pharmacy act of the state of 7 Kansas; and (3) to be considered part of the normal distribution channel, must 8 also be an authorized distributor of record. 9 (rr) "Unprofessional conduct" means: 10 (1) Fraud in securing a registration or permit; (2) intentional adulteration or mislabeling of any drug, medicine, 11 12 chemical or poison; 13 (3) causing any drug, medicine, chemical or poison to be adulterated or mislabeled, knowing the same to be adulterated or mislabeled; 14 intentionally falsifying or altering records or prescriptions; 15 (4) unlawful possession of drugs and unlawful diversion of drugs to 16 (5) 17 others; 18 (6) willful betraval of confidential information under K.S.A. 65-1654, 19 and amendments thereto: conduct likely to deceive, defraud or harm the public; 20 (7)(8) making a false or misleading statement regarding the licensee's 21 22 professional practice or the efficacy or value of a drug; (9) commission of any act of sexual abuse, misconduct or exploitation 23 24 related to the licensee's professional practice; or 25 (10) performing unnecessary tests, examinations or services which have 26 no legitimate pharmaceutical purpose. 27 "Mid-level practitioner" means an advanced *practice* registered nurse (ss) practitioner issued a eertificate of qualification license pursuant to K.S.A. 65-28 29 1131, and amendments thereto, who has authority to prescribe drugs pursuant 30 to a written protocol with a responsible physician under K.S.A. 65-1130, and 31 amendments thereto, or a physician assistant licensed pursuant to the physician 32 assistant licensure act who has authority to prescribe drugs pursuant to a 33 written protocol with a responsible physician under K.S.A. 65-28a08, and 34 amendments thereto. "Vaccination protocol" means a written protocol, agreed to by a 35 (tt) pharmacist and a person licensed to practice medicine and surgery by the state 36 37 board of healing arts, which establishes procedures and recordkeeping and reporting requirements for administering a vaccine by the pharmacist for a 38 39 period of time specified therein, not to exceed two years. "Veterinary medical teaching hospital pharmacy" means any location 40 (uu) where prescription-only drugs are stored as part of an accredited college of 41 veterinary medicine and from which prescription-only drugs are distributed for 42 43 use in treatment of or administration to a *nonhuman*. non-human.

(vv) "Wholesale distributor" means any person engaged in wholesale 1 2 distribution of prescription drugs or devices in or into the state, including, but 3 not limited to, manufacturers, repackagers, own-label distributors, private-4 label distributors, jobbers, brokers, warehouses, including manufacturers' and 5 distributors' warehouses, co-licensees, exclusive distributors, third party logistics providers, chain pharmacy warehouses that conduct wholesale 6 7 distributions, and wholesale drug warehouses, independent wholesale drug 8 traders and retail pharmacies that conduct wholesale distributions. Wholesale 9 distributor shall not include persons engaged in the sale of durable medical equipment to consumers or patients. 10

(ww) "Wholesale distribution" means the distribution of prescription 11 12 drugs or devices by wholesale distributors to persons other than consumers or patients, and includes the transfer of prescription drugs by a pharmacy to 13 another pharmacy if the total number of units of transferred drugs during a 14 twelve-month period does not exceed 5% of the total number of all units 15 dispensed by the pharmacy during the immediately preceding twelve-month 16 17 period. Wholesale distribution does not include: (1) The sale, purchase or trade 18 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 19 pursuant to a prescription; (2) the sale, purchase or trade of a prescription drug 20 or device or an offer to sell, purchase or trade a prescription drug or device for 21 22 emergency medical reasons; (3) intracompany transactions, as defined in this section, unless in violation of own use provisions; (4) the sale, purchase or 23 24 trade of a prescription drug or device or an offer to sell, purchase or trade a 25 prescription drug or device among hospitals, chain pharmacy warehouses, pharmacies or other health care entities that are under common control; (5) the 26 27 sale, purchase or trade of a prescription drug or device or the offer to sell, 28 purchase or trade a prescription drug or device by a charitable organization 29 described in  $503(c)(3)\frac{503}{(c)(3)}$  of the internal revenue code of 1954 to a 30 nonprofit affiliate of the organization to the extent otherwise permitted by law; 31 (6) the purchase or other acquisition by a hospital or other similar health care 32 entity that is a member of a group purchasing organization of a prescription 33 drug or device for its own use from the group purchasing organization or from 34 other hospitals or similar health care entities that are members of these organizations; (7) the transfer of prescription drugs or devices between 35 pharmacies pursuant to a centralized prescription processing agreement; (8) 36 37 the sale, purchase or trade of blood and blood components intended for transfusion; (9) the return of recalled, expired, damaged or otherwise non-38 39 salable prescription drugs, when conducted by a hospital, health care entity, pharmacy, chain pharmacy warehouse or charitable institution in accordance 40 with the board's rules and regulations; (10) the sale, transfer, merger or 41 consolidation of all or part of the business of a retail pharmacy or pharmacies 42 43 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 1 2 rules and regulations; (11) the distribution of drug samples by manufacturers' 3 and authorized distributors' representatives; (12) the sale of minimal quantities 4 of drugs by retail pharmacies to licensed practitioners for office use: or (13) the sale or transfer from a retail pharmacy or chain pharmacy warehouse of 5 6 expired, damaged, returned or recalled prescription drugs to the original 7 manufacturer, originating wholesale distributor or to a third party returns 8 processor in accordance with the board's rules and regulations.

9 [On January 1, 2012,] K.S.A. 2010 Supp. 65-2921 is hereby Sec. 18. amended to read as follows: 65-2921. (a) Except as otherwise provided in 10 subsection (b), (c) or (d), a physical therapist may evaluate patients without 11 physician referral but may initiate treatment only after approval by a licensed 12 physician, a licensed podiatrist, a licensed physician assistant or an a licensed 13 advanced *practice* registered nurse practitioner working pursuant to the order 14 or direction of a licensed physician, a licensed chiropractor, a licensed dentist 15 or licensed optometrist in appropriately related cases. Physical therapists may 16 initiate physical therapy treatment with the approval of a practitioner of the 17 18 healing arts duly licensed under the laws of another state and may provide 19 such treatment based upon an order by such practitioner in any setting in which physical therapists would be authorized to provide such treatment with 20 the approval of a physician licensed by the board, notwithstanding any 21 22 provisions of the Kansas healing arts act or any rules and regulations adopted 23 by the board thereunder.

24 (b) Physical therapists may evaluate and treat a patient for no more than 25 30 consecutive calendar days without a referral under the following conditions: (1) The patient has previously been referred to a physical therapist 26 27 for physical therapy services by a person authorized by this section to approve treatment; (2) the patient's referral for physical therapy was made within one 28 year from the date a physical therapist implements a program of physical 29 30 therapy treatment without a referral; (3) the physical therapy being provided to 31 the patient without referral is for the same injury, disease or condition as 32 indicated in the referral for such previous injury, disease or condition; and (4) 33 the physical therapist transmits to the physician or other practitioner identified 34 by the patient a copy of the initial evaluation no later than five business days after treatment commences. Treatment of such patient for more than 30 35 consecutive calendar days of such patient shall only be upon the approval of a 36 37 person authorized by this section to approve treatment.

(c) Physical therapists may provide, without a referral, services which do
not constitute treatment for a specific condition, disease or injury 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.

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3 (d) Physical therapists may provide services without a referral to special

education students who need physical therapy services to fulfill the provisions 1

of their individualized education plan (IEP) or individualized family service 2 3 plan (IFSP).

Sec. 19. [On January 1, 2012,] K.S.A. 2010 Supp. 65-4101 is hereby 4 amended to read as follows: 65-4101. As used in this act: (a) "Administer" 5 6 means the direct application of a controlled substance, whether by injection, 7 inhalation, ingestion or any other means, to the body of a patient or research subject by: (1) A practitioner or pursuant to the lawful direction of a 8 9 practitioner: or

10 (2) the patient or research subject at the direction and in the presence of the practitioner. 11

(b) "Agent" means an authorized person who acts on behalf of or at the 12 direction of a manufacturer, distributor or dispenser. It does not include a 13 common carrier, public warehouseman or employee of the carrier or 14 15 warehouseman.

16

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

(d) "Bureau" means the bureau of narcotics and dangerous drugs, United 17 18 States department of justice, or its successor agency.

19 (e) "Controlled substance" means any drug, substance or immediate precursor included in any of the schedules designated in K.S.A. 65-4105, 65-20 4107, 65-4109, 65-4111 and 65-4113, and amendments thereto.to these-21 22 sections

23 "Counterfeit substance" means a controlled substance which, or the (f) container or labeling of which, without authorization bears the trademark. 24 trade name or other identifying mark, imprint, number or device or any 25 likeness thereof of a manufacturer, distributor or dispenser other than the 26 person who in fact manufactured, distributed or dispensed the substance. 27

28 "Deliver" or "delivery" means the actual, constructive or attempted (g) 29 transfer from one person to another of a controlled substance, whether or not 30 there is an agency relationship.

