## As Amended by Senate Committee

Session of 2011

## SENATE BILL No. 134

By Committee on Public Health and Welfare

2-7

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

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

Section 1. K.S.A. 65-1113 is hereby amended to read as follows: 65-1113. When used in this act and the act of which this section is amendatory:

- (a) "Board" means the board of nursing.
- (b) "Diagnosis" in the context of nursing practice means that identification of and discrimination between physical and psychosocial signs and symptoms essential to effective execution and management of the nursing regimen and shall be construed as distinct from a medical diagnosis.
- (c) "Treatment" means the selection and performance of those therapeutic measures essential to effective execution and management of the nursing regimen, and any prescribed medical regimen.
- (d) *Practice of nursing*. (1) The practice of professional nursing as performed by a registered professional nurse for compensation or gratuitously, except as permitted by K.S.A. 65-1124, and amendments thereto, means the process in which substantial specialized knowledge derived from the biological, physical, and behavioral sciences is applied to: the care, diagnosis, treatment, counsel and health teaching of persons who are experiencing changes in the normal health processes or who require assistance in the maintenance of health or the

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

- (e) A "professional nurse" means a person who is licensed to practice professional nursing as defined in part (1) of subsection (d) of this section.
- (f) A "practical nurse" means a person who is licensed to practice practical nursing as defined in part (2) of subsection (d) of this section.
- (g) "Advanced *practice* registered nurse <del>practitioner</del>" or "ARNP" "APRN" means a professional nurse who holds a <del>certificate of qualification</del> license from the board to function as a professional nurse in an <del>expanded</del> advanced role, and this <del>expanded</del> advanced role shall be defined by rules and regulations adopted by the board in accordance with K.S.A. 65-1130, and amendments thereto.
- Sec. 2. K.S.A. 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;  $\frac{\partial}{\partial t}$
- (2) to use any title, abbreviation, letters, figures, sign, card or device to indicate that any person is a registered professional nurse; or
  - (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.
  - (b) It shall be unlawful for any person:
- (1) To practice or offer to practice as an advanced *practice* registered nurse <del>practitioner</del> 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

1	nurse practitioner, unless such person has been duly issued a license
2	certificate of qualification as an advanced practice registered nurse
3	practitioner under the Kansas nurse practice act.
4	Sec. 3. K.S.A. 65-1118 is hereby amended to read as follows: 65-
5	1118. (a) The board shall collect in advance fees provided for in this act
6	as fixed by the board, but not exceeding:
7	Application for license—professional nurse\$75
8	Application for license—practical nurse
9	Application for biennial renewal of license—professional nurse
10	and practical nurse
11	Application for reinstatement of license
12	Application for reinstatement of licenses with temporary permit
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14	Certified copy of license
15	Duplicate of license
16	Inactive license
17	Application for license eertificate of qualification—advanced
18	practice registered nurse practitioner
19	Application for <i>license</i> eertificate of qualification with temporary
20	permit—advanced practice registered nurse practitioner
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22	Application for renewal of license eertificate of qualification
23	advanced <i>practice</i> registered nurse <del>practitioner</del> 60
24	Application for reinstatement of license eertificate of qualification
25	—advanced <i>practice</i> registered nurse <del>practitioner</del>
26	Application for authorization—registered nurse anesthetist75
27	Application for authorization with temporary authorization—
28	registered nurse anesthetist
29	Application for biennial renewal of authorization—registered nurse
30	anesthetist60
31	Application for reinstatement of authorization—registered nurse
32	anesthetist
33	Application for reinstatement of authorization with temporary
34	authorization—registered nurse anesthetist100
35	Verification of license to another state
36	Application for exempt license—professional and practical nurse
37	50
38	Application for biennial renewal of exempt license—professional
39	and practical nurse50

- (b) The board may require that fees paid for any examination under the Kansas nurse practice act be paid directly to the examination service by the person taking the examination.
- (c) The board shall accept for payment of fees under this section personal checks, certified checks, cashier's checks, money orders or credit cards. The board may designate other methods of payment, but shall not refuse payment in the form of a personal check. The board may impose additional fees and recover any costs incurred by reason of payments made by personal checks with insufficient funds and payments made by credit cards.
- Sec. 4. K.S.A. 65-1120 is hereby amended to read as follows: 65-1120. (a) *Grounds for disciplinary actions*. The board may deny, revoke, limit or suspend any license; eertificate of qualification or authorization to practice nursing as a registered professional nurse, as a 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 under this act or may publicly or privately censure a licensee or holder of a eertificate of qualification temporary permit or authorization, if the applicant, licensee or holder of a temporary permit eertificate of qualification or authorization is found after hearing:
- (1) To be guilty of fraud or deceit in practicing nursing or in procuring or attempting to procure a license to practice nursing;
- (2) to have been guilty of a felony or to have been guilty of a misdemeanor involving an illegal drug offense unless the applicant or licensee establishes sufficient rehabilitation to warrant the public trust, except that notwithstanding K.S.A. 74-120, and amendments thereto, no license; eertificate of qualification or authorization to practice nursing as a licensed professional nurse, as a licensed practical nurse, as an advanced practice registered nurse practitioner or registered nurse anesthetist shall be granted to a person with a felony conviction for a crime against persons as specified in article 34 of chapter 21 of the Kansas Statutes Annotated—and acts amendatory thereof or supplemental thereto, prior to its repeal, or sections 36 through 64, 174, 210 or 211 of chapter 136 of the 2010 Session Laws of Kansas, and amendments thereto:

- (3) to have committed an act of professional incompetency as defined in subsection (e);
- (4) to be unable to practice with skill and safety due to current abuse of drugs 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:
- (6) to be guilty of unprofessional conduct as defined by rules and 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;
- (8) to have a license to practice nursing as a registered nurse or as a practical nurse denied, revoked, limited or suspended, or to be publicly or privately censured, by a licensing authority of another state, agency of the 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 authority of another state, agency of the United States government, territory of the United States or country. A certified copy of the record or order of public or private censure, denial, suspension, limitation, revocation or other 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
- (9) to have assisted suicide in violation of K.S.A. 21-3406 K.S.A. 21-3406, prior to its repeal, or section 42 of chapter 136 of the 2010 Session Laws of Kansas, and amendments thereto, as established by any of the following:
- (A) A copy of the record of criminal conviction or plea of guilty for a felony in violation of K.S.A. 21-3406 K.S.A. 21-3406, prior to its repeal, or section 42 of chapter 136 of the 2010 Session Laws of Kansas, and amendments thereto.
- (B) A copy of the record of a judgment of contempt of court for violating an injunction issued under K.S.A. <del>2002 Supp.</del> 60-4404, and amendments thereto.
- (C) A copy of the record of a judgment assessing damages under

- K.S.A. 2002 Supp. 60-4405, and amendments thereto.
- (b) *Proceedings*. Upon filing of a sworn complaint with the board charging a person with having been guilty of any of the unlawful practices 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 employees of the board to conduct an investigation. After investigation, the 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 the charges, the board shall fix a time and place for proceedings, which shall be conducted in accordance with the provisions of the Kansas administrative procedure act.
- (c) Witnesses. No person shall be excused from testifying in any proceedings before the board under this act or in any civil proceedings under this act before a court of competent jurisdiction on the ground that such testimony may incriminate the person testifying, but such testimony shall not be used against the person for the prosecution of any crime under the laws of this state except the crime of perjury as defined in K.S.A. 21-3805 K.S.A. 21-3805, prior to its repeal, or section 128 of chapter 136 of the 2010 Session Laws of Kansas, and amendments thereto.
- (d) Costs. If final agency action of the board in a proceeding under this section is adverse to the applicant or licensee, the costs of the board's 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 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 accrued by the board, when it is the successful party, and which the attorney general certifies cannot be collected from the applicant or licensee shall be paid from the board of nursing fee fund. All moneys collected following board proceedings shall be credited in full to the board of nursing fee fund.
- (e) Professional incompetency defined. As used in this section, "professional incompetency" means:
- (1) One or more instances involving failure to adhere to the applicable standard of 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 care to a degree which constitutes ordinary negligence, as determined by the board; or

- (3) a pattern of practice or other behavior which demonstrates a manifest incapacity or incompetence to practice nursing.
- (f) Criminal justice information. The board upon request shall receive from the Kansas bureau of investigation such criminal history record information relating to arrests and criminal convictions as necessary for the purpose of determining initial and continuing qualifications of licensees of and applicants for licensure by the board.
- Sec. 5. K.S.A. 65-1122 is hereby amended to read as follows: 65-1122. It is a violation of law for any person, firm, corporation or association to:
- (a) Sell or fraudulently obtain or furnish any nursing diploma, license; *or* record <del>or certificate of qualification</del> or aid or abet therein;
- (b) practice professional nursing, practical nursing or practice as an advanced *practice* registered nurse <del>practitioner</del>, 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 certified so</del> 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 <del>practitioner</del> during the time a license <del>or certificate</del> 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.

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. 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* eertificate of qualification as an advanced *practice* registered nurse practitioner in accordance with the provisions of this section.
- (b) The board shall establish standards and requirements for any professional nurse who desires to obtain *licensure* a certificate of qualification as an advanced *practice* registered nurse. practitioner. Such standards and requirements shall include, but not be limited to, standards and requirements relating to the education of advanced *practice* registered *nurses*. nurse practitioners. The board may require that some, but not all, types of advanced registered nurse practitioners hold an academic degree beyond the minimum educational requirement for qualifying for a license to practice as a professional nurse. The board may give such examinations and secure such 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* nurse practitioners 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* eertification for each eategory *role* of advanced *practice* registered nurse practitioner established by the board at a level adequate to assure the competent performance by advanced *practice* registered *nurses* nurse practitioners of functions and procedures which advanced *practice* registered *nurses* nurse practitioners are authorized to perform. Advanced practice registered nursing is based on knowledge and skills acquired in basic nursing education, licensure as a registered nurse and graduation from or completion of a masters or higher degree in one of the advanced practice registered nurse roles approved by the board of nursing.
- (3) Define the role of advanced *practice* registered *nurses* nurse practitioners and establish limitations and restrictions on such role. The board shall adopt a definition of the role under this subsection (c)(3) which is consistent with the education and qualifications required to

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obtain a license eertificate of qualification as an advanced practice 2 registered nurse practitioner, which protects the public from persons 3 performing functions and procedures as advanced practice registered nurses nurse practitioners for which they lack adequate education and qualifications and which authorizes advanced practice registered 5 6 nurses nurse practitioners to perform acts generally recognized by the 7 profession of nursing as capable of being performed, in a manner 8 consistent with the public health and safety, by persons with postbasic 9 education in nursing. In defining such role the board shall consider: (A) 10 The education required for a licensure eertificate of qualification as an 11 advanced practice registered nurse practitioner; (B) the type of nursing 12 practice and preparation in specialized advanced practice practitioner 13 skills involved in each role eategory of advanced practice registered 14 nurse practitioner established by the board; (C) the scope and 15 limitations of advanced practice of nursing specialties and limitations thereon prescribed by national advanced practice organizations which 16 eertify nursing specialties; and (D) acts recognized by the nursing 17 profession as appropriate to be performed by persons with postbasic 18 19 education in nursing.