31 (h) "Dispense" means to deliver a controlled substance to an ultimate user 32 or research subject by or pursuant to the lawful order of a practitioner, 33 including the packaging, labeling or compounding necessary to prepare the substance for that delivery, or pursuant to the prescription of a mid-level 34 35 practitioner.

36 "Dispenser" means a practitioner or pharmacist who dispenses. (i)

37 "Distribute" means to deliver other than by administering or (i) dispensing a controlled substance. 38 39

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

"Drug" means: (1) Substances recognized as drugs in the official 40 (1)United States pharmacopoeia, official homeopathic pharmacopoeia of the 41 United States or official national formulary or any supplement to any of them; 42 43 (2) substances intended for use in the diagnosis, cure, mitigation, treatment or

prevention of disease in man or animals; (3) substances (other 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 article specified in
 clause (1), (2) or (3) of this subsection. It does not include devices or their
 components, parts or accessories.

6 (m) "Immediate precursor" means a substance which the board has found 7 to be and by rule and regulation designates as being the principal compound 8 commonly used or produced primarily for use and which is an immediate 9 chemical intermediary used or likely to be used in the manufacture of a 10 controlled substance, the control of which is necessary to prevent, curtail or 11 limit manufacture.

"Manufacture" means the production, preparation, propagation, 12 (n) compounding, conversion or processing of a controlled substance either 13 directly or indirectly or by extraction from substances of natural origin or 14 independently by means of chemical synthesis or by a combination of 15 extraction and chemical synthesis and includes any packaging or repackaging 16 17 of the substance or labeling or relabeling of its container, except that this term 18 does not include the preparation or compounding of a controlled substance by 19 an individual for the individual's own lawful use or the preparation, compounding, packaging or labeling of a controlled substance: (1) By a 20 practitioner or the practitioner's agent pursuant to a lawful order of a 21 22 practitioner as an incident to the practitioner's administering or dispensing of a 23 controlled substance in the course of the practitioner's professional practice; or

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

28 (o) "Marijuana" means all parts of all varieties of the plant Cannabis 29 whether growing or not, the seeds thereof, the resin extracted from any part of 30 the plant and every compound, manufacture, salt, derivative, mixture or 31 preparation of the plant, its seeds or resin. It does not include the mature stalks 32 of the plant, fiber produced from the stalks, oil or cake made from the seeds of 33 the plant, any other compound, manufacture, salt, derivative, mixture or 34 preparation of the mature stalks, except the resin extracted therefrom, fiber, oil, or cake or the sterilized seed of the plant which is incapable of 35 36 germination.

(p) "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: (1) Opium and opiate and any salt,
compound, derivative or preparation of opium or opiate;

42 (2) any salt, compound, isomer, derivative or preparation thereof which is 43 chemically equivalent or identical with any of the substances referred to in

clause (1) but not including the isoquinoline alkaloids of opium; 1 2

(3) opium poppy and poppy straw;

3 (4) coca leaves and any salt, compound, derivative or preparation of coca leaves, and any salt, compound, isomer, derivative or preparation thereof 4 which is chemically equivalent or identical with any of these substances, but 5 6 not including decocainized coca leaves or extractions of coca leaves which do 7 not contain cocaine or ecgonine.

8 (q) "Opiate" means any substance having an addiction-forming or addiction-sustaining liability similar to morphine or being capable of 9 conversion into a drug having addiction-forming or addiction-sustaining 10 liability. It does not include, unless specifically designated as controlled under 11 K.S.A. 65-4102, and amendments thereto, the dextrorotatory isomer of 3-12 methoxy-n-methylmorphinan and its salts (dextromethorphan). It does include 13 its racemic and levorotatory forms. 14

(r) "Opium poppy" means the plant of the species *Papaver somniferum l*. 15 except its seeds. 16

17 (s) "Person" means individual, corporation, government, or governmental 18 subdivision or agency, business trust, estate, trust, partnership or association or 19 any other legal entity.

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

22 (u) "Pharmacist" means an individual currently licensed by the board to practice the profession of pharmacy in this state. 23

(v) "Practitioner" means a person licensed to practice medicine and 24 surgery, dentist, podiatrist, veterinarian, optometrist licensed under the 25 optometry law as a therapeutic licensee or diagnostic and therapeutic licensee, 26 or scientific investigator or other person authorized by law to use a controlled 27 28 substance in teaching or chemical analysis or to conduct research with respect 29 to a controlled substance.

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

32 (x) "Ultimate user" means a person who lawfully possesses a controlled 33 substance for such person's own use or for the use of a member of such person's household or for administering to an animal owned by such person or 34 by a member of such person's household. 35

36

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

37 (z) "Medical care facility" shall have the meaning ascribed to that term in K.S.A. 65-425, and amendments thereto. 38

(aa) "Cultivate" means the planting or promotion of growth of five or 39 more plants which contain or can produce controlled substances. 40

(bb) (1) "Controlled substance analog" means a substance that is intended 41 42 for human consumption, and:

43 (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;

3 (B) which has a stimulant, depressant or hallucinogenic effect on the 4 central nervous system substantially similar to the stimulant, depressant or 5 hallucinogenic effect on the central nervous system of a controlled substance 6 included in the schedules designated in K.S.A. 65-4105 or 65-4107, and 7 amendments thereto; or

8 (C) with respect to a particular individual, which the individual represents 9 or intends to have a stimulant, depressant or hallucinogenic effect on the 10 central nervous system substantially similar to the stimulant, depressant or 11 hallucinogenic effect on the central nervous system of a controlled substance 12 included in the schedules designated in K.S.A. 65-4105 or 65-4107, and 13 amendments thereto.

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

15 (A) A controlled substance;

16

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

17 (C) a substance with respect to which an exemption is in effect for 18 investigational use by a particular person under section 505 of the federal 19 food, drug, and cosmetic act (21 U.S.C. § 355) to the extent conduct with 20 respect to the substance is permitted by the exemption.

"Mid-level practitioner" means an advanced practice registered nurse 21 (cc)22 practitioner issued a certificate of qualification license pursuant to K.S.A. 65-1131, and amendments thereto, who has authority to prescribe drugs pursuant 23 to a written protocol with a responsible physician under K.S.A. 65-1130, and 24 amendments thereto, or a physician assistant licensed under the physician 25 assistant licensure act who has authority to prescribe drugs pursuant to a 26 27 written protocol with a responsible physician under K.S.A. 65-28a08, and 28 amendments thereto.

Sec. 20. [On January 1, 2012,] K.S.A. 2010 Supp. 65-5402 is hereby
amended to read as follows: 65-5402. As used in K.S.A. 65-5401 to 65-5417,
inclusive, and K.S.A. 65-5418 to 65-5420, inclusive, and amendments thereto:

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

33 (b) "Practice of occupational therapy" means the therapeutic use of 34 purposeful and meaningful occupations (goal-directed activities) to evaluate and treat, pursuant to the referral, supervision, order or direction of a 35 physician, a licensed podiatrist, a licensed dentist, a licensed physician 36 37 assistant, or an a licensed advanced practice registered nurse practitionerworking pursuant to the order or direction of a person licensed to practice 38 medicine and surgery, a licensed chiropractor, or a licensed optometrist, 39 individuals who have a disease or disorder, impairment, activity limitation or 40 participation restriction that interferes with their ability to function 41 independently in daily life roles and to promote health and wellness. 42 43 Occupational therapy intervention may include:

1 (1) Remediation or restoration of performance abilities that are limited 2 due to impairment in biological, physiological, psychological or neurological 3 cognitive processes;

4 (2) adaptation of tasks, process, or the environment or the teaching of 5 compensatory techniques in order to enhance performance;

6 (3) disability prevention methods and techniques that facilitate the 7 development or safe application of performance skills; and

8 (4) health promotion strategies and practices that enhance performance 9 abilities.

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

(1) Evaluating, developing, improving, sustaining, or restoring skills in
 activities of daily living (ADL), work or productive activities, including
 instrumental activities of daily living (IADL) and play and leisure 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 ofergonomic principles, to enhance performance and safety in daily life roles;

(5) applying physical agent modalities as an adjunct to or in preparationfor engagement in occupations;

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

24 (7) educating the client, family, caregiver or others in carrying out25 appropriate nonskilled interventions; and

26 (8) consulting with groups, programs, organizations or communities to 27 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.

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

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(g) "Physician" means a person licensed to practice medicine and 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. 21. **[On January 1, 2012,]** K.S.A. 2010 Supp. 65-6112 is hereby 41 amended to read as follows: 65-6112. As used in this act:

42 (a) "Administrator" means the executive director of the emergency43 medical services board.

1 (b) "Advanced emergency medical technician" means a person who holds 2 an advanced emergency medical technician certificate issued pursuant to this 3 act.

4 (c) "Advanced *practice* registered nurse <del>practitioner</del>" means an advanced 5 *practice* registered nurse <del>practitioner</del> as defined in K.S.A. 65-1113, and 6 amendments thereto.

7 (d) "Ambulance" means any privately or publicly owned motor vehicle,
8 airplane or helicopter designed, constructed, prepared, staffed and equipped
9 for use in transporting and providing emergency care for individuals who are
10 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 technician-intermediate,
emergency medical technician-defibrillator, emergency medical technicianintermediate/defibrillator, advanced emergency medical technician, mobile
intensive care technician or paramedic certified pursuant to this act.

20 (g) "Board" means the emergency medical services board established 21 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 <del>practitioner</del>, 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.

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

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

40 (m) "Emergency medical responder" means a person who holds an 41 emergency medical responder certificate issued pursuant to this act.

42 (n) "First responder" means a person who holds a first responder 43 certificate issued pursuant to this act. 1 (o) "Hospital" means a hospital as defined by K.S.A. 65-425, and 2 amendments thereto.

3 (p) "Instructor-coordinator" means a person who is certified under this act 4 to teach initial courses of certification of instruction and continuing education 5 classes.

6 (q)

(q) "Medical adviser" means a physician.

7 "Medical protocols" mean written guidelines which authorize (r) 8 attendants to perform certain medical procedures prior to contacting a physician, physician assistant authorized by a physician, advanced *practice* 9 registered nurse <del>practitioner</del> authorized by a physician or professional nurse 10 authorized by a physician. The medical protocols shall be approved by a 11 county medical society or the medical staff of a hospital to which the 12 ambulance service primarily transports patients, or if neither of the above are 13 able or available to approve the medical protocols, then the medical protocols 14 shall be submitted to the medical advisory council for approval. 15

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

18 (t) "Municipality" means any city, county, township, fire district or 19 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 to
 operate an ambulance service in the state of Kansas.

(w) "Paramedic" means a person who holds a paramedic certificate issuedpursuant 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 healing artsto 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
 responsible physician.

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

(bb) "Provider of training" means a corporation, partnership, 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.

43 (cc) "Responsible physician" means responsible physician as such term is

defined under K.S.A. 65-28a02, and amendments thereto. 1

"Training officer" means a person who is certified pursuant to this 2 (dd)3 act to teach initial courses of instruction for first responders or emergency 4 medical responders and continuing education as prescribed by the board.

[On January 1, 2012,] K.S.A. 2010 Supp. 65-6119 is hereby 5 Sec. 22. 6 amended to read as follows: 65-6119. (a) Notwithstanding any other provision 7 of law, mobile intensive care technicians may:

8 (1) Perform all the authorized activities identified in K.S.A. 65-6120, 65-9 6121, 65-6123, 65-6144, and amendments thereto:

(2) when voice contact or a telemetered electrocardiogram is monitored 10 by a physician, physician assistant where authorized by a physician, an 11 advanced *practice* registered nurse practitioner where authorized by a 12 physician or licensed professional nurse where authorized by a physician and 13 direct communication is maintained, and upon order of such person may 14 administer such medications or procedures as may be deemed necessary by a 15 16 person identified in subsection (a)(2);

17 (3) perform, during an emergency, those activities specified in subsection 18 (a)(2) before contacting a person identified in subsection (a)(2) when 19 specifically authorized to perform such activities by medical protocols; and

(4) perform, during nonemergency transportation, those activities 20 specified in this section when specifically authorized to perform such activities 21 22 by medical protocols.

23 (b) An individual who holds a valid certificate as a mobile intensive care technician once meeting the continuing education requirements prescribed by 24 the rules and regulations of the board, upon application for renewal, shall be 25 deemed to hold a certificate as a paramedic under this act, and such individual 26 27 shall not be required to file an original application as a paramedic for 28 certification under this act.

29 (c) "Renewal" as used in subsection (b), refers to the first opportunity that 30 a mobile intensive care technician has to apply for renewal of a certificate 31 following the effective date of this act.

32 (d) Upon transition notwithstanding any other provision of law, a 33 paramedic may:

(1) Perform all the authorized activities identified in K.S.A. 65-6120, 65-34 6121, 65-6144, and amendments thereto; 35

(2) when voice contact or a telemetered electrocardiogram is monitored 36 37 by a physician, physician assistant where authorized by a physician or an advanced practice registered nurse practitioner where authorized by a 38 physician or licensed professional nurse where authorized by a physician and 39 direct communication is maintained, and upon order of such person, may 40 administer such medications or procedures as may be deemed necessary by a 41 42 person identified in subsection (d)(2);

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(3) perform, during an emergency, those activities specified in subsection

1 (d)(2) before contacting a person identified in subsection (d)(2) when 2 specifically authorized to perform such activities by medical protocols; and

3 (4) perform, during nonemergency transportation, those activities 4 specified in this section when specifically authorized to perform such activities 5 by medical protocols.

6 Sec. 23. **[On January 1, 2012,]** K.S.A. 2010 Supp. 65-6120 is hereby 7 amended to read as follows: 65-6120. (a) Notwithstanding any other provision 8 of law to the contrary, an emergency medical technician-intermediate may:

9 (1) Perform any of the activities identified by K.S.A. 65-6121, and 10 amendments thereto;

(2) when approved by medical protocols and where voice contact by 11 radio or telephone is monitored by a physician, physician assistant where 12 authorized by a physician, advanced *practice* registered nurse practitioner-13 where authorized by a physician or licensed professional nurse where 14 authorized by a physician, and direct communication is maintained, upon order 15 of such person, may perform veni-puncture for the purpose of blood sampling 16 collection and initiation and maintenance of intravenous infusion of saline 17 18 solutions, dextrose and water solutions or ringers lactate IV solutions, 19 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

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

26 (b) An individual who holds a valid certificate as an emergency medical technician-intermediate once completing the board prescribed transition 27 course, and validation of cognitive and psychomotor competency as 28 determined by rules and regulations of the board, upon application for 29 30 renewal, shall be deemed to hold a certificate as an advanced emergency 31 medical technician under this act, and such individual shall not be required to 32 file an original application for certification as an advanced emergency medical 33 technician under this act.

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

(d) Emergency medical technician-intermediates who fail to meet the
transition requirements as specified will be required, at a minimum, to gain the
continuing education applicable to emergency medical technician as defined
by rules and regulations of the board. Failure to do so will result in loss of
certification.

42 (e) Upon transition, notwithstanding any other provision of law to the 43 contrary, an advanced emergency medical technician may: 1 (1) Perform any of the activities identified by K.S.A. 65-6121, and 2 amendments thereto; and

3 (2) any of the following interventions, by use of the devices, medications 4 and equipment, or any combination thereof, after successfully completing an 5 approved course of instruction, local specialized device training and 6 competency validation and when authorized by medical protocols, upon order 7 when direct communication is maintained by radio, telephone or video 8 conference with a physician, physician assistant where authorized by a 9 physician, an advanced *practice* registered nurse practitioner where authorized by a physician, or licensed professional nurse where authorized by a physician 10 upon order of such a person: (A) Continuous positive airway pressure devices; 11 (B) advanced airway management; (C) referral of patient to of alternate 12 medical care site based on assessment; (D) transportation of a patient with a 13 capped arterial line; (E) veni-puncture for obtaining blood sample; (F) 14 initiation and maintenance of intravenous infusion or saline lock; (G) initiation 15 of intraosseous infusion; (H) nebulized therapy; (I) manual defibrillation and 16 17 cardioversion; (J) cardiac monitoring; (K) medication administration via: (i) 18 Aerosolization; (ii) nebulization; (iii) intravenous; (iv) intranasal; (v) rectal; (vi) subcutaneous; (vii) intraosseous; (viii) intramuscular; or (ix) sublingual. 19

(f) An individual who holds a valid certificate as both an emergency 20 medical technician-intermediate and as an emergency medical technician-21 22 defibrillator once completing the board prescribed transition course, and 23 validation of cognitive and psychomotor competency as determined by rules 24 and regulations of the board, upon application for renewal, shall be deemed to 25 hold a certificate as an advanced emergency medical technician under this act, and such individual shall not be required to file an original application for 26 27 certification as an advanced emergency medical technician under this act.

(g) "Renewal" as used in subsection (f), refers to the second opportunity
 that an emergency medical technician-intermediate and emergency medical
 technician-defibrillator has to apply for renewal of a certificate following the
 effective date of this act.

(h) Emergency medical technician-intermediate and emergency medical technician-defibrillator who fail to meet the transition requirements as specified will be required, at a minimum, to gain the continuing education applicable to emergency medical technician as defined by rules and regulations of the board. Failure to do so will result in loss of certification.