(d) An advanced practice registered nurse practitioner may prescribe drugs pursuant to a written protocol as authorized by a responsible physician. Each written protocol shall contain a precise and detailed medical plan of care for each classification of disease or injury for which the advanced practice registered nurse practitioner is authorized to prescribe and shall specify all drugs which may be prescribed by the advanced practice registered nurse. practitioner. Any written prescription order shall include the name, address and telephone number of the responsible physician. The advanced practice registered nurse practitioner may not dispense drugs, but may request, receive and sign for professional samples and may distribute professional samples to patients pursuant to a written protocol as authorized by a responsible physician. In order to prescribe controlled substances, the advanced practice registered nurse practitioner shall (1) register with the federal drug enforcement administration; and (2) notify the board of the name and address of the responsible physician or physicians. In no case shall the scope of authority of the advanced practice registered nurse practitioner exceed the normal and customary practice of the responsible physician. An advanced practice registered nurse practitioner certified in the role eategory of registered nurse anesthetist

while functioning as a registered nurse anesthetist under K.S.A. 65-1151 to 65-1164, inclusive, and amendments thereto, shall be subject to the provisions of K.S.A. 65-1151 to 65-1164, inclusive, and 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 subsection, "responsible physician" means a person licensed to practice medicine and surgery in Kansas who has accepted responsibility for the protocol and the actions of the advanced practice registered nurse practitioner when prescribing drugs.

- (e) As used in this section, "drug" means those articles and substances defined as drugs in K.S.A. 65-1626 and 65-4101, and amendments thereto.
- (f) A person registered to practice as an advanced registered nurse practitioner in the state of Kansas immediately prior to the effective date of this act shall be deemed to be licensed to practice as an advanced practice registered nurse under this act and such person shall not be required to file an original application for licensure under this act. Any application for registration filed which has not been granted prior to the effective date of this act shall be processed as an application for licensure under this act.
- Sec. 7. K.S.A. 65-1131 is hereby amended to read 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 standards and requirements established by the board under K.S.A. 65-1130, and amendments thereto, the board may issue a *license* eertificate of qualification to such applicant authorizing the applicant to perform the duties of an advanced *practice* registered nurse practitioner as defined by the board under K.S.A. 65-1130, and amendments thereto.
- (2) The board may issue a *license* eertificate to practice nursing as an advanced *practice* registered nurse practitioner to an applicant who has been duly licensed or certified as an advanced *practice* registered nurse practitioner under the laws of another state or territory if, in the opinion of the board, the applicant meets the *licensure* qualifications required of an advanced *practice* registered nurse practitioner in this state. Verification of the applicant's licensure or certification status shall be required from the original state of licensure or certification.
- (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 *license* eertificate of qualification and for

reinstatement of a *license* eertificate of qualification shall be upon such form and contain such information as the board may require and shall be accompanied by a fee, to be established by rules and regulations adopted by the board, to assist in defraying the expenses in connection with the issuance of *licenses* eertificates of qualification as advanced *practice* registered *nurses* nurse practitioners, in an amount fixed by the board under K.S.A. 65-1118, and amendments thereto.

- (4) An application for initial *licensure* eertification 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* ertificate of qualification.
- (c) Exempt license. ertificate. The board may issue an exempt license eertifieate to any advanced practice registered nurse practitioner as defined in 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 K.S.A. 65-1118, and amendments thereto, and who is not regularly engaged in advanced practice registered nursing nurse practice in Kansas but volunteers advanced practice registered nursing services or is a charitable health care provider as defined by K.S.A. 75-6102, and amendments thereto. Each exempt advanced practice registered nurse practitioner shall be subject to all provisions of the nurse practice act. Each exempt license may be renewed biennially subject to the provisions of this section. To convert an exempt license eertificate to an active license eertificate, the exempt advanced practice registered nurse practitioner shall meet all the requirements of subsection (a) or K.S.A. 65-1132, and amendments thereto. The board shall have authority to write rules and regulations to carry out the provisions of this section.
- Sec. 8. K.S.A. 2010 Supp. 65-1132 is hereby amended to read as follows: 65-1132. (a)(1) All *licenses* eertificates of qualification issued under the provisions of this act, whether initial or renewal, shall expire every two years. The expiration date shall be established by rules and regulations of the board. The board shall send a notice for renewal of a

license eertificate of qualification to every advanced practice registered nurse practitioner at least 60 days prior to the expiration date of such person's license. Every person who desires to renew such license eertificate of qualification shall file with the board, on or before the date of expiration of such license eertificate of qualification. [: (1)] A renewal application together with the prescribed biennial renewal fee-And[; (2)] evidence of completion of continuing education in the advanced practice registered nurse role, which has met the continuing education requirement for an advanced practice registered nurse as developed by the board or by a national organization whose certifying standards are approved by the board as equal to or greater than the corresponding standards established by the board. These continuing education credits approved by the board may be applied to satisfy the continuing education requirements established by the board for licensed professional nurses under K.S.A. 65-1117, and amendments thereto, if the board finds such continuing education credits are equivalent to those required by the board under K.S.A. 65-1117, and amendments thereto; [and] 

- (2) be currently licensed [(3) evidence of current licensure] as a professional nurse; and[.]
- (3) Upon receipt of such application and payment of any applicable fee, and upon being satisfied that the applicant for renewal of a *license* eertificate of qualification meets the requirements established by the board under K.S.A. 65-1130, and amendments thereto, in effect at the time of initial qualification of the applicant, the board shall verify the accuracy of the application and grant a renewal *license* eertificate of qualification.
- (b) Any person who fails to secure a renewal *license* eertificate of qualification prior to the expiration of the *license* eertificate of qualification may secure a reinstatement of such lapsed *license* eertificate of qualification 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 advanced *practice* registered nurse practitioner and upon satisfying all of the requirements for reinstatement including payment to the board of a reinstatement fee as established by the board.
- Sec. 9. K.S.A. 65-1133 is hereby amended to read as follows: 65-1133. (a) An approved educational and training program for advanced *practice* registered *nurses* nurse practitioners is a program conducted in

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Kansas which has been approved by the board as meeting the standards and the rules and regulations of the board. An institution desiring to conduct an educational and training program for advanced practice registered nurses nurse practitioners shall apply to the board for approval and submit satisfactory proof that it is prepared to and will maintain the standards and the required curriculum for advanced practice registered nurses nurse practitioners as prescribed by this act and by the rules and regulations of the board. Applications shall be 9 made in writing on forms supplied by the board and shall be submitted 10 to the board together with the application fee fixed by the board. The approval of an educational program for advanced practice registered nurses nurse practitioners shall not exceed 10 years after the granting of such approval by the board. An institution desiring to continue to 14 conduct an approved educational program for advanced practice registered nurses nurse practitioners shall apply to the board for the renewal of approval and submit satisfactory proof that it will maintain 16 the standards and the required curriculum for advanced practice 17 18 registered nurses nurse practitioners as prescribed by this act and by the rules and regulations of the board. Applications for renewal of approval 20 shall be made in writing on forms supplied by the board. Each program shall submit annually to the board an annual fee fixed by the board's rules and regulations to maintain the approved status.

- (b) A program to qualify as an approved educational program for advanced practice registered nurses nurse practitioners 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.
- (c) The board shall prepare and maintain a list of programs which qualify as approved educational programs for advanced practice registered nurses nurse practitioners whose graduates, if they have the other necessary qualifications provided in this act, shall be eligible to apply for licensure eertificates of qualification as advanced practice registered nurses.nurse practitioners. A survey of the institution or school applying for approval of an educational program for advanced practice registered nurses nurse 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 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 program. The board shall resurvey approved programs on a periodic basis as determined by rules and regulations. If the board determines that any approved program is not maintaining the standards required by this act and by rules and regulations prescribed by the board, notice thereof in writing, specifying the failures of such program, shall be given. A program which fails to correct such conditions to the satisfaction of the board within a reasonable time shall be removed from the list of approved programs until such time as the program shall comply with such standards. All approved programs shall maintain accurate and current records showing in full the theoretical and practical 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 theretoregulation:
- (1) Advanced *practice* registered nurse <del>practitioner</del> 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 <del>practitioner</del> 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 <del>practitioner</del> program with national accreditation for a continuing period not to exceed 10 years.
- Sec. 10. K.S.A. 65-1154 is hereby amended to read as follows: 65-1154. Upon application to the board by any licensed professional nurse in this state and upon satisfaction of the standards and requirements established under this act and K.S.A. 65-1130, and amendments thereto, the board shall grant an authorization to the applicant to perform the duties of a registered nurse anesthetist and be licensed eertified as an advanced practice registered nurse. practitioner. An application to the board for an authorization, for an authorization with temporary authorization, for biennial renewal of authorization, for

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

- Sec. 11. K.S.A. 65-1163 is hereby amended to 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 practice medicine and surgery, a licensed dentist or a licensed podiatrist;
- (c) prohibit the practice of nurse anesthesia by students enrolled in approved courses of study in the administration of anesthesia or analgesic as a part of such course of study:
- (d) apply to the administration of a pudendal block by a person who holds a valid license eertificate of qualification as an advanced practice registered nurse practitioner in the role eategory of nursemidwife:
- (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. Sec. 12. K.S.A. 2010 Supp. 8-1,125 is hereby amended to read as 2 3 follows: 8-1,125. (a) Any Kansas resident who submits satisfactory proof to the director of vehicles, on a form provided by the director, 5 that such person is a person with a disability or is responsible for the 6 transportation of a person with a disability shall be issued a special 7 license plate or a permanent placard for any motor vehicle owned by such person or shall be issued a temporary placard. Satisfactory proof 8 9 of disability, condition or impairment shall include a statement from a 10 person licensed to practice the healing arts in any state, a licensed optometrist, an advanced practice registered nurse practitioner 11 12 registered licensed under K.S.A. 65-1131, and amendments thereto, a 13 licensed physician assistant or a Christian Science practitioner listed in 14 The Christian Science Journal certifying that such person is a person 15 with a disability. The placard shall be suspended immediately below the rear view mirror of any motor vehicle used for the transportation of a 16 17 person with a disability so as to be maximally visible from outside the 18 vehicle. In addition to the special license plate or permanent placard, 19 the director of vehicles shall issue to the person with a disability an 20 individual identification card which must be carried by the person with 21 a disability when the motor vehicle being operated by or used for the 22 transportation of such person is parked in accordance with the 23 provisions of K.S.A. 8-1,126, and amendments thereto. In addition to 24 the temporary placard, a person issued such temporary placard shall 25 carry the state or county receipt showing the name of the person who is 26 issued such temporary placard. A person submitting satisfactory proof 27 that such person's disability, condition or impairment is permanent in 28 nature, and upon such person's request and payment of the fees 29 prescribed in subsection (b), shall be issued a permanent placard or a 30 permanent placard and a special license plate and an individual 31 identification card. Upon proper request, one additional permanent 32 placard shall be issued to the applicant who has not requested and 33 received a special license plate. Upon proper request, one additional temporary placard shall be issued to the applicant certified as 34 35 temporarily disabled. Temporary placards shall have an expiration date 36 of not longer than six months from the date of issuance. The special 37 license plates and placards shall display the international symbol of 38 access to the physically disabled. 39