Sec. 24. **[On January 1, 2012,]** K.S.A. 2010 Supp. 65-6121 is hereby amended to read as follows: 65-6121. (a) Notwithstanding any other provision of law to the contrary, an emergency medical technician may perform any of the following activities:

- 41 (1) Patient assessment and vital signs;
- 42 (2) airway maintenance including the use of:
- 43 (A) Oropharyngeal and nasopharyngeal airways;

(B) esophageal obturator airways with or without gastric suction device; 1 2 (C) multi-lumen airway; and 3 oxygen demand valves. (D) 4 (3) Oxvgen therapy: 5 (4) oropharyngeal suctioning; 6 (5) cardiopulmonary resuscitation procedures; 7 control accessible bleeding; (6) 8 apply pneumatic anti-shock garment; (7)9 manage outpatient medical emergencies; (8) extricate patients and utilize lifting and moving techniques; 10 (9) (10)manage musculoskeletal and soft tissue injuries including dressing 11 12 and bandaging wounds or the splinting of fractures, dislocations, sprains or 13 strains; 14 (11)use of backboards to immobilize the spine; 15 (12)administer activated charcoal and glucose; monitor peripheral intravenous line delivering intravenous fluids 16 (13)17 during interfacility transport with the following restrictions: 18 The physician approves the transfer by an emergency medical (A) 19 technician. no medications or nutrients have been added to the intravenous fluids; 20 (B) 21 and 22 the emergency medical technician may monitor, maintain and shut off (C) the flow of intravenous fluid; 23 24 (14) use automated external defibrillators; 25 (15) administer epinephrine auto-injectors provided that: The emergency medical technician successfully completes a course 26 (A) of instruction approved by the board in the administration of epinephrine; and 27 28 the emergency medical technician serves with an ambulance service (B) 29 or a first response organization that provides emergency medical services; and 30 the emergency medical technician is acting pursuant to medical (C) 31 protocols; 32 perform, during nonemergency transportation, those activities (16)33 specified in this section when specifically authorized to perform such activities 34 by medical protocols; or when authorized by medical protocol, assist the patient in the 35 (17)administration of the following medications which have been prescribed for 36 37 that patient: Auto-injection epinephrine, sublingual nitroglycerin and inhalers for asthma and emphysema. 38 39 (b) An individual who holds a valid certificate as an emergency medical technician at the current basic level once completing the board prescribed 40 transition course, and validation of cognitive and psychomotor competency as 41 determined by rules and regulations of the board, upon application for 42 43 renewal, shall be deemed to hold a certificate as an emergency medical

technician under this act, and such individual shall not be required to file an
 original application for certification as an emergency medical technician under
 this act.

4 (c)"Renewal" as used in subsection (b), refers to the first opportunity that 5 an emergency medical technician has to apply for renewal of a certificate 6 following the effective date of this act.

7 (d) Emergency medical technicians who fail to meet the transition 8 requirements as specified will be required, at a minimum, to gain the 9 continuing education applicable to emergency medical responder as defined by 10 rules and regulations of the board. Failure to do so will result in loss of 11 certification.

(e) Upon transition, notwithstanding any other provision of law to the 12 contrary, an emergency medical technician may perform any activities 13 identified in K.S.A. 65-6144, and amendments thereto, and any of the 14 following interventions, by use of the devices, medications and equipment, or 15 any combination thereof, after successfully completing an approved course of 16 instruction, local specialized device training and competency validation and 17 18 when authorized by medical protocols, upon order when direct communication 19 is maintained by radio, telephone or video conference is monitored by a physician, physician assistant when authorized by a physician, an advanced 20 practice registered nurse practitioner when authorized by a physician or a 21 licensed professional nurse when authorized by a physician, upon order of 22 23 such person:

- 24 (1) Airway maintenance including use of:
- 25 (A) Single lumen airways as approved by the board;
- 26 (B) multilumen airways;
- 27 (C) ventilator devices;
- 28 (D) forceps removal of airway obstruction;
- 29 (E) CO2 monitoring;
- 30 (F) airway suctioning;
- 31 (2) apply pneumatic anti-shock garment;
- 32 (3) assist with childbirth;
- 33 (4) monitoring urinary catheter;
- 34 (5) capillary blood sampling;
- 35 (6) cardiac monitoring;
- 36 (7) administration of patient assisted medications as approved by the37 board;

(8) administration of medications as approved by the board byappropriate routes; and

40 (9) monitor, maintain or discontinue flow of IV line if a physician 41 approves transfer by an emergency medical technician.

42 Sec. 25. **[On January 1, 2012,]** K.S.A. 2010 Supp. 65-6123 is hereby 43 amended to read as follows: 65-6123. (a) Notwithstanding any other provision 1 of law to the contrary, an emergency medical technician-defibrillator may:

2 (1) Perform any of the activities identified in K.S.A. 65-6121, and 3 amendments thereto;

4 (2) when approved by medical protocols and where voice contact by 5 radio or telephone is monitored by a physician, physician assistant where 6 authorized by a physician, advanced *practice* registered nurse <del>practitioner</del> 7 where authorized by a physician, or licensed professional nurse where 8 authorized by a physician, and direct communication is maintained, upon order 9 of such person, may perform electrocardiographic monitoring and 10 defibrillation;

(3) perform, during an emergency, those activities specified in subsection
(b) before contacting the persons identified in subsection (b) 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.

17 (b) An individual who holds a valid certificate as an emergency medical 18 technician-defibrillator once completing the board prescribed transition course, 19 and validation of cognitive and psychomotor competency as determined by rules and regulations of the board, upon application for renewal, shall be 20 deemed to hold a certificate as an advanced emergency medical technician 21 22 under this act, and such individual shall not be required to file an original application for certification as an advanced emergency medical technician 23 24 under this act.

(c) "Renewal" as used in subsection (b), refers to the second opportunity
 that an attendant has to apply for renewal of a certificate following the
 effective date of this act.

(d) EMT-D attendants who fail to meet the transition requirements as
specified will be required, at a minimum, to gain the continuing education
applicable to emergency medical technician as defined by rules and
regulations of the board. Failure to do so will result in loss of certification.

Sec. 26. **[On January 1, 2012,]** K.S.A. 2010 Supp. 65-6124 is hereby amended to read as follows: 65-6124. (a) No physician, physician assistant, advanced *practice* registered nurse <del>practitioner</del> 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 may result from gross negligence in giving such instructions.

(b) No attendant as defined by K.S.A. 65-6112, and amendments thereto,
who renders emergency care during an emergency pursuant to instructions
given by a physician, the responsible physician for a physician assistant,
advanced *practice* registered nurse practitioner or licensed professional nurse
shall be liable for civil damages as a result of implementing such instructions,

except such damages which may result from gross negligence or by willful or 1 wanton acts or omissions on the part of such attendant as defined by K.S.A. 2 3 65-6112, and amendments thereto.

4 (c) No person certified as an instructor-coordinator and no training officer 5 shall be liable for any civil damages which may result from such instructor-6 coordinator's or training officer's course of instruction, except such damages 7 which may result from gross negligence or by willful or wanton acts or 8 omissions on the part of the instructor-coordinator or training officer.

9 (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, 10 approval or monitoring, except such damages which may result from gross 11 negligence in such review, approval or monitoring. 12

Sec. 27. [On January 1, 2012,] K.S.A. 2010 Supp. 65-6129c is hereby 13 amended to read as follows: 65-6129c. (a) Application for a training officer's 14 certificate shall be made to the emergency medical services board upon forms 15 provided by the administrator. The board may grant a training officer's 16 17 certificate to an applicant who: (1) Is an emergency medical technician, 18 emergency medical technician-intermediate, emergency medical technician-19 defibrillator, mobile intensive care technician, advanced emergency medical technician, paramedic, physician, physician assistant, advanced *practice* 20 registered nurse practitioner or professional nurse; (2) successfully completes 21 an initial course of training approved by the board; (3) passes an examination 22 prescribed by the board; (4) is appointed by a provider of training approved by 23 24 the board; and (5) has paid a fee established by the board.

25 (b) A training officer's certificate shall expire on the expiration date of the 26 attendant's certificate if the training officer is an attendant or on the expiration date of the physician's, physician assistant's, advanced practice registered 27 nurse's practitioner's or professional nurse's license if the training officer is a 28 29 physician, physician assistant, advanced *practice* registered nurse practitioner 30 or professional nurse. A training officer's certificate may be renewed for the 31 same period as the attendant's certificate or the physician's, physician 32 assistant's, advanced *practice* registered *nurse's* nurse practitioner's or 33 professional nurse's license upon payment of a fee as prescribed by rules and 34 regulations and upon presentation of satisfactory proof that the training officer has successfully completed continuing education prescribed by the board and 35 is certified as an emergency medical technician, emergency medical 36 37 technician-intermediate, emergency medical technician-defibrillator, mobileintensive care technician, advanced emergency medical technician, paramedic, 38 physician, physician assistant, advanced *practice* registered nurse practitioner 39 or professional nurse. The board may prorate to the nearest whole month the 40 fee fixed under this subsection as necessary to implement the provisions of this 41 42 subsection

(c) A training officer's certificate may be denied, revoked, limited,

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modified or suspended by the board or the board may refuse to renew suchcertificate if such individual:

(1) Fails to maintain certification or licensure as an emergency medical
 technician, emergency medical technician-intermediate, emergency medical
 technician-defibrillator, mobile intensive care technician, advanced emergency
 medical technician, paramedic, physician, physician assistant, advanced
 *practice* registered nurse practitioner or professional nurse;

8 9 (2) fails to maintain support of appointment by a provider of training;

(3) fails to successfully complete continuing education;

10 (4) has made intentional misrepresentations in obtaining a certificate or 11 renewing a certificate;

(5) has demonstrated incompetence or engaged in unprofessional conductas defined by rules and regulations adopted by the board;

(6) has violated or aided and abetted in the violation of any provision ofthis act or the rules and regulations promulgated by the board; or

has been convicted of any state or federal crime that is related 16 (7)17 substantially to the qualifications, functions and duties of a training officer or 18 any crime punishable as a felony under any state or federal statute and the 19 board determines that such individual has not been sufficiently rehabilitated to warrant public trust. A conviction means a plea of guilty, a plea of nolo 20 contendere or a verdict of guilty. The board may take disciplinary action 21 22 pursuant to this section when the time for appeal has elapsed, or after the 23 judgment of conviction is affirmed on appeal or when an order granting 24 probation is made suspending the imposition of sentence.

(d) The board may revoke, limit, modify or suspend a certificate or the
 board may refuse to renew such certificate in accordance with the provisions
 of the Kansas administrative procedure act.

(e) If a person who previously was certified as a training officer applies
for a training officer's certificate within two years of the date of its expiration,
the board may grant a certificate without the person completing an initial
course of training or taking an examination if the person complies with the
other provisions of subsection (a) and completes continuing education
requirements.

Sec. 28. **[On January 1, 2012,]** K.S.A. 2010 Supp. 65-6135 is hereby amended to read as follows: 65-6135. (a) All ambulance services providing emergency care as defined by the rules and regulations adopted by the board shall offer service 24 hours per day every day of the year.

(b) Whenever an operator is required to have a permit, at least one person
on each vehicle providing emergency medical service shall be an attendant
certified as an emergency medical technician, emergency medical technicianintermediate, emergency medical technician-defibrillator, a mobile intensive
care technician, emergency medical technician-intermediate/defibrillator,
advanced emergency medical technician, a paramedic, a physician, a licensed

physician assistant, an a licensed advanced practice registered nurse 1 practitioner or a professional nurse. 2

Sec. 29. [On January 1, 2012,] K.S.A. 2010 Supp. 65-6144 is hereby 3 amended to read as follows: 65-6144. (a) A first responder may perform any of 4 5 the following activities:

6 (1) Initial scene management including, but not limited to, gaining access 7 to the individual in need of emergency care, extricating, lifting and moving the 8 individual; 9

(2) cardiopulmonary resuscitation and airway management;

control of bleeding; (3)

extremity splinting excluding traction splinting; 11 (4)

stabilization of the condition of the individual in need of emergency 12 (5) 13 care;

14 (6) oxygen therapy;

use of oropharyngeal airways; 15 (7)

use of bag valve masks; 16 (8)

use automated external defibrillators; and 17 (9)

18 (10) other techniques of preliminary care a first responder is trained to 19 provide as approved by the board.

An individual who holds a valid certificate as a first responder, once 20 (b) completing the board prescribed transition course, and validation of cognitive 21 and psychomotor competency as determined by rules and regulations of the 22 board, upon application for renewal, shall be deemed to hold a certificate as an 23 emergency medical responder under this act, and such individual shall not be 24 25 required to file an original application for certification as an emergency 26 medical responder under this act.

27 "Renewal" as used in subsection (b), refers to the first opportunity that (c) 28 an attendant has to apply for renewal of a certificate following the effective 29 date of this act.

30 (d) First responder attendants who fail to meet the transition requirements 31 as specified will forfeit their certification.

(e) Upon transition, notwithstanding any other provision of law to the 32 33 contrary, an emergency medical responder may perform any of the following interventions, by use of the devices, medications and equipment, or any 34 combination thereof, after successfully completing an approved course of 35 instruction, local specialized device training and competency validation and 36 37 when authorized by medical protocols, upon order when direct communication is maintained by radio, telephone or video conference is monitored by a 38 physician, physician assistant when authorized by a physician, an advanced 39 practice registered nurse practitioner when authorized by a physician or a 40 licensed professional nurse when authorized by a physician, upon order of 41 such person: (1) Emergency vehicle operations; (2) initial scene management; 42 43 (3) patient assessment and stabilization; (4) cardiopulmonary resuscitation and

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airway management; (5) control of bleeding; (6) extremity splinting; (7) spinal 1 immobilization; (8) oxygen therapy; (9) use of bag-valve-mask; (10) use of 2 automated external defibrillator; (11) nebulizer therapy; (12) intramuscular 3 4 injections with auto-injector; (13) administration of oral glucose; (14) 5 administration of aspirin; (15) recognize and comply with advanced directives; 6 (16) insertion and maintenance of oral and nasal pharyngeal airways; (17) use 7 of blood glucose monitoring; and (18) other techniques and devices of preliminary care an emergency medical responder is trained to provide as 8 9 approved by the board.

Sec. 30. [On January 1, 2012,] K.S.A. 2010 Supp. 72-5213 is hereby 10 amended to read as follows: 72-5213. (a) Every board of education shall 11 require all employees of the school district, who come in regular contact with 12 13 the pupils of the school district, to submit a certification of health on a form prescribed by the secretary of health and environment and signed by a person 14 licensed to practice medicine and surgery under the laws of any state, or by a 15 person who is licensed as a physician assistant under the laws of this state 16 17 when such person is working at the direction of or in collaboration with a 18 person licensed to practice medicine and surgery, or by a person holding a 19 license certificate of qualification to practice as an advanced practice registered nurse practitioner under the laws of this state when such person is 20 working at the direction of or in collaboration with a person licensed to 21 22 practice medicine and surgery. The certification shall include a statement that 23 there is no evidence of physical condition that would conflict with the health, 24 safety, or welfare of the pupils; and that freedom from tuberculosis has been established by chest x-ray or negative tuberculin skin test. If at any time there 25 26 is reasonable cause to believe that any such employee of the school district is 27 suffering from an illness detrimental to the health of the pupils, the school 28 board may require a new certification of health.

29 (b) Upon presentation of a signed statement by the employee of a school 30 district, to whom the provisions of subsection (a) apply, that the employee is 31 an adherent of a religious denomination whose religious teachings are opposed 32 to physical examinations, the employee shall be permitted to submit, as an 33 alternative to the certification of health required under subsection (a), 34 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 physician 35 assistant under the laws of this state when such person is working at the 36 37 direction of or in collaboration with a person licensed to practice medicine and surgery, or by a person holding a license certificate of qualification to practice 38 39 as an advanced *practice* registered nurse practitioner under the laws of this state when such person is working at the direction of or in collaboration with a 40 person licensed to practice medicine and surgery that freedom of the employee 41 42 from tuberculosis has been established

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(c) Every board of education may require persons, other than employees

of the school district, to submit to the same certification of health requirements 1 2 as are imposed upon employees of the school district under the provisions of 3 subsection (a) if such persons perform or provide services to or for a school 4 district which require such persons to come in regular contact with the pupils 5 of the school district. No such person shall be required to submit a certification 6 of health if the person presents a signed statement that the person is an 7 adherent of a religious denomination whose religious teachings are opposed to 8 physical examinations. Such persons shall be permitted to submit, as an 9 alternative to a certification of health, certification signed by a person licensed to practice medicine and surgery under the laws of any state, or by a person 10 who is licensed as a physician assistant under the laws of this state when such 11 person is working at the direction of or in collaboration with a person licensed 12 to practice medicine and surgery, or by a person holding a *license* eertificate of 13 qualification to practice as an advanced *practice* registered nurse practitioner 14 under the laws of this state when such person is working at the direction of or 15 in collaboration with a person licensed to practice medicine and surgery that 16 17 freedom of such persons from tuberculosis has been established.

(d) The expense of obtaining certifications of health and certifications offreedom from tuberculosis may be borne by the board of education.

20 Sec. 31. **[On January 1, 2012,]** K.S.A. 2010 Supp. 72-8252 is hereby 21 amended to read as follows: 72-8252. (a) As used in this section:

(1) "Medication" means a medicine prescribed by a health care provider
for the treatment of anaphylaxis or asthma including, but not limited to, any
medicine defined in section 201 of the federal food, drug and cosmetic act,
inhaled bronchodilators and auto-injectible epinephrine.

(2) "Health care provider" means: (A) A physician licensed to practice 26 27 medicine and surgery; (B) an advanced practice registered nurse practitioner issued a licenseeertificate of qualification pursuant to K.S.A. 65-1131, and 28 29 amendments thereto, who has authority to prescribe drugs as provided by 30 K.S.A. 65-1130, and amendments thereto; or (C) a physician assistant licensed 31 pursuant to the physician assistant licensure act who has authority to prescribe 32 drugs pursuant to a written protocol with a responsible physician under K.S.A. 33 65-28a08, and amendments thereto.

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(3) "School" means any public or accredited nonpublic school.

(4) "Self-administration" means a student's discretionary use of such
 student's medication pursuant to a prescription or written direction from a
 health care provider.