(b) Special license plates issued pursuant to this section shall be

issued for the same period of time as other license plates are issued or for the remainder of such period if an existing license plate is to be exchanged for the special license plate. There shall be no fee for such special license plates in addition to the regular registration fee. No person shall be issued more than one special license plate, except that agencies or businesses which provide transportation for persons with a disability as a service, may obtain additional 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 provisions of K.S.A. 8-132, and amendments thereto, including the payment of 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 years from the original date of issuance of such license plate and placard.
- (d) On and after July 1, 1992, the color of the permanent placard shall be white on a blue background and the temporary placard shall be white on a red background.
- (e) In addition to such other information contained on identification cards, cards issued or reissued on and after July 1, 2000, shall have the date of birth and the sex of the person to whom the card is issued.
- (f) Permanent placards and individual identification cards shall be 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 upon the expiration of the placard or upon the death of the person with a disability. Special license plates shall be returned to the county treasurer to be exchanged for another license plate upon the death of the person with a disability. The individual identification cards issued with the special license plates shall be returned to the department of revenue upon the death of the person with a disability.
- (g) Violation of subsection (f) is an unclassified misdemeanor punishable by a fine of not more than \$50.
- Sec. 13. 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 least seven 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.
- (c) The Kansas health policy authority may add two additional members so long as no class of professional representatives exceeds 51% of the membership.
- (d) The physician and pharmacist members shall have expertise in the 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.
- (f) The board shall elect a chairperson from among board members who shall serve a one-year term. The chairperson may serve consecutive terms.
- 38 (g) The board, in accordance with K.S.A. 75-4319, and 39 amendments thereto, may recess for a closed or executive meeting

when it is considering 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 medicaid drug utilization review board on or after the effective date of this act and in any case of a vacancy existing in the membership position of any member of the medicaid drug utilization review board on or after the effective 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 are appointed and the composition of the board is changed in accordance with the following and such appointment shall be made by the Kansas health policy 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 of a nursing facility, 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;

- (6) one member shall be a licensed physician who is actively engaged in the general practice of osteopathic medicine, who has practice experience with the state medicaid plan and who is nominated by the Kansas association of osteopathic medicine and who is appointed by the Kansas health policy authority from a list of two or more nominees;
- (7) one member shall be a licensed pharmacist who is actively engaged in retail pharmacy, who has practice experience with the state medicaid plan 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;
- (8) one member shall be a licensed pharmacist who is actively engaged in or who has experience in research pharmacy and who is nominated jointly by the Kansas task force for the pharmaceutical research and manufacturers association and the university of Kansas and appointed by the Kansas health policy authority from a list of two or more jointly nominated persons; and
- (9) one member shall be a licensed advanced *practice* registered nurse <del>practitioner</del> or physician assistant actively engaged in the practice of providing the health care and treatment services such person is licensed to perform, who has practice experience with the state medicaid plan and who is nominated jointly by the Kansas state nurses' association and the Kansas academy of physician assistants and appointed by the Kansas health policy authority from a list of two or more jointly nominated persons.
- Sec. 14. K.S.A. 2010 Supp. 40-2,111 is hereby amended to read as follows: 40-2,111. As used in K.S.A. 40-2,111 through 40-2,113, and amendments thereto: (a) "Adverse underwriting decision" means: Any of the following actions with respect to insurance transactions involving insurance coverage which is individually underwritten:
  - (1) A declination of insurance coverage;
  - (2) a termination of insurance coverage;
- (3) an offer to insure at higher than standard rates, with respect to life, health or disability insurance coverage; or
- (4) the charging of a higher rate on the basis of information which differs from that which the applicant or policyholder furnished, with

 respect to property or casualty insurance coverage.

- (b) "Declination of insurance coverage" means a denial, in whole or in part, by an insurance company or agent of requested insurance coverage.
- (c) "Health care institution" means any medical care facility, adult care home, drug abuse and alcoholic treatment facility, home-health agency certified for federal reimbursement, mental health center or mental health 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.
- (d) "Health care provider" means any person licensed to practice any branch of the healing arts, licensed dentist, licensed professional nurse, licensed practical nurse, licensed advanced practice registered nurse practitioner, licensed optometrist, licensed physical therapist, licensed social worker, licensed physician assistant, licensed podiatrist or licensed psychologist.
- (e) "Institutional source" means any natural person, corporation, association, partnership or governmental or other legal entity that provides information about an individual to an agent or insurance company, other than:
  - (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 or professional 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.
- (g) "Medical-record information" means personal information which:
- (1) Relates to an individual's physical or mental condition, medical 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:

- (1) The failure to pay a premium as required by the policy; or
- (2) at the request or direction of the insured.
- Sec. 15. K.S.A. 40-2250 is hereby amended to read as follows: 40-2250. (a) Notwithstanding any provision of an individual or group policy or contract for health and accident insurance delivered within the state, whenever such policy or contract shall provide for reimbursement for 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 any other person covered by the policy or contract, shall be allowed and entitled to reimbursement for such service irrespective of whether it was provided or performed by a duly licensed physician or an a licensed advanced practice registered nurse. practitioner.
- (b) Notwithstanding the provisions of subsection (a), reimbursement shall be mandated with respect to services performed by an advanced registered nurse practitioner in Douglas, Johnson, Leavenworth, Sedgwick, Shawnee or Wyandotte counties.
  - (e) The provisions of subsection (b) shall expire on July 1, 1998.
- Sec. 16. K.S.A. 2010 Supp. 65-468 is hereby amended to read as follows: 65-468. As used in K.S.A. 65-468 to 65-474, inclusive, and amendments thereto:
- (a) "Health care provider" means any person licensed or otherwise authorized by law to provide health care services in this state or a professional corporation organized pursuant to the professional corporation law of Kansas by persons who are authorized by law to form such corporation and who are health care providers as defined by this subsection, or an officer, employee or agent thereof, acting in the course and scope of employment or agency.
- (b) "Member" means any hospital, emergency medical service, local health department, home health agency, adult care home, medical clinic, mental health center or clinic or nonemergency transportation system.
- (c) "Mid-level practitioner" means a physician assistant or advanced *practice* registered nurse <del>practitioner</del> who has entered into a written protocol with a rural health network physician.
- 36 (d) "Physician" means a person licensed to practice medicine and 37 surgery.
- 38 (e) "Rural health network" means an alliance of members 39 including at least one critical access hospital and at least one other

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hospital which has developed a comprehensive plan submitted to and approved by the secretary of health and environment regarding patient referral and transfer; the provision of emergency and nonemergency transportation among members; the development of a network-wide emergency services plan; and the development of a plan for sharing patient information and services between hospital members concerning medical staff credentialing, risk management, quality assurance and peer review.

- "Critical access hospital" means a member of a rural health network which makes available twenty-four hour emergency care services; provides not more than 25 acute care inpatient beds or in the case of a facility with an approved swing-bed agreement a combined total of extended care and acute care beds that does not exceed 25 beds; provides acute inpatient care for a period that does not exceed, on an annual average basis, 96 hours per patient; and provides nursing services under the direction of a licensed professional 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 provide services for patients unless an exemption is granted by the licensing agency pursuant to rules and regulations. The critical access hospital may provide any services otherwise required to be provided by a full-time, on-site dietician, pharmacist, laboratory technician, medical technologist and radiological technologist on a part-time, off-site basis under written agreements or arrangements with one or more providers or suppliers recognized under medicare. The critical access hospital may provide inpatient services by a physician assistant, advanced practice registered nurse practitioner or a clinical nurse specialist subject to the oversight of a physician 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.
- (g) "Hospital" means a hospital other than a critical access hospital which has entered into a written agreement with at least one critical access hospital to form a rural health network and to provide medical or administrative supporting services within the limit of the hospital's capabilities.
- Sec. 17. K.S.A. 2010 Supp. 65-1626 is hereby 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;
  - (2) the patient or research subject at the direction and in the presence of the practitioner; or
- (3) a pharmacist as authorized in K.S.A. 65-1635a, and amendments 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.
- (c) "Authorized distributor of record" means a wholesale distributor with whom a manufacturer has established an ongoing relationship to distribute the manufacturer's prescription drug. An ongoing relationship is deemed to exist between such wholesale distributor and a manufacturer when the wholesale distributor, including any affiliated group of the wholesale distributor, as defined in section 1504 of the internal revenue code, complies with any one of the following: (1) The wholesale distributor has a written agreement currently in effect with the manufacturer evidencing such ongoing relationship; and (2) the wholesale distributor is listed on the manufacturer's current list of authorized distributors of record, which is updated by the manufacturer on no less than a monthly basis.
- (d) "Board" means the state board of pharmacy created by K.S.A. 74-1603, 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 drug product by its manufacturer, labeler or distributor.
- (g) "Chain pharmacy warehouse" means a permanent physical location for drugs or devices, or both, that *acts* aet 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.

- (h) "Co-licensee" means a pharmaceutical manufacturer that has entered into an agreement with another pharmaceutical manufacturer to engage in a business activity or occupation related to the manufacture or distribution of a prescription drug and the national drug code on the drug product label shall be 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.
- (l) "Dispenser" means a practitioner or pharmacist who dispenses prescription medication.
- (m) "Distribute" means to deliver, other than by administering or dispensing, any drug.
  - (n) "Distributor" means a person who distributes a drug.
- (a) "Drop shipment" means the sale, by a manufacturer, that manufacturer's co-licensee, that manufacturer's third party logistics provider, or that manufacturer's exclusive distributor, of the manufacturer's prescription drug, to a wholesale distributor whereby the wholesale distributor takes title but not possession of such prescription drug and the wholesale distributor invoices the pharmacy, the chain pharmacy warehouse, or other designated person authorized by law to dispense or administer such prescription drug, and the pharmacy, the chain pharmacy warehouse, or other designated person authorized by law to dispense or administer such prescription drug receives delivery of the prescription drug directly from the manufacturer, that manufacturer's co-licensee, that manufacturer's third party logistics provider, or that manufacturer's exclusive distributor, of such prescription drug. Drop shipment shall be part of the "normal distribution channel.":

- (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) articles intended for use as a component of any articles specified in clause (1), (2) or (3) of this subsection; but does not include devices or their components, parts or accessories, except that the term "drug" shall not include amygdalin (laetrile) or any livestock remedy, if such livestock remedy had been registered in accordance with the provisions of article 5 of chapter 47 of the Kansas Statutes Annotated prior to its repeal.
- (q) "Durable medical equipment" means technologically sophisticated medical devices that may be used in a residence, including the following: (1) Oxygen and oxygen delivery system; (2) ventilators; (3) respiratory disease management devices; (4) continuous positive airway pressure (CPAP) devices; (5) electronic and computerized wheelchairs and seating systems; (6) apnea monitors; (7) transcutaneous electrical nerve stimulator (TENS) units; (8) low air loss cutaneous pressure management devices; (9) sequential compression devices; (10) feeding pumps; (11) home phototherapy devices; (12) infusion delivery devices; (13) distribution of medical gases to end users for human consumption; (14) hospital beds; (15) nebulizers; (16) other similar equipment determined by the board in rules and regulations adopted by the board.
- (r) "Exclusive distributor" means any entity that: (1) Contracts with a manufacturer to provide or coordinate warehousing, wholesale distribution or other services on behalf of a manufacturer and who takes title to that manufacturer's prescription drug, but who does not have general responsibility to direct the sale or disposition of the manufacturer's prescription drug; (2) is registered as a wholesale distributor under the pharmacy act of the state of Kansas; and (3) to be considered part of the normal distribution channel, must be an authorized distributor of record.
- (s) "Electronic transmission" means transmission of information in electronic form or the transmission of the exact visual image of a document by way of electronic equipment.
  - (t) "Generic name" means the established chemical name or

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official name of a drug or drug product.