(b) Each school district shall adopt a policy authorizing the selfadministration of medication by students enrolled in kindergarten or any of
the grades 1 through 12. A student shall meet all requirements of a policy
adopted pursuant to this subsection. Such policy shall include:

42 (1) A requirement of a written statement from the student's health care 43 provider stating the name and purpose of the medication; the prescribed dosage; the time the medication is to be regularly administered, and any
 additional special circumstances under which the medication is to be
 administered; and the length of time for which the medication is prescribed;

4 (2) a requirement that the student has demonstrated to the health care 5 provider or such provider's designee and the school nurse or such nurse's 6 designee the skill level necessary to use the medication and any device that is 7 necessary to administer such medication as prescribed. If there is no school 8 nurse, the school shall designate a person for the purposes of this subsection;

9 (3) a requirement that the health care provider has prepared a written 10 treatment plan for managing asthma or anaphylaxis episodes of the student and 11 for medication use by the student during school hours;

(4) a requirement that the student's parent or guardian has completed and
submitted to the school any written documentation required by the school,
including the treatment plan prepared as required by paragraph (3) and
documents related to liability;

16 (5) a requirement that all teachers responsible for the student's 17 supervision shall be notified that permission to carry medications and self-18 medicate has been granted; and

(6) any other requirement imposed by the school district pursuant to this
section and subsection (e) of K.S.A. 72-8205, and amendments thereto.

(c) A school district shall require annual renewal of parental
 authorization for the self-administration of medication.

(d) A school district, and its officers, employees and agents, which
authorizes the self-administration of medication in compliance with the
provisions of this section shall not be held liable in any action for damage,
injury or death resulting directly or indirectly from the self-administration of
medication.

28 (e) A school district shall provide written notification to the parent or 29 guardian of a student that the school district and its officers, employees and 30 agents are not liable for damage, injury or death resulting directly or indirectly 31 from the self-administration of medication. The parent or guardian of the 32 student shall sign a statement acknowledging that the school district and its 33 officers, employees or agents incur no liability for damage, injury or death 34 resulting directly or indirectly from the self-administration of medication and agreeing to release, indemnify and hold the school and its officers, employees 35 and agents, harmless from and against any claims relating to the self-36 37 administration of such medication.

(f) A school district shall require that any back-up medication provided
by the student's parent or guardian be kept at the student's school in a location
to which the student has immediate access in the event of an asthma or
anaphylaxis emergency.

42 (g) A school district shall require that information described in 43 paragraphs (3) and (4) of subsection (b) be kept on file at the student's school in a location easily accessible in the event of an asthma or anaphylaxis
 emergency.

3 (h) An authorization granted pursuant to subsection (b) shall allow a 4 student to possess and use such student's medication at any place where a 5 student is subject to the jurisdiction or supervision of the school district or its 6 officers, employees or agents.

7 (i) A board of education may adopt a policy pursuant to subsection (e) of 8 K.S.A. 72-8205, and amendments thereto, which:

9 (1) Imposes requirements relating to the self-administration of medication 10 which are in addition to those required by this section; and

11 (2) establishes a procedure for, and the conditions under which, the 12 authorization for the self-administration of medication may be revoked.

Sec. 32. **[On January 1, 2012,]** K.S.A. 2010 Supp. 74-1106 is hereby amended to read as follows: 74-1106. (a) *Appointment, term of office.* (1) The governor shall appoint a board consisting of 11 members of which six shall be registered professional nurses, two shall be licensed practical nurses and three shall be members of the general public, which shall constitute a board of nursing, with the duties, power and authority set forth in this act.

19 (2) Upon the expiration of the term of any registered professional nurse, 20 the Kansas state nurses association shall submit to the governor a list of 21 registered professional nurses containing names of not less than three times the 22 number of persons to be appointed, and appointments shall be made after 23 consideration of such list for terms of four years and until a successor is 24 appointed and qualified.

25 (3) On the effective date of this act, the Kansas federation of licensed 26 practical nurses shall submit to the governor a list of licensed practical nurses 27 containing names of not less than three times the number of persons to be 28 appointed, and appointments shall be made after consideration of such list-29 with the first appointment being for a term of four years and the second-30 appointment being for a term of two years. Upon the expiration of the term of 31 any licensed practical nurse, a successor of like qualifications shall be-32 appointed in the same manner as the original appointment for a term of four 33 years and until a successor is appointed and qualified.

34 (4) Each member of the general public shall be appointed for a term of35 four years and successors shall be appointed for a like term.

(5) Whenever a vacancy occurs on the board of nursing, it shall be filled 36 37 by appointment for the remainder of the unexpired term in the same manner as the preceding appointment. No person shall serve more than two consecutive 38 39 terms as a member of the board of nursing and appointment for the remainder 40 of an unexpired term shall constitute a full term of service on such board. With the expiration of terms for the registered professional nurse from education-41 and one public member in July, 2003, the next appointments for those two-42 43 positions will be for only one year. Thereafter the two positions shall be-

1 appointed for terms of four years.

Qualifications of members. Each member of the board shall be a 2 (b) 3 citizen of the United States and a resident of the state of Kansas. Registered 4 professional nurse members shall possess a license to practice as a 5 professional nurse in this state with at least five years' experience in nursing as 6 such and shall be actively engaged in professional nursing in Kansas at the 7 time of appointment and reappointment. The licensed practical nurse members 8 shall be licensed to practice practical nursing in the state with at least five 9 years' experience in practical nursing and shall be actively engaged in practical nursing in Kansas at the time of appointment and reappointment. The governor 10 shall appoint successors so that the registered professional nurse membership 11 of the board shall consist of at least two members who are engaged in nursing 12 13 service, at least two members who are engaged in nursing education and at least one member who is engaged in practice as an advanced practice 14 registered nurse practitioner or a registered nurse anesthetist. The consumer 15 16 members shall represent the interests of the general public. At least one 17 consumer member shall not have been involved in providing health care. Each 18 member of the board shall take and subscribe the oath prescribed by law for 19 state officers, which oath shall be filed with the secretary of state.

20 (c) Duties and powers. (1) The board shall meet annually at Topeka during the month of September and shall elect from its members a president, 21 22 vice-president and secretary, each of whom shall hold their respective offices for one year. The board shall employ an executive administrator, who shall be 23 a registered professional nurse, who shall not be a member of the board and 24 25 who shall be in the unclassified service under the Kansas civil service act, and shall employ such other employees, who shall be in the classified service 26 27 under the Kansas civil service act as necessary to carry on the work of the board. As necessary, the board shall be represented by an attorney appointed 28 29 by the attorney general as provided by law, whose compensation shall be 30 determined and paid by the board with the approval of the governor. The board 31 may hold such other meetings during the year as may be deemed necessary to 32 transact its business.

33 (2) The board shall adopt rules and regulations consistent with this act 34 necessary to carry into effect the provisions thereof, and such rules and 35 regulations may be published and copies thereof furnished to any person upon 36 application.

37 (3) The board shall prescribe curricula and standards for professional and 38 practical nursing programs and mental health technician programs, and 39 provide for surveys of such schools and courses at such times as it may deem 40 necessary. It shall accredit such schools and approve courses as meet the 41 requirements of the appropriate act and rules and regulations of the board.

42 (4) The board shall examine, license and renew licenses of duly qualified 43 applicants and conduct hearings upon charges for limitation, suspension or

revocation of a license or approval of professional and practical nursing and 1 mental health technician programs and may limit, deny, suspend or revoke for 2 3 proper legal cause, licenses or approval of professional and practical nursing 4 and mental health technician programs, as hereinafter provided. Examination 5 for applicants for registration shall be given at least twice each year and as 6 many other times as deemed necessary by the board. The board shall promote 7 improved means of nursing education and standards of nursing care through 8 institutes, conferences and other means.

9 (5) The board shall have a seal of which the executive administrator shall 10 be the custodian. The president and the secretary shall have the power and 11 authority to administer oaths in transacting business of the board, and the 12 secretary shall keep a record of all proceedings of the board and a register of 13 professional and practical nurses and mental health technicians licensed and 14 showing the certificates of registration or licenses granted or revoked, which 15 register shall be open at all times to public inspection.

16 (6) The board may enter into contracts as may be necessary to carry out17 its duties.

18 (7) The board is hereby authorized to apply for and to accept grants and 19 may accept donations, bequests or gifts. The board shall remit all moneys 20 received by it under this paragraph (7) to the state treasurer in accordance with the provisions of K.S.A. 75-4215, and amendments thereto. Upon receipt of 21 22 each such remittance, the state treasurer shall deposit the entire amount in the 23 state treasury to the credit of the grants and gifts fund which is hereby created. All expenditures from such fund shall be made in accordance with 24 25 appropriation acts upon warrants of the director of accounts and reports issued 26 pursuant to vouchers approved by the president of the board or a person 27 designated by the president.

(8) A majority of the board of nursing including two professional nursemembers shall constitute a quorum for the transaction of business.

30 Subpoenas. In all investigations and proceedings, the board shall have (d) 31 the power to issue subpoenas and compel the attendance of witnesses and the 32 production of all relevant and necessary papers, books, records, documentary 33 evidence and materials. Any person failing or refusing to appear or testify 34 regarding any matter about which such person may be lawfully questioned or to produce any books, papers, records, documentary evidence or relevant 35 materials in the matter, after having been required by order of the board or by a 36 37 subpoena of the board to do so, upon application by the board to any district judge in the state, may be ordered by such judge to comply therewith. Upon 38 failure to comply with the order of the district judge, the court may compel 39 obedience by attachment for contempt as in the case of disobedience of a 40 similar order or subpoena issued by the court. A subpoena may be served upon 41 any person named therein anywhere within the state with the same fees and 42 43 mileage by an officer authorized to serve subpoenas in civil actions in the

same procedure as is prescribed by the code of civil procedure for subpoenas
 issued out of the district courts of this state.

3 (e) Compensation and expenses. Members of the board of nursing 4 attending meetings of such board, or attending a subcommittee meeting thereof authorized by such board, shall be paid compensation, subsistence 5 6 allowances, mileage and other expenses as provided in K.S.A. 75-3223, and 7 amendments thereto. No member of the board of nursing shall be paid an amount as provided in K.S.A. 75-3223, and amendments thereto, if such 8 9 member receives an amount from another governmental or private entity for the purpose for which such amount is payable under K.S.A. 75-3223, and 10 amendments thereto. 11

Sec. 33. **[On January 1, 2012,]** K.S.A. 74-32,131 is hereby amended to read as follows: 74-32,131. This act shall be known and may be cited as the advanced *practice* registered nurse <del>practitioner</del> service scholarship program.

15 Sec. 34. **[On January 1, 2012,]** K.S.A. 74-32,132 is hereby amended to 16 read as follows: 74-32,132. As used in this act:

(a) "Committee" means the nursing service scholarship review committee
 established under K.S.A. 74-3299, and amendments thereto.

(b) "Executive officer" means the chief executive officer of the stateboard of regents appointed under K.S.A. 74-3203a, and amendments thereto.

(c) "Educational and training program for advanced *practice* registered
 *nurses* nurse practitioners" means a post-basic nursing education program a
 graduate of which meets the education requirements of the board of nursing
 for *licensure* a certificate of qualification as an advanced *practice* registered
 nurse. practitioner.

(d) "Medically underserved area" means a practice location designated
 medically underserved by the secretary of health and environment.

(e) "Rural area" means any county of this state other than Douglas,Johnson, Sedgwick, Shawnee and Wyandotte counties.

30 Sec. 35. [On January 1, 2012,] K.S.A. 74-32,133 is hereby amended to 31 read as follows: 74-32,133. (a) There is hereby established the advanced practice registered nurse practitioner service scholarship program. Within the 32 33 limits of appropriations therefor, a scholarship may be awarded under the program to any qualified student enrolled in or admitted to an educational and 34 training program for advanced practice registered nurses. nurse practitioners. 35 The number of scholarships awarded under the program in any year shall not 36 37 exceed 12

(b) The determination of the individuals qualified for scholarships shall be made by the executive officer after seeking advice from the committee. Scholarships shall be awarded on a priority basis to qualified applicants in the advanced *practice* registered nurse *practitioner roles* eategories of nurse clinician or *advanced practice registered* nurse *practitioner* or clinical specialist who have the greatest financial need for such scholarships and who are residents of this state. To the extent practicable and consistent with the
 other provisions of this section, consideration shall be given to minority
 applicants.

4 (c) Scholarships awarded under the program shall be awarded for the 5 length of the course of instruction required for graduation as an advanced 6 practice registered nurse practitioner unless terminated before expiration of 7 such period of time. Such scholarships shall provide (1) to a student enrolled in or admitted to an educational and training program for advanced *practice* 8 9 registered *nurses* <del>nurse</del> <del>practitioners</del> operated by a state educational institution the payment of an amount not to exceed 70% of the cost of attendance for a 10 year, and (2) to a student enrolled in or admitted to an educational and training 11 program for advanced *practice* registered *nurses* nurse practitioners operated 12 by an independent institution of higher education the payment of an amount 13 not to exceed 70% of the average amount of the cost of attendance for a year 14 in educational and training programs for advanced *practice* registered *nurses* 15 nurse practitioners operated by the state educational institutions. The amount 16 17 of each scholarship shall be established annually by the executive officer and 18 shall be financed by the state of Kansas.

- Sec. 36. **[January 1, 2012,]** K.S.A. 74-32,134 is hereby amended to read as follows: 74-32,134. (a) An applicant for a scholarship under the advanced *practice* registered nurse practitioner service scholarship program shall provide to the executive officer, on forms supplied by the executive officer, the following information:
- 24

(1) The name and address of the applicant;

(2) the name and address of the educational and training program for
 advanced *practice* registered *nurses* nurse practitioners in which the applicant
 is enrolled or to which the applicant has been admitted; and

(3) any additional information which may be required by the executiveofficer.

(b) As a condition to awarding a scholarship under this act, the executive
officer and the applicant for a scholarship shall enter into an agreement which
shall require that the scholarship recipient:

(1) Engage as a full-time student in and complete the required course of
 instruction leading to the *licensure* eertificate of qualification as an advanced
 *practice* registered nurse practitioner;

within six months after graduation from the educational and training 36 (2)37 program for advanced practice registered nurses nurse practitioners, commence full-time practice as an advanced practice registered nurse 38 39 practitioner, or commence the equivalent to full-time practice, or commence part-time practice as an advanced *practice* registered nurse practitioner, in a 40 rural area or a medically underserved area, continue such practice for the total 41 amount of time required under the agreement, and comply with such other 42 43 terms and conditions as may be specified by the agreement;

(3) commence full-time practice, or the equivalent to full-time practice, 1 2 as an advanced *practice* registered nurse practitioner in a rural area or 3 medically underserved area and continue such full-time practice, or the 4 equivalent to full-time practice, in a rural area or medically underserved area 5 for the total amount of time required under the agreement, which shall be for a 6 period of not less than the length of the course of instruction for which the 7 scholarship assistance was provided, or commence part-time practice in a rural 8 area or medically underserved area and continue such part-time practice in a 9 rural area or medically underserved area for the total amount of time required under the agreement, which shall be for a period of time that is equivalent to 10 full time, as determined by the state board of regents, multiplied by the length 11 12 of the course of instruction for which the scholarship assistance was provided;

(4) maintain records and make reports to the executive officer as may be
 required by the executive officer to document the satisfaction of the obligation
 under this act; and

16 (5) upon failure to satisfy an agreement to engage in full-time practice as 17 an advanced *practice* registered nurse <del>practitioner</del>, or the equivalent to full-18 time practice, or in part-time practice, in a rural area or medically underserved 19 area for the required period of time under any such agreement, repay to the 20 state amounts as provided in K.S.A. 74-32,135, and amendments thereto.

[On January 1, 2012,] K.S.A. 74-32,135 is hereby amended to 21 Sec. 37. 22 read as follows: 74-32,135. (a) Except as provided in K.S.A. 74-32,136, and 23 amendments thereto, upon the failure of any person to satisfy the obligation 24 under any agreement entered into pursuant to this act, such person shall pay to the executive officer an amount equal to the total amount of money received 25 26 by such person pursuant to such agreement which is financed by the state of 27 Kansas plus accrued interest at a rate which is equivalent to the interest rate 28 applicable to loans made under the federal PLUS program at the time such 29 person first entered into an agreement plus five percentage points. Installment 30 payments of such amounts may be made in accordance with rules and 31 regulations of the state board of regents, except that such installment payments 32 shall commence six months after the date of the action or circumstances that 33 cause the failure of the person to satisfy the obligations of such agreements, as 34 determined by the executive officer based upon the circumstances of each individual case. Amounts paid under this section to the executive officer shall 35 be deposited in the advanced *practice* registered nurse practitioner service 36 37 scholarship program fund in accordance with K.S.A. 74-32,138, and 38 amendments thereto.

(b) The state board of regents is authorized to turn any repayment account arising under the advanced *practice* registered nurse *practitioner* service scholarship program over to a designated loan servicer or collection agency, the state not being involved other than to receive payments from the loan servicer or collection agency at the interest rate prescribed under this section.