- (u) (1) "Institutional drug room" means any location where prescription-only drugs are stored and from which prescription-only drugs are administered or dispensed and which is maintained or operated for the purpose of providing the drug needs of:
  - (A) Inmates of a jail or correctional institution or facility;
- (B) residents of a juvenile detention facility, as defined by the revised Kansas code for care of children and the revised Kansas juvenile justice code;
- (C) students of a public or private university or college, a community college or any other institution of higher learning which is located in Kansas;
  - (D) employees of a business or other employer; or
  - (E) persons receiving inpatient hospice services.
  - (2) "Institutional drug room" does not include:
  - (A) Any registered pharmacy;
  - (B) any office of a practitioner; or
- (C) a location where no prescription-only drugs are dispensed and no prescription-only drugs other than individual prescriptions are stored or administered.
- (v) "Intracompany transaction" means any transaction or transfer between any division, subsidiary, parent or affiliated or related company under common ownership or control of a corporate entity, or any transaction or transfer between co-licensees of a co-licensed product.
- (w) "Medical care facility" shall have the meaning provided in K.S.A. 65-425, and amendments thereto, except that the term shall also include facilities licensed under the provisions of K.S.A. 75-3307b, and amendments thereto, except community mental health centers and facilities for the mentally retarded.
- 31 "Manufacture" means the production, preparation, propagation, 32 compounding, conversion or processing of a drug either directly or indirectly by extraction from substances of natural origin, 33 independently by means of chemical synthesis or by a combination of 34 extraction and chemical synthesis and includes any packaging or 35 36 repackaging of the drug or labeling or relabeling of its container, except 37 that this term shall not include the preparation or compounding of a 38 drug by an individual for the individual's own use or the preparation, compounding, packaging or labeling of a drug by: (1) A practitioner or

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a practitioner's authorized agent incident to such practitioner's administering or dispensing of a drug in the course of the practitioner's professional practice; (2) a practitioner, by a practitioner's authorized agent or under a practitioner's supervision for the purpose of, or as an incident to, research, teaching or chemical analysis and not for sale; or (3) a pharmacist or the pharmacist's authorized agent acting under the direct supervision of the pharmacist for the purpose of, or incident to, the dispensing of a drug by the pharmacist.

- (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 thirdparty logistics provider, or from that manufacturer to that manufacturer's exclusive distributor, directly or by drop shipment, to:
- (1) A pharmacy to a patient or to other designated persons authorized by law to dispense or administer such drug to a patient;
- (2) a wholesale distributor to a pharmacy to a patient or other designated persons authorized by law to dispense or administer such drug to a patient;
- (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
- (4) a chain pharmacy warehouse to the 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.
- 30 (aa) "Person" means individual, corporation, government, governmental subdivision or agency, partnership, association or any 32 other legal entity.
  - (bb) "Pharmacist" means any natural person licensed under this act to practice pharmacy.
  - (cc) "Pharmacist in charge" means the pharmacist who is responsible to the board for a registered establishment's compliance with the laws and regulations of this state pertaining to the practice of pharmacy, manufacturing of drugs and the distribution of drugs. The pharmacist in charge shall supervise such establishment on a full-time

or a part-time basis and perform such other duties relating to supervision of a registered establishment as may be prescribed by the board by rules and regulations. Nothing in this definition shall relieve other pharmacists or persons from their responsibility to comply with state and federal laws and regulations.

- (dd) "Pharmacy," "drug store" or "apothecary" means premises, laboratory, area or other place: (1) Where drugs are offered for sale where the profession of pharmacy is practiced and where prescriptions are compounded and dispensed; or (2) which has displayed upon it or within it the words "pharmacist," "pharmaceutical chemist," "pharmacy," "apothecary," "drugstore," "druggist," "drugs," "drug sundries" or any of these words or combinations of these words or words of similar import either in English or any sign containing any of these words; or (3) where the characteristic symbols of pharmacy or the characteristic prescription sign "Rx" may be 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 of the business registered by the board at the address for which the registration was issued.
- (ee) "Pharmacy student" means an individual, registered with the board of pharmacy, 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 the optometry 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.
- (hh) "Preceptor" means a licensed pharmacist who possesses at least two years' experience as a pharmacist and who supervises students obtaining the pharmaceutical experience required by law as a condition to taking the examination for licensure as a pharmacist.
  - (ii) "Prescription" means, according to the context, either a

prescription order or a prescription medication.

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

- (pp) "Secretary" means the executive secretary of the board.
- (qq) "Third party logistics provider" means an entity that: (1) Provides or coordinates warehousing, distribution or other services on behalf of a manufacturer, but does not take title to the prescription drug or have general responsibility to direct the prescription drug's sale or disposition; (2) is registered as a wholesale distributor under the pharmacy act of the state of Kansas; and (3) to be considered part of the normal distribution channel, must also be an authorized distributor of record.
  - (rr) "Unprofessional conduct" means:
  - (1) Fraud in securing a registration or permit;
- (2) intentional adulteration or mislabeling of any drug, medicine, chemical or poison;
- (3) causing any drug, medicine, chemical or poison to be adulterated or mislabeled, knowing the same to be adulterated or mislabeled:
  - (4) intentionally falsifying or altering records or prescriptions;
- (5) unlawful possession of drugs and unlawful diversion of drugs to others;
  - (6) willful betrayal of confidential information under K.S.A. 65-1654, and amendments thereto;
    - (7) conduct likely to deceive, defraud or harm the public;
  - (8) making a false or misleading statement regarding the licensee's professional practice or the efficacy or value of a drug;
  - (9) commission of any act of sexual abuse, misconduct or exploitation related to the licensee's professional practice; or
  - (10) performing unnecessary tests, examinations or services which have no legitimate pharmaceutical purpose.
- (ss) "Mid-level practitioner" means an advanced *practice* registered nurse <del>practitioner</del> issued a <del>certificate of qualification license</del> pursuant to K.S.A. 65-1131, and amendments thereto, who has authority to prescribe drugs pursuant to a written protocol with a responsible physician under K.S.A. 65-1130, and amendments thereto, or a physician assistant licensed pursuant to the physician assistant licensure act who has authority to prescribe drugs pursuant to a written protocol with a responsible physician under K.S.A. 65-28a08, and amendments thereto.
- (tt) "Vaccination protocol" means a written protocol, agreed to by a pharmacist and a person licensed to practice medicine and surgery by

the state board of healing arts, which establishes procedures and recordkeeping and reporting requirements for administering a vaccine by the pharmacist for a period of time specified therein, not to exceed two years.

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

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

"Wholesale distribution" means the distribution of prescription drugs or devices by wholesale distributors to persons other than consumers or patients, and includes the transfer of prescription drugs by a pharmacy to another pharmacy if the total number of units of transferred drugs during a twelve-month period does not exceed 5% of the total number of all units dispensed by the pharmacy during the immediately preceding twelve-month period. Wholesale distribution does not include: (1) The sale, purchase or trade of a prescription drug or device, an offer to sell, purchase or trade a prescription drug or device or the dispensing of a prescription drug or device pursuant to a prescription; (2) the sale, purchase or trade of a prescription drug or device or an offer to sell, purchase or trade a prescription drug or device for emergency medical reasons; (3) intracompany transactions, as defined in this section, unless in violation of own use provisions; (4) the sale, purchase or trade of a prescription drug or device or an offer to sell, purchase or trade a prescription drug or device among hospitals, chain pharmacy warehouses, pharmacies or other health care entities that are under common control; (5) the sale, purchase or trade of a prescription drug or device or the offer to sell, purchase or trade a

prescription drug or device by a charitable organization described in 503(c)(3)503 (e)(3) of the internal revenue code of 1954 to a nonprofit 3 affiliate of the organization to the extent otherwise permitted by law; (6) the purchase or other acquisition by a hospital or other similar 5 health care entity that is a member of a group purchasing organization 6 of a prescription drug or device for its own use from the group 7 purchasing organization or from other hospitals or similar health care 8 entities that are members of these organizations; (7) the transfer of 9 prescription drugs or devices between pharmacies pursuant to a 10 centralized prescription processing agreement; (8) the sale, purchase or 11 trade of blood and blood components intended for transfusion; (9) the 12 return of recalled, expired, damaged or otherwise non-salable 13 prescription drugs, when conducted by a hospital, health care entity, 14 pharmacy, chain pharmacy warehouse or charitable institution in 15 accordance with the board's rules and regulations; (10) the sale, transfer, merger or consolidation of all or part of the business of a retail 16 pharmacy or pharmacies from or with another retail pharmacy or 17 pharmacies, whether accomplished as a purchase and sale of stock or 18 19 business assets, in accordance with the board's rules and regulations; 20 (11) the distribution of drug samples by manufacturers' and authorized distributors' representatives; (12) the sale of minimal quantities of 22 drugs by retail pharmacies to licensed practitioners for office use; or 23 (13) the sale or transfer from a retail pharmacy or chain pharmacy 24 warehouse of expired, damaged, returned or recalled prescription drugs 25 to the original manufacturer, originating wholesale distributor or to a 26 third party returns processor in accordance with the board's rules and 27 regulations.

Sec. 18. K.S.A. 2010 Supp. 65-2921 is hereby amended to read as 28 29 follows: 65-2921. (a) Except as otherwise provided in subsection (b), 30 (c) or (d), a physical therapist may evaluate patients without physician 31 referral but may initiate treatment only after approval by a licensed 32 physician, a licensed podiatrist, a licensed physician assistant or an a 33 licensed advanced practice registered nurse practitioner working 34 pursuant to the order or direction of a licensed physician, a licensed 35 chiropractor, a licensed dentist or licensed optometrist in appropriately 36 related cases. Physical therapists may initiate physical therapy 37 treatment with the approval of a practitioner of the healing arts duly 38 licensed under the laws of another state and may provide such treatment based upon an order by such practitioner in any setting in

which physical therapists would be authorized to provide such treatment with the approval of a physician licensed by the board, notwithstanding any provisions of the Kansas healing arts act or any rules and regulations adopted by the board thereunder.

- (b) Physical therapists may evaluate and treat a patient for no more than 30 consecutive calendar days without a referral under the following conditions: (1) The patient has previously been referred to a physical therapist 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 year from the date a physical therapist implements a program of physical therapy treatment without a referral; (3) the physical therapy being provided to the patient without referral is for the same injury, disease or condition as indicated in the referral for such previous injury, disease or condition; and (4) the physical therapist transmits to the physician or other practitioner identified 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 consecutive calendar days of such patient shall only be upon the approval of a 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.
- (d) Physical therapists may provide services without a referral to special education students who need physical therapy services to fulfill the provisions of their individualized education plan (IEP) or individualized family service plan (IFSP).
- Sec. 19. K.S.A. 2010 Supp. 65-4101 is hereby amended to read as follows: 65-4101. As used in this act: (a) "Administer" means the direct application of a controlled substance, 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; or
- (2) the patient or research subject at the direction and in the presence of the practitioner.
  - (b) "Agent" means an authorized person who acts on behalf of or at the direction of a manufacturer, distributor or dispenser. It does not

include a common carrier, public warehouseman or employee of the carrier or warehouseman.

- (c) "Board" means the state board of pharmacy.
- (d) "Bureau" means the bureau of narcotics and dangerous drugs, United States department of justice, or its successor agency.
- (e) "Controlled substance" means any drug, substance or immediate precursor included in any of the schedules designated in K.S.A. 65-4105, 65-4107, 65-4109, 65-4111 and 65-4113, and amendments *thereto*.to these sections.
- (f) "Counterfeit substance" means a controlled substance which, or the container or labeling of which, without authorization bears the trademark, trade name or other identifying mark, imprint, number or device or any likeness thereof of a manufacturer, distributor or dispenser other than the person who in fact manufactured, distributed or dispensed the substance.
- (g) "Deliver" or "delivery" means the actual, constructive or attempted transfer from one person to another of a controlled substance, whether or not there is an agency relationship.
- (h) "Dispense" means to deliver a controlled substance to an ultimate user or research subject by or pursuant to the lawful order of a practitioner, including the packaging, labeling or compounding necessary to prepare the substance for that delivery, or pursuant to the prescription of a mid-level practitioner.
  - (i) "Dispenser" means a practitioner or pharmacist who dispenses.
- (j) "Distribute" means to deliver other than by administering or dispensing a controlled substance.
  - (k) "Distributor" means a person who distributes.
- (l) "Drug" means: (1) Substances recognized as drugs in the official United States pharmacopoeia, official homeopathic pharmacopoeia of the United States or official national formulary or any supplement to any of them; (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.
- (m) "Immediate precursor" means a substance which the board has found to be and by rule and regulation designates as being the principal

compound commonly used or produced primarily for use and which is an immediate chemical intermediary used or likely to be used in the manufacture of a controlled substance, the control of which is necessary to prevent, curtail or limit manufacture.

- (n) "Manufacture" means the production, preparation, propagation, compounding, conversion or processing of a controlled substance either directly or indirectly or by extraction from substances of natural origin or independently by means of chemical synthesis or by a combination of extraction and chemical synthesis and includes any packaging or repackaging of the substance or labeling or relabeling of its container, except that this term does not include the preparation or compounding of a controlled substance by an individual for the individual's own lawful use or the preparation, compounding, packaging or labeling of a controlled substance: (1) By a practitioner or the practitioner's agent pursuant to a lawful order of a practitioner as an incident to the practitioner's administering or dispensing of a 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.
- (o) "Marijuana" means all parts of all varieties of the plant *Cannabis* whether growing or not, the seeds thereof, the resin extracted from any part of the plant and every compound, manufacture, salt, derivative, mixture or preparation of the plant, its seeds or resin. It does not include the mature stalks of the plant, fiber produced from the stalks, oil or cake made from the seeds of the plant, any other compound, manufacture, salt, derivative, mixture or 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 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;
- (2) any salt, compound, isomer, derivative or preparation thereof which is chemically equivalent or identical with any of the substances referred to in clause (1) but not including the isoquinoline alkaloids of opium;

- (3) opium poppy and poppy straw;
- (4) coca leaves and any salt, compound, derivative or preparation of coca leaves, and any salt, compound, isomer, derivative or preparation thereof which is chemically equivalent or identical with any of these substances, but not including decocainized coca leaves or extractions of coca leaves which do not contain cocaine or ecgonine.
- (q) "Opiate" means any substance having an addiction-forming or addiction-sustaining liability similar to morphine or being capable of conversion into a drug having addiction-forming or addiction-sustaining liability. It does not include, unless specifically designated as controlled under K.S.A. 65-4102, and amendments thereto, the dextrorotatory isomer of 3-methoxy-n-methylmorphinan and its salts (dextromethorphan). It does include its racemic and levorotatory forms.
- (r) "Opium poppy" means the plant of the species *Papaver somniferum l.* except its seeds.
- (s) "Person" means individual, corporation, government, or governmental subdivision or agency, business trust, estate, trust, partnership or association or any other legal entity.
- (t) "Poppy straw" means all parts, except the seeds, of the opium poppy, after mowing.
- (u) "Pharmacist" means an individual currently licensed by the board to practice the profession of pharmacy in this state.
- (v) "Practitioner" means a person licensed to practice medicine and surgery, dentist, podiatrist, veterinarian, optometrist licensed under the optometry law as a therapeutic licensee or diagnostic and therapeutic licensee, or scientific investigator or other person authorized by law to use a controlled substance in teaching or chemical analysis or to conduct research with respect to a controlled substance.
- (w) "Production" includes the manufacture, planting, cultivation, growing or harvesting of a controlled substance.
- (x) "Ultimate user" means a person who lawfully possesses a controlled 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 by a member of such person's household.
  - (y) "Isomer" means all enantiomers and diastereomers.
- (z) "Medical care facility" shall have the meaning ascribed to that term in K.S.A. 65-425, and amendments thereto.
  - (aa) "Cultivate" means the planting or promotion of growth of five or more plants which contain or can produce controlled substances.

- (bb) (1) "Controlled substance analog" means a substance that is intended for human consumption, and:
- (A) The chemical structure of which is substantially similar to the chemical structure of a controlled substance listed in or added to the schedules designated in K.S.A. 65-4105 or 65-4107, and amendments thereto;
- (B) which has a stimulant, depressant or hallucinogenic effect on the central nervous system substantially similar to the stimulant, depressant or hallucinogenic effect on the central nervous system of a controlled substance included in the schedules designated in K.S.A. 65-4105 or 65-4107, and amendments thereto; or
- (C) with respect to a particular individual, which the individual represents or intends to have a stimulant, depressant or hallucinogenic effect on the central nervous system substantially similar to the stimulant, depressant or hallucinogenic effect on the central nervous system of a controlled substance included in the schedules designated in K.S.A. 65-4105 or 65-4107, and amendments thereto.
  - (2) "Controlled substance analog" does not include:
  - (A) A controlled substance;
- (B) a substance for which there is an approved new drug application; or
- (C) a substance with respect to which an exemption is in effect for investigational use by a particular person under section 505 of the federal food, drug, and cosmetic act (21 U.S.C.  $\S$  355) to the extent conduct with respect to the substance is permitted by the exemption.
- (cc) "Mid-level practitioner" means an advanced *practice* registered nurse <del>practitioner</del> issued a <del>certificate of qualification license</del> pursuant to K.S.A. 65-1131, and amendments thereto, who has authority to prescribe drugs pursuant to a written protocol with a responsible physician under K.S.A. 65-1130, and amendments thereto, or a physician assistant licensed under the physician assistant licensure act who has authority to prescribe drugs pursuant to a written protocol with a responsible physician under K.S.A. 65-28a08, and amendments thereto.
- Sec. 20. 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:
  - (a) "Board" means the state board of healing arts.
- (b) "Practice of occupational therapy" means the therapeutic use of

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purposeful and meaningful occupations (goal-directed activities) to 2 evaluate and treat, pursuant to the referral, supervision, order or 3 direction of a physician, a licensed podiatrist, a licensed dentist, a licensed physician assistant, or an a licensed advanced practice 5 registered nurse practitioner working pursuant to the order or direction 6 of a person licensed to practice medicine and surgery, a licensed 7 chiropractor, or a licensed optometrist, individuals who have a disease or disorder, impairment, activity limitation or participation restriction 8 9 that interferes with their ability to function independently in daily life roles and to promote health and wellness. Occupational therapy 10 intervention may include: 11

- (1) Remediation or restoration of performance abilities that are limited due to impairment in biological, physiological, psychological or neurological cognitive processes;
- (2) adaptation of tasks, process, or the environment or the teaching of compensatory techniques in order to enhance performance;
- (3) disability prevention methods and techniques that facilitate the development or safe application of performance skills; and
- (4) health promotion strategies and practices that enhance performance abilities.
  - (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 of ergonomic principles, to enhance performance and safety in daily life roles;
- (5) applying physical agent modalities as an adjunct to or in preparation for engagement in occupations;
- 36 (6) evaluating and providing intervention in collaboration with the client, family, caregiver or others;
  - (7) educating the client, family, caregiver or others in carrying out appropriate nonskilled interventions; and

- (8) consulting with groups, programs, organizations or communities to provide population-based services.
- (d) "Occupational therapist" means a person licensed to practice occupational therapy as defined in this act.
- (e) "Occupational therapy assistant" means a person licensed to assist in the practice of occupational therapy under the supervision of an occupational therapist.
- (f) "Person" means any individual, partnership, unincorporated organization or corporation.
- (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.
- Sec. 21. K.S.A. 2010 Supp. 65-6112 is hereby amended to read as follows: 65-6112. As used in this act:
- (a) "Administrator" means the executive director of the emergency medical services board.
- (b) "Advanced emergency medical technician" means a person who holds an advanced emergency medical technician certificate issued pursuant to this act.
- (c) "Advanced *practice* registered nurse <del>practitioner</del>" means an advanced *practice* registered nurse <del>practitioner</del> as defined in K.S.A. 65-1113, and amendments thereto.
- (d) "Ambulance" means any privately or publicly owned motor vehicle, airplane or helicopter designed, constructed, prepared, staffed and equipped for use in transporting and providing emergency care for individuals who are ill or injured.
- (e) "Ambulance service" means any organization operated for the purpose of transporting sick or injured persons to or from a place where medical care is furnished, whether or not such persons may be in need of emergency or medical care in transit.
- (f) "Attendant" means a first responder, an emergency medical responder, emergency medical technician, emergency medical technician-intermediate, emergency medical technician-defibrillator, emergency medical technician-intermediate/defibrillator, advanced emergency medical technician, mobile intensive care technician or paramedic certified pursuant to this act.

- (g) "Board" means the emergency medical services board established pursuant to K.S.A. 65-6102, and amendments thereto.
- (h) "Emergency medical service" means the effective and coordinated delivery of such care as may be required by an emergency which includes the care and transportation of individuals by ambulance services and the performance of authorized emergency care by a physician, advanced *practice* registered nurse practitioner, 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.
- (l) "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.
- (m) "Emergency medical responder" means a person who holds an emergency medical responder certificate issued pursuant to this act.
- (n) "First responder" means a person who holds a first responder certificate issued pursuant to this act.
- (o) "Hospital" means a hospital as defined by K.S.A. 65-425, and amendments thereto.
- (p) "Instructor-coordinator" means a person who is certified under this act to teach initial courses of certification of instruction and continuing education classes.
  - (q) "Medical adviser" means a physician.
- (r) "Medical protocols" mean written guidelines which authorize attendants to perform certain medical procedures prior to contacting a physician, physician assistant authorized by a physician, advanced *practice* registered nurse practitioner authorized by a physician or professional nurse authorized by a physician. The medical protocols shall be approved by a county medical society or the medical staff of a hospital to which the ambulance service primarily transports patients, or if neither of the above are able or available to approve the medical protocols, then the medical protocols shall be submitted to the medical

advisory council for approval.

- (s) "Mobile intensive care technician" means a person who holds a mobile intensive care technician certificate issued pursuant to this act.
- (t) "Municipality" means any city, county, township, fire district or 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 issued pursuant to this act.
- (x) "Person" means an individual, a partnership, an association, a joint-stock company or a corporation.
- (y) "Physician" means a person licensed by the state board of healing arts to practice medicine and surgery.
- (z) "Physician assistant" means a person who is licensed under the physician assistant licensure act and who is acting under the direction of a 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.
- (cc) "Responsible physician" means responsible physician as such term is defined under K.S.A. 65-28a02, and amendments thereto.
- (dd) "Training officer" means a person who is certified pursuant to this act to teach initial courses of instruction for first responders or emergency medical responders and continuing education as prescribed by the board.
- Sec. 22. K.S.A. 2010 Supp. 65-6119 is hereby amended to read as follows: 65-6119. (a) Notwithstanding any other provision of law, mobile intensive care technicians may:

- (1) Perform all the authorized activities identified in K.S.A. 65-6120, 65-6121, 65-6123, 65-6144, and amendments thereto;
- (2) when voice contact or a telemetered electrocardiogram is monitored by a physician, physician assistant where authorized by a physician, an advanced *practice* registered nurse <del>practitioner</del> where authorized by a physician or licensed professional nurse where authorized by a physician and direct communication is maintained, and upon order of such person may administer such medications or procedures as may be deemed necessary by a person identified in subsection (a)(2);
- (3) perform, during an emergency, those activities specified in subsection (a)(2) before contacting a person identified in subsection (a) (2) when specifically authorized to perform such activities by medical protocols; and
- (4) perform, during nonemergency transportation, those activities specified in this section when specifically authorized to perform such activities by medical protocols.
- (b) An individual who holds a valid certificate as a mobile intensive care technician once meeting the continuing education requirements prescribed by the rules and regulations of the board, upon application for renewal, shall be deemed to hold a certificate as a paramedic under this act, and such individual shall not be required to file an original application as a paramedic for certification under this act
- (c) "Renewal" as used in subsection (b), refers to the first opportunity that a mobile intensive care technician has to apply for renewal of a certificate following the effective date of this act.
- (d) Upon transition notwithstanding any other provision of law, a paramedic may:
- (1) Perform all the authorized activities identified in K.S.A. 65-6120, 65-6121, 65-6144, and amendments thereto;
- (2) when voice contact or a telemetered electrocardiogram is monitored by a physician, physician assistant where authorized by a physician or an advanced *practice* registered nurse <del>practitioner</del> where authorized by a physician or licensed professional nurse where authorized by a physician and direct communication is maintained, and upon order of such person, may administer such medications or procedures as may be deemed necessary by a person identified in subsection (d)(2);

- (3) perform, during an emergency, those activities specified in subsection (d)(2) before contacting a person identified in subsection (d) (2) when specifically authorized to perform such activities by medical protocols; and
- (4) perform, during nonemergency transportation, those activities specified in this section when specifically authorized to perform such activities by medical protocols.
- Sec. 23. K.S.A. 2010 Supp. 65-6120 is hereby amended to read as follows: 65-6120. (a) Notwithstanding any other provision of law to the contrary, an emergency medical technician-intermediate may:
- (1) Perform any of the activities identified by K.S.A. 65-6121, and amendments thereto:
- (2) when approved by medical protocols and where voice contact by radio or telephone is monitored by a physician, physician assistant where authorized by a physician, advanced *practice* registered nurse practitioner where authorized by a physician or licensed professional nurse where authorized by a physician, and direct communication is maintained, upon order of such person, may perform veni-puncture for the purpose of blood sampling collection and initiation and maintenance of intravenous infusion of saline solutions, dextrose and water solutions or ringers lactate IV solutions, endotracheal intubation and administration of nebulized albuterol;
- (3) perform, during an emergency, those activities specified in subsection (a)(2) before contacting the persons identified in subsection (a)(2) when specifically authorized to perform such activities by medical protocols; or
- (4) perform, during nonemergency transportation, those activities specified in this section when specifically authorized to perform such activities by medical protocols.
- (b) An individual who holds a valid certificate as an emergency medical technician-intermediate once completing the board prescribed transition course, and validation of cognitive and psychomotor competency as determined by rules and regulations of the board, upon application for renewal, shall be deemed to 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 certification as an advanced emergency medical technician under this act.
- (c) "Renewal" as used in subsection (b), refers to the second

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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.
- (e) Upon transition, notwithstanding any other provision of law to the contrary, an advanced emergency medical technician may:
- (1) Perform any of the activities identified by K.S.A. 65-6121, and amendments thereto; and
- (2) any of the following interventions, by use of the devices, medications and equipment, or any combination thereof, after successfully completing an approved course of instruction, local specialized device training and competency validation and when authorized by medical protocols, upon order when direct communication is maintained by radio, telephone or video conference with a physician, physician assistant where authorized by a physician, an advanced practice registered nurse practitioner where authorized by a physician, or licensed professional nurse where authorized by a physician upon order of such a person: (A) Continuous positive airway pressure devices; (B) advanced airway management; (C) referral of patient to of alternate medical care site based on assessment; (D) transportation of a patient with a capped arterial line; (E) veni-puncture for obtaining blood sample; (F) initiation and maintenance of intravenous infusion or saline lock; (G) initiation of intraosseous infusion; (H) nebulized therapy; (I) manual defibrillation and cardioversion; (J) cardiac monitoring; (K) medication administration via: (i) Aerosolization; (ii) nebulization; (iii) intravenous; (iv) intranasal; (v) rectal; (vi) subcutaneous; (vii) intraosseous; (viii) intramuscular; or (ix) sublingual.
- (f) An individual who holds a valid certificate as both an emergency medical technician-intermediate and as an emergency medical technician-defibrillator once completing the board prescribed transition course, and validation of cognitive and psychomotor competency as determined by rules and regulations of the board, upon application for renewal, shall be deemed to 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

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1 certification as an advanced emergency medical technician under this 2 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. 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:
  - (1) Patient assessment and vital signs;
  - (2) airway maintenance including the use of:
  - (A) Oropharyngeal and nasopharyngeal airways;
- 20 (B) esophageal obturator airways with or without gastric suction device;
  - (C) multi-lumen airway; and
    - (D) oxygen demand valves.
    - (3) Oxygen therapy;
- 25 (4) oropharyngeal suctioning:
- 26 (5) cardiopulmonary resuscitation procedures;
- 27 (6) control accessible bleeding;
  - (7) apply pneumatic anti-shock garment;
- 29 (8) manage outpatient medical emergencies;
- 30 (9) extricate patients and utilize lifting and moving techniques;
- 31 (10) manage musculoskeletal and soft tissue injuries including 32 dressing and bandaging wounds or the splinting of fractures, 33 dislocations, sprains or strains;
  - (11) use of backboards to immobilize the spine;
    - (12) administer activated charcoal and glucose;
- 36 (13) monitor peripheral intravenous line delivering intravenous fluids during interfacility transport with the following restrictions:
- 38 (A) The physician approves the transfer by an emergency medical technician;

- (B) no medications or nutrients have been added to the intravenous fluids; and
- (C) the emergency medical technician may monitor, maintain and shut off the flow of intravenous fluid;
  - (14) use automated external defibrillators;
  - (15) administer epinephrine auto-injectors provided that:
- (A) The emergency medical technician successfully completes a course of instruction approved by the board in the administration of epinephrine; and
- (B) the emergency medical technician serves with an ambulance service or a first response organization that provides emergency medical services; and
- (C) the emergency medical technician is acting pursuant to medical protocols;
- (16) perform, during nonemergency transportation, those activities specified in this section when specifically authorized to perform such activities by medical protocols; or
- (17) when authorized by medical protocol, assist the patient in the administration of the following medications which have been prescribed for that patient: Auto-injection epinephrine, sublingual nitroglycerin and inhalers for asthma and emphysema.
- (b) An individual who holds a valid certificate as an emergency medical technician at the current basic level once completing the board prescribed transition course, and validation of cognitive and psychomotor competency as determined by rules and regulations of the board, upon application for 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.
- (c)"Renewal" as used in subsection (b), refers to the first opportunity that an emergency medical technician has to apply for renewal of a certificate following the effective date of this act.
- (d) Emergency medical technicians who fail to meet the transition requirements as specified will be required, at a minimum, to gain the continuing education applicable to emergency medical responder as defined by rules and regulations of the board. Failure to do so will result in loss of certification.
- (e) Upon transition, notwithstanding any other provision of law to the contrary, an emergency medical technician may perform any

- activities identified in K.S.A. 65-6144, and amendments thereto, and 2 any of the following interventions, by use of the devices, medications 3 and equipment, or any combination thereof, after successfully completing an approved course of instruction, local specialized device 5 training and competency validation and when authorized by medical 6 protocols, upon order when direct communication is maintained by 7 radio, telephone or video conference is monitored by a physician, 8 physician assistant when authorized by a physician, an advanced 9 practice registered nurse practitioner when authorized by a physician or 10 a licensed professional nurse when authorized by a physician, upon 11 order of such person:
  - (1) Airway maintenance including use of:
    - (A) Single lumen airways as approved by the board;
- 14 (B) multilumen airways;
- 15 (C) ventilator devices;

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- 16 (D) forceps removal of airway obstruction;
  - (E) CO2 monitoring;
- 18 (F) airway suctioning;
- 19 (2) apply pneumatic anti-shock garment;
  - (3) assist with childbirth;
- 21 (4) monitoring urinary catheter;
  - (5) capillary blood sampling;
- 23 (6) cardiac monitoring;
- 24 (7) administration of patient assisted medications as approved by the board;
  - (8) administration of medications as approved by the board by appropriate routes; and
  - (9) monitor, maintain or discontinue flow of IV line if a physician approves transfer by an emergency medical technician.
  - Sec. 25. K.S.A. 2010 Supp. 65-6123 is hereby amended to read as follows: 65-6123. (a) Notwithstanding any other provision of law to the contrary, an emergency medical technician-defibrillator may:
  - (1) Perform any of the activities identified in K.S.A. 65-6121, and amendments thereto;
- 35 (2) when approved by medical protocols and where voice contact 36 by radio or telephone is monitored by a physician, physician assistant 37 where authorized by a physician, advanced *practice* registered nurse 38 practitioner where authorized by a physician, or licensed professional 39 nurse where authorized by a physician, and direct communication is

maintained, upon order of such person, may perform electrocardiographic monitoring and 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.
- (b) An individual who holds a valid certificate as an emergency medical technician-defibrillator once completing the board prescribed transition course, and validation of cognitive and psychomotor competency as determined by rules and regulations of the board, upon application for renewal, shall be deemed to 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 certification as an advanced emergency medical technician 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. 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 <del>practitioner</del> or licensed professional nurse shall be liable for civil damages as a result

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

- (c) No person certified as an instructor-coordinator and no training officer shall be liable for any civil damages which may result from such instructor-coordinator's or training officer's course of instruction, except such damages which may result from gross negligence or by willful or wanton acts or omissions on the part of the instructorcoordinator or training officer.
- (d) No medical adviser who reviews, approves and monitors the activities of attendants shall be liable for any civil damages as a result of such review, approval or monitoring, except such damages which may result from gross negligence in such review, approval or monitoring.
- Sec. 27. K.S.A. 2010 Supp. 65-6129c is hereby amended to read as follows: 65-6129c. (a) Application for a training officer's certificate shall be made to the emergency medical services board upon forms provided by the administrator. The board may grant a training officer's certificate to an applicant who: (1) Is 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; (2) successfully completes an initial course of training approved by the board; (3) passes an examination prescribed by the board; (4) is appointed by a provider of training approved by the board; and (5) has paid a fee established by the board.
- 29 (b) A training officer's certificate shall expire on the expiration 30 date of the 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 nurse's practitioner's or professional nurse's license 33 if the training officer is a physician, physician assistant, advanced practice registered nurse practitioner or professional nurse. A training 34 officer's certificate may be renewed for the same period as the 35 36 attendant's certificate or the physician's, physician assistant's, advanced practice registered nurse's nurse practitioner's or professional nurse's 38 license upon payment of a fee as prescribed by rules and regulations and upon presentation of satisfactory proof that the training officer has

successfully completed continuing education prescribed by the board and is certified 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 <del>practitioner</del> or professional nurse. The board may prorate to the nearest whole month the fee fixed under this subsection as necessary to implement the provisions of this subsection.

- (c) A training officer's certificate may be denied, revoked, limited, modified or suspended by the board or the board may refuse to renew such certificate 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;
- (2) fails to maintain support of appointment by a provider of training;
  - (3) fails to successfully complete continuing education;
- (4) has made intentional misrepresentations in obtaining a certificate or renewing a certificate;
- (5) has demonstrated incompetence or engaged in unprofessional conduct as defined by rules and regulations adopted by the board;
- (6) has violated or aided and abetted in the violation of any provision of this act or the rules and regulations promulgated by the board; or
- (7) has been convicted of any state or federal crime that is related substantially to the qualifications, functions and duties of a training officer or any crime punishable as a felony under any state or federal statute and the 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 contendere or a verdict of guilty. The board may take disciplinary action pursuant to this section when the time for appeal has elapsed, or after the judgment of conviction is affirmed on appeal or when an order granting 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

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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. 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 technician-intermediate, emergency medical techniciandefibrillator, 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 practitioner or a professional nurse.
- Sec. 29. K.S.A. 2010 Supp. 65-6144 is hereby amended to read as follows: 65-6144. (a) A first responder may perform any of the following activities:
- (1) Initial scene management including, but not limited to, gaining access to the individual in need of emergency care, extricating, lifting and moving the individual;
  - cardiopulmonary resuscitation and airway management; (2)
- control of bleeding;
  - extremity splinting excluding traction splinting;
- stabilization of the condition of the individual in need of 30 (5) 31 emergency care; 32
  - oxygen therapy; (6)
    - use of oropharyngeal airways;
  - use of bag valve masks;
  - (9) use automated external defibrillators; and
- 36 (10) other techniques of preliminary care a first responder is 37 trained to provide as approved by the board.
  - (b) An individual who holds a valid certificate as a first responder, once completing the board prescribed transition course, and validation

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of cognitive and psychomotor competency as determined by rules and regulations of the board, upon application for renewal, shall be deemed to hold a certificate as an emergency medical responder under this act, and such individual shall not be required to file an original application for certification as an emergency medical responder under this act.

- (c) "Renewal" as used in subsection (b), refers to the first opportunity that an attendant has to apply for renewal of a certificate following the effective date of this act.
- (d) First responder attendants who fail to meet the transition requirements as specified will forfeit their certification.
- (e) Upon transition, notwithstanding any other provision of law to the contrary, an emergency medical responder may perform any of the following interventions, by use of the devices, medications and equipment, or any combination thereof, after successfully completing an approved course of instruction, local specialized device training and competency validation and when authorized by medical protocols, upon order when direct communication is maintained by radio, telephone or video conference is monitored by a physician, physician assistant when authorized by a physician, an advanced practice registered nurse practitioner when authorized by a physician or a licensed professional nurse when authorized by a physician, upon order of such person: (1) Emergency vehicle operations; (2) initial scene management; (3) patient assessment and stabilization; (4) cardiopulmonary resuscitation and airway management; (5) control of bleeding; (6) extremity splinting; (7) spinal immobilization; (8) oxygen therapy; (9) use of bagvalve-mask; (10) use of automated external defibrillator; (11) nebulizer therapy; (12) intramuscular injections with auto-injector; (13) administration of oral glucose; (14) administration of aspirin; (15) recognize and comply with advanced directives; (16) insertion and maintenance of oral and nasal pharyngeal airways; (17) use of blood glucose monitoring; and (18) other techniques and devices of preliminary care an emergency medical responder is trained to provide as approved by the board.

Sec. 30. K.S.A. 2010 Supp. 72-5213 is hereby amended to read as follows: 72-5213. (a) Every board of education shall require all employees of the school district, who come in regular contact with 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 licensed to practice medicine and surgery under the laws of

any state, or by a person who is licensed as a physician assistant under the laws of this state when such person is working at the direction of or in collaboration with a person licensed to practice medicine and surgery, or by a person holding a *license* eertificate of qualification to practice 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 person licensed to practice medicine and surgery. The certification shall include a statement that there is no evidence of physical condition that would conflict with the health, 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 is reasonable cause to believe that any such employee of the school district is suffering from an illness detrimental to the health of the pupils, the school board may require a new certification of health.

- (b) Upon presentation of a signed statement by the employee of a school district, to whom the provisions of subsection (a) apply, that the employee is an adherent of a religious denomination whose religious teachings are opposed to physical examinations, the employee shall be permitted to submit, as an alternative to the certification of health required under subsection (a), certification signed by a person licensed to practice medicine and surgery under the laws of any state, or by a person who is licensed as a physician assistant under the laws of this state when such person is working at the direction of or in collaboration with a person licensed to practice medicine and surgery, or by a person holding a *license* eertificate of qualification to practice 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 person licensed to practice medicine and surgery that freedom of the employee from tuberculosis has been established.
- (c) Every board of education may require persons, other than employees of the school district, to submit to the same certification of health requirements as are imposed upon employees of the school district under the provisions of subsection (a) if such persons perform or provide services to or for a school district which require such persons to come in regular contact with the pupils of the school district. No such person shall be required to submit a certification of health if the person presents a signed statement that the person is an adherent of a religious denomination whose religious teachings are opposed to physical examinations. Such persons shall be permitted to submit, as an

- 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 who is licensed as a physician assistant under the laws of this state when such person is working at the direction of or in collaboration with a person licensed to practice medicine and surgery, or by a person holding a license eertificate of qualification to practice 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 person licensed to practice medicine and surgery that freedom of such persons from tuberculosis has been established.
  - (d) The expense of obtaining certifications of health and certifications of freedom from tuberculosis may be borne by the board of education.
  - Sec. 31. K.S.A. 2010 Supp. 72-8252 is hereby 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 medicine and surgery; (B) an advanced *practice* registered nurse <del>practitioner</del> issued a *license* eertificate of qualification pursuant to K.S.A. 65-1131, and amendments thereto, who has authority to prescribe drugs as provided by K.S.A. 65-1130, and amendments thereto; or (C) a physician assistant licensed pursuant to the physician assistant licensure act who has authority to prescribe drugs pursuant to a written protocol with a responsible physician under K.S.A. 65-28a08, and amendments thereto.
    - (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 self-administration 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:
  - (1) A requirement of a written statement from the student's health care 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;

- (2) a requirement that the student has demonstrated to the health care provider or such provider's designee and the school nurse or such nurse's designee the skill level necessary to use the medication and any device that is necessary to administer such medication as prescribed. If there is no school nurse, the school shall designate a person for the purposes of this subsection;
- (3) a requirement that the health care provider has prepared a written treatment plan for managing asthma or anaphylaxis episodes of the student and 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;
- (5) a requirement that all teachers responsible for the student's supervision shall be notified that permission to carry medications and self-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.
- (e) A school district shall provide written notification to the parent or guardian of a student that the school district and its officers, employees and agents are not liable for damage, injury or death resulting directly or indirectly from the self-administration of medication. The parent or guardian of the student shall sign a statement acknowledging that the school district and its officers, employees or agents incur no liability for damage, injury or death resulting directly or indirectly from the self-administration of medication and agreeing to release, indemnify and hold the school and its officers, employees and

agents, harmless from and against any claims relating to the self-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.
- (g) A school district shall require that information described in 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.
- (h) An authorization granted pursuant to subsection (b) shall allow a student to possess and use such student's medication at any place where a student is subject to the jurisdiction or supervision of the school district or its officers, employees or agents.
- (i) A board of education may adopt a policy pursuant to subsection (e) of K.S.A. 72-8205, and amendments thereto, which:
- (1) Imposes requirements relating to the self-administration of medication which are in addition to those required by this section; and
- (2) establishes a procedure for, and the conditions under which, the authorization for the self-administration of medication may be revoked.
- Sec. 32. 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.
- (2) Upon the expiration of the term of any registered professional nurse, the Kansas state nurses association shall submit to the governor a list of registered professional nurses containing names of not less than three times the number of persons to be appointed, and appointments shall be made after consideration of such list for terms of four years and until a successor is appointed and qualified.
- (3) On the effective date of this act, the Kansas federation of licensed practical nurses shall submit to the governor a list of licensed practical nurses containing names of not less than three times the number of persons to be appointed, and appointments shall be made after consideration of such list, with the first appointment being for a

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term of four years and the second appointment being for a term of two years. Upon the expiration of the term of any licensed practical nurse, a successor of like qualifications shall be appointed in the same manner as the original appointment for a term of four years and until a successor is appointed and qualified.

- (4) Each member of the general public shall be appointed for a term of 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 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 terms as a member of the board of nursing and appointment for the remainder 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 and one public member in July, 2003, the next appointments for those two positions will be for only one year. Thereafter the two positions shall be appointed for terms of four years.
- (b) Qualifications of members. Each member of the board shall be a citizen of the United States and a resident of the state of Kansas. Registered professional nurse members shall possess a license to practice as a professional nurse in this state with at least five years' experience in nursing as such and shall be actively engaged in professional nursing in Kansas at the time of appointment and reappointment. The licensed practical nurse members shall be licensed to practice practical nursing in the state with at least five years' experience in practical nursing and shall be actively engaged in practical nursing in Kansas at the time of appointment and reappointment. The governor shall appoint successors so that the registered professional nurse membership of the board shall consist of at least two members who are engaged in nursing 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 registered nurse practitioner or a registered nurse anesthetist. The consumer members shall represent the interests of the general public. At least one consumer member shall not have been involved in providing health care. Each member of the board shall take and subscribe the oath prescribed by law for state officers, which oath shall be filed with the secretary of state.
  - (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, 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 a registered professional nurse, who shall not be a member of the board and 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 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 by the attorney general as provided by law, whose compensation shall be determined and paid by the board with the approval of the governor. The board may hold such other meetings during the year as may be deemed necessary to transact its business.

- (2) The board shall adopt rules and regulations consistent with this act necessary to carry into effect the provisions thereof, and such rules and regulations may be published and copies thereof furnished to any person upon application.
- (3) The board shall prescribe curricula and standards for professional and practical nursing programs and mental health technician programs, and provide for surveys of such schools and courses at such times as it may deem necessary. It shall accredit such schools and approve courses as meet the requirements of the appropriate act and rules and regulations of the board.
- (4) The board shall examine, license and renew licenses of duly qualified applicants and conduct hearings upon charges for limitation, suspension or revocation of a license or approval of professional and practical nursing and mental health technician programs and may limit, deny, suspend or revoke for proper legal cause, licenses or approval of professional and practical nursing and mental health technician programs, as hereinafter provided. Examination for applicants for registration shall be given at least twice each year and as many other times as deemed necessary by the board. The board shall promote improved means of nursing education and standards of nursing care through institutes, conferences and other means.
- (5) The board shall have a seal of which the executive administrator shall be the custodian. The president and the secretary shall have the power and authority to administer oaths in transacting business of the board, and the secretary shall keep a record of all proceedings of the board and a register of professional and practical

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nurses and mental health technicians licensed and showing the certificates of registration or licenses granted or revoked, which register shall be open at all times to public inspection.

- (6) The board may enter into contracts as may be necessary to carry out its duties.
- (7) The board is hereby authorized to apply for and to accept grants and may accept donations, bequests or gifts. The board shall remit all moneys 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 each such remittance, the state treasurer shall deposit the entire amount in the 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 appropriation acts upon warrants of the director of accounts and reports issued pursuant to vouchers approved by the president of the board or a person designated by the president.
- (8) A majority of the board of nursing including two professional nurse members shall constitute a quorum for the transaction of business.
- (d) Subpoenas. In all investigations and proceedings, the board shall have the power to issue subpoenas and compel the attendance of witnesses and the production of all relevant and necessary papers, books, records, documentary evidence and materials. Any person failing or refusing to appear or testify regarding any matter about which such person may be lawfully questioned or to produce any books, papers, records, documentary evidence or relevant materials in the matter, after having been required by order of the board or by a 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 failure to comply with the order of the district judge, the court may compel obedience by attachment for contempt as in the case of disobedience of a similar order or subpoena issued by the court. A subpoena may be served upon any person named therein anywhere within the state with the same fees and 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.
- (e) Compensation and expenses. Members of the board of nursing attending meetings of such board, or attending a subcommittee meeting

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thereof authorized by such board, shall be paid compensation, 2 subsistence allowances, mileage and other expenses as provided in 3 K.S.A. 75-3223, and 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 member receives an amount from another 6 governmental or private entity for the purpose for which such amount 7 is payable under K.S.A. 75-3223, and amendments thereto.

- Sec. 33. 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 practitioner service scholarship program.
- Sec. 34. K.S.A. 74-32,132 is hereby amended to 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 state board 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.
- Sec. 35. K.S.A. 74-32,133 is hereby amended to read as follows: 74-32,133. (a) There is hereby established the advanced practice registered nurse practitioner service scholarship program. Within the limits of appropriations therefor, a scholarship may be awarded under the program to any qualified student enrolled in or admitted to an educational and training program for advanced practice registered nurses. nurse practitioners. The number of scholarships awarded under the program in any year shall not 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

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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.

- (c) Scholarships awarded under the program shall be awarded for the length of the course of instruction required for graduation as an advanced practice registered nurse practitioner unless terminated before expiration of 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 registered nurses nursepractitioners operated by a state educational institution the payment of an amount not to exceed 70% of the cost of attendance for a year, and (2) to a student enrolled in or admitted to an educational and training program for advanced practice registered nurses nurse practitionersoperated by an independent institution of higher education the payment of an amount not to exceed 70% of the average amount of the cost of attendance for a year in educational and training programs for advanced practice registered nurses nurse practitioners operated by the state educational institutions. The amount of each scholarship shall be established annually by the executive officer and shall be financed by the state of Kansas.
- Sec. 36. 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 <del>practitioner</del> service scholarship program shall provide to the executive officer, on forms supplied by the executive officer, the following information:
  - (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 executive officer.
- (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;

- (2) within six months after graduation from the educational and training program for advanced *practice* registered *nurses* nurse—practitioners, commence full-time practice as an advanced *practice* registered nurse practitioner, or commence the equivalent to full-time practice, or commence part-time practice as an advanced *practice* registered nurse practitioner, in a rural area or a medically underserved area, continue such practice for the total amount of time required under the agreement, and comply with such other terms and conditions as may be specified by the agreement;
- (3) commence full-time practice, or the equivalent to full-time practice, as an advanced *practice* registered nurse <del>practitioner</del> in a rural area or medically underserved area and continue such full-time practice, or the equivalent to full-time practice, in a rural area or medically underserved area for the total amount of time required under the agreement, which shall be for a period of not less than the length of the course of instruction for which the scholarship assistance was provided, or commence part-time practice in a rural area or medically underserved area and continue such part-time practice in a 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 full time, as determined by the state board of regents, multiplied by the length 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
- (5) upon failure to satisfy an agreement to engage in full-time practice as an advanced *practice* registered nurse <del>practitioner</del>, or the equivalent to full-time practice, or in part-time practice, in a rural area or medically underserved area for the required period of time under any such agreement, repay to the state amounts as provided in K.S.A. 74-32,135, and amendments thereto.
- Sec. 37. K.S.A. 74-32,135 is hereby amended to read as follows: 74-32,135. (a) Except as provided in K.S.A. 74-32,136, and amendments thereto, upon the failure of any person to satisfy the obligation 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 by such person pursuant to such agreement which is financed by the state of Kansas plus accrued interest at a rate

which is equivalent to the interest rate applicable to loans made under the federal PLUS program at the time such person first entered into an agreement plus five percentage points. Installment payments of such amounts may be made in accordance with rules and regulations of the state board of regents, except that such installment payments shall commence six months after the date of the action or circumstances that cause the failure of the person to satisfy the obligations of such agreements, as determined by the executive officer based upon the circumstances of each individual case. Amounts paid under this section to the executive officer shall be deposited in the advanced *practice* registered nurse *practitioner* service scholarship program fund in accordance with K.S.A. 74-32,138, and amendments thereto.

(b) The state board of regents is authorized to turn any repayment account arising under the advanced *practice* registered nurse <del>practitioner</del> 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. K.S.A. 74-32,136 is hereby amended to read as follows: 74-32,136. (a) An obligation under any agreement entered into under the advanced practice registered nurse practitioner service scholarship 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 period of service as a part of volunteers in service to America (VISTA); (4) during any period of service commitment to the United States public health service; (5) during any period of religious missionary work conducted by an 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 the person obligated is unable because of temporary medical disability to practice as an advanced practice registered nurse practitioner; (7) during any period of time the person obligated is enrolled and actively engaged on a fulltime basis in a course of study leading to a graduate degree in a field for which such person was awarded a scholarship under this act which degree is higher than that formerly attained; (8) during any period of time the person obligated is on job-protected leave under the federal family and medical leave act of 1993; or (9) during any period of time the state board of regents determines that the person obligated is unable because of special circumstances to practice as an advanced practice

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registered nurse practitioner. Except for clauses (6), (8) and (9), an 2 obligation under any agreement entered into as provided in the 3 advanced practice registered nurse practitioner service scholarship program shall not be postponed more than five years from the time the obligation was to have been commenced under any such agreement. An obligation under any agreement as provided in the advanced practice registered nurse practitioner service scholarship program shall be postponed under clause (6) during the period of time the medical 9 disability exists. An obligation to engage in practice as an advanced practice registered nurse practitioner in accordance with an agreement 10 11 under the advanced practice registered nurse practitioner service 12 scholarship program shall be postponed under clause (8) during the 13 period of time the person obligated remains on FMLA leave. An 14 obligation to engage in practice as an advanced practice registered nurse practitioner in accordance with an agreement under the advanced practice registered nurse practitioner service scholarship program shall 16 be postponed under clause (9) during the period of time the state board 17 of regents determines that the special circumstances exist. The state 18 19 board of regents shall adopt rules and regulations prescribing criteria or 20 guidelines for determination of the existence of special circumstances causing an inability to practice as an advanced practice registered nurse 22 practitioner, and shall determine the documentation required to prove the existence of such circumstances.

(b) An obligation under any agreement entered into in accordance with the advanced practice registered nurse practitioner service scholarship program shall be satisfied: (1) If the obligation has been completed in 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 practitioner and continue in such employment after making the best effort possible to do so.

Sec. 39. K.S.A. 74-32,137 is hereby amended to read as follows: 74-32,137. The state board of regents, after consultation with the committee, may adopt rules and regulations establishing minimum terms, conditions and obligations which shall be incorporated into the provisions of any agreement under the advanced practice registered

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nurse practitioner service scholarship program. The terms, conditions 2 and obligations shall be consistent with the provisions of law relating to 3 the advanced *practice* registered nurse <del>practitioner</del> service scholarship program. The terms, conditions and obligations so established shall 5 include, but not be limited to, the terms of eligibility for financial 6 assistance under the advanced practice registered nurse practitioner-7 service scholarship program, the amount of financial assistance to be 8 offered, the length of practice in a rural area or medically underserved 9 area required as a condition to the receipt of such financial assistance to 10 be offered, the amount of money required to be repaid because of 11 failure to satisfy the obligations under an agreement and the method of 12 repayment and such other additional provisions as may be necessary to 13 carry out the provisions of the advanced practice registered nurse 14 <del>practitioner</del> service scholarship program. The state board of regents, 15 after consultation with the committee, shall adopt rules and regulations 16 establishing criteria for evaluating the financial need of applicants for 17 scholarships and may adopt such other rules and regulations as may be necessary to administer the advanced practice registered nurse 18 19 practitioner service scholarship program. 20

Sec. 40. K.S.A. 74-32,138 is hereby amended to read as follows: 74-32,138. There is hereby created in the state treasury the advanced *practice* registered nurse <del>practitioner</del> service scholarship program 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 amendments thereto. Upon receipt of each such remittance the state treasurer shall deposit the entire amount in the state treasury to the credit of the advanced *practice* registered nurse <del>practitioner</del> service scholarship program fund. All expenditures from the advanced *practice* registered nurse <del>practitioner</del> service scholarships awarded under this act and shall be made in accordance with appropriation acts upon warrants of the director of accounts and reports issued pursuant to vouchers approved by the executive officer or by a person designated by the executive officer.

Sec. 41. 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, 74-32,132, 74-32,133, 74-32,134, 74-32,135, 74-32,136, 74-32,137 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, 65-6129, 65-6120, 65-6121, 65-6123, 65-6124, 65-6129c, 65-6135, 65-

- 6144, 72-5213, 72-8252 and 74-1106 are hereby repealed.
- 2 Sec. 