Sec. 38. [On January 1, 2012,] K.S.A. 74-32,136 is hereby amended to 1 read as follows: 74-32,136. (a) An obligation under any agreement entered into 2 3 under the advanced *practice* registered nurse practitioner service scholarship 4 program shall be postponed: (1) During any required period of active military service; (2) during any period of service in the peace corps; (3) during any 5 6 period of service as a part of volunteers in service to America (VISTA); (4) 7 during any period of service commitment to the United States public health 8 service; (5) during any period of religious missionary work conducted by an 9 organization exempt from tax under section 501(c)(3) of the federal internal revenue code as in effect on December 31, 2000; (6) during any period of time 10 the person obligated is unable because of temporary medical disability to 11 practice as an advanced *practice* registered nurse <del>practitioner</del>; (7) during any 12 period of time the person obligated is enrolled and actively engaged on a full-13 time basis in a course of study leading to a graduate degree in a field for which 14 such person was awarded a scholarship under this act which degree is higher 15 than that formerly attained; (8) during any period of time the person obligated 16 17 is on job-protected leave under the federal family and medical leave act of 18 1993; or (9) during any period of time the state board of regents determines 19 that the person obligated is unable because of special circumstances to practice as an advanced *practice* registered nurse <del>practitioner.</del> Except for clauses (6), 20 (8) and (9), an obligation under any agreement entered into as provided in the 21 22 advanced *practice* registered nurse practitioner service scholarship program 23 shall not be postponed more than five years from the time the obligation was 24 to have been commenced under any such agreement. An obligation under any agreement as provided in the advanced *practice* registered nurse practitioner 25 26 service scholarship program shall be postponed under clause (6) during the 27 period of time the medical disability exists. An obligation to engage in practice 28 as an advanced *practice* registered nurse practitioner in accordance with an 29 agreement under the advanced *practice* registered nurse practitioner service 30 scholarship program shall be postponed under clause (8) during the period of 31 time the person obligated remains on FMLA leave. An obligation to engage in 32 practice as an advanced *practice* registered nurse practitioner in accordance 33 with an agreement under the advanced practice registered nurse practitioner 34 service scholarship program shall be postponed under clause (9) during the period of time the state board of regents determines that the special 35 circumstances exist. The state board of regents shall adopt rules and 36 37 regulations prescribing criteria or guidelines for determination of the existence of special circumstances causing an inability to practice as an advanced 38 39 *practice* registered nurse practitioner, and shall determine the documentation required to prove the existence of such circumstances. 40

41 (b) An obligation under any agreement entered into in accordance with 42 the advanced *practice* registered nurse <del>practitioner</del> service scholarship 43 program shall be satisfied: (1) If the obligation has been completed in 1 accordance with the agreement; (2) if the person obligated dies; (3) if, because of permanent physical disability, the person obligated is unable to satisfy the obligation; (4) if the person obligated fails to satisfy the requirements for completion of the educational and training program after making the best effort possible to do so; or (5) if the person obligated is unable to obtain employment as an advanced *practice* registered nurse <del>practitioner</del> and continue in such employment after making the best effort possible to do so.

8 [On January 1, 2012,] K.S.A. 74-32,137 is hereby amended to Sec. 39. 9 read as follows: 74-32.137. The state board of regents, after consultation with the committee, may adopt rules and regulations establishing minimum terms, 10 conditions and obligations which shall be incorporated into the provisions of 11 any agreement under the advanced *practice* registered nurse practitioner-12 service scholarship program. The terms, conditions and obligations shall be 13 consistent with the provisions of law relating to the advanced practice 14 registered nurse practitioner service scholarship program. The terms, 15 conditions and obligations so established shall include, but not be limited to, 16 17 the terms of eligibility for financial assistance under the advanced practice 18 registered nurse practitioner service scholarship program, the amount of 19 financial assistance to be offered, the length of practice in a rural area or medically underserved area required as a condition to the receipt of such 20 financial assistance to be offered, the amount of money required to be repaid 21 22 because of failure to satisfy the obligations under an agreement and the method of repayment and such other additional provisions as may be 23 24 necessary to carry out the provisions of the advanced *practice* registered nurse 25 practitioner service scholarship program. The state board of regents, after 26 consultation with the committee, shall adopt rules and regulations establishing 27 criteria for evaluating the financial need of applicants for scholarships and may adopt such other rules and regulations as may be necessary to administer 28 29 the advanced *practice* registered nurse practitioner service scholarship 30 program.

31 [On January 1, 2012,] K.S.A. 74-32,138 is hereby amended to Sec. 40. 32 read as follows: 74-32,138. There is hereby created in the state treasury the 33 advanced practice registered nurse practitioner service scholarship program 34 fund. The executive officer shall remit all moneys received under this act to the state treasurer in accordance with the provisions of K.S.A. 75-4215, and 35 amendments thereto. Upon receipt of each such remittance the state treasurer 36 shall deposit the entire amount in the state treasury to the credit of the 37 advanced *practice* registered nurse practitioner service scholarship program 38 39 fund. All expenditures from the advanced *practice* registered nurse practitioner service scholarship program fund shall be for scholarships awarded under this 40 act and shall be made in accordance with appropriation acts upon warrants of 41 42 the director of accounts and reports issued pursuant to vouchers approved by 43 the executive officer or by a person designated by the executive officer.

[Sec. 41. K.S.A. 2010 Supp. 65-1117 is hereby amended to read as 1 follows: 65-1117. (a) All licenses issued under the provisions of this act, 2 3 whether initial or renewal, shall expire every two years. The expiration date shall be established by the rules and regulations of the board. The 4 board shall send a notice for renewal of license to every registered 5 6 professional nurse and licensed practical nurse at least 60 days prior to 7 the expiration date of such person's license. Every person so licensed who 8 desires to renew such license shall file with the board, on or before the 9 date of expiration of such license, a renewal application together with the prescribed biennial renewal fee. Every licensee who is no longer engaged 10 in the active practice of nursing may so state by affidavit and submit such 11 affidavit with the renewal application. An inactive license may be 12 requested along with payment of a fee which shall be fixed by rules and 13 regulations of the board. Except for the first renewal for a license that 14 expires within 30 months following licensure examination or for renewal 15 of a license that expires within the first nine months following licensure by 16 reinstatement or endorsement, every licensee with an active nursing 17 18 license shall submit with the renewal application evidence of satisfactory 19 completion of a program of continuing nursing education required by the board. The board by duly adopted rules and regulations shall establish 20 the requirements for such program of continuing nursing education. 21 Continuing nursing education means learning experiences intended to 22 build upon the educational and experiential bases of the registered 23 professional and licensed practical nurse for the enhancement of practice, 24 education, administration, research or theory development to the end of 25 improving the health of the public. Upon receipt of such application, 26 payment of fee, upon receipt of the evidence of satisfactory completion of 27 the required program of continuing nursing education and upon being 28 satisfied that the applicant meets the requirements set forth in K.S.A. 65-29 30 1115 or 65-1116 and amendments thereto in effect at the time of initial licensure of the applicant, the board shall verify the accuracy of the 31 32 application and grant a renewal license.

33 Any person who fails to secure a renewal license within the time (b) specified herein may secure a reinstatement of such lapsed license by 34 making verified application therefor on a form provided by the board, by 35 rules and regulations, and upon furnishing proof that the applicant is 36 competent and qualified to act as a registered professional nurse or 37 licensed practical nurse and by satisfying all of the requirements for 38 reinstatement including payment to the board of a reinstatement fee as 39 established by the board. A reinstatement application for licensure will be 40 held awaiting completion of such documentation as may be required, but 41 42 such application shall not be held for a period of time in excess of that 43 specified in rules and regulations.

(c) Any person whose license as a registered professional nurse has 1 2 lapsed for a period of more than five years beyond its expiration date and who 3 has been employed for at least four of the last five years in an allied health 4 profession which employment required substantially comparable patient care to that of care provided by a registered professional nurse may apply for 5 reinstatement as a registered professional nurse and shall not be required to 6 7 complete a refresher course as established by the board, but shall be reinstated as a registered professional nurse by the board upon application to 8 9 the board for reinstatement of such license on a form provided by the board, upon presentation to the board of an affidavit from such person detailing such 10 person's work history, upon determination by the board that the work history 11 with regard to patient care is substantially comparable to patient care 12 provided by a registered professional nurse, upon determination by the board 13 that such person is otherwise qualified to be licensed as a registered 14 professional nurse and upon paving to the board the reinstatement fee 15 16 established by the board.

(d) (1) Each licensee shall notify the board in writing of (A) a change
in name or address within 30 days of the change or (B) a conviction of any
felony or misdemeanor, that is specified in rules and regulations adopted
by the board, within 30 days from the date the conviction becomes final.

[(2) As used in this subsection, "conviction" means a final conviction 21 22 without regard to whether the sentence was suspended or probation granted after such conviction. Also, for the purposes of this subsection, a 23 forfeiture of bail, bond or collateral deposited to secure a defendant's 24 appearance in court, which forfeiture has not been vacated, shall be 25 equivalent to a conviction. Failure to so notify the board shall not 26 27 constitute a defense in an action relating to failure to renew a license, nor 28 shall it constitute a defense in any other proceeding.]]

29 [Sec. 42. K.S.A. 2010 Supp. 65-1117 is hereby repealed.]

30 Sec. 41-[43.] [On January 1, 2012,] K.S.A. 40-2250, 65-1113, 65-1114, 31 65-1118, 65-1120, 65-1122, 65-1130, 65-1131, 65-1133, 65-1154, 65-1163, 74-32,131, 74-32,132, 74-32,133, 74-32,134, 74-32,135, 74-32,136, 74-32,137 32 33 and 74-32,138 and K.S.A. 2010 Supp. 8-1,125, 39-7,119, 40-2,111, 65-468, 65-1132, 65-1626, 65-1626d, 65-2921, 65-4101, 65-5402, 65-6112, 65-6119, 34 65-6120, 65-6121, 65-6123, 65-6124, 65-6129c, 65-6135, 65-6144, 72-5213, 35 72-8252 and 74-1106 are hereby repealed. 36 37 Sec. 42-[44.] This act shall take effect and be in force from and after-

38 **January 1, 2012, and** its publication in the statute book [Kansas register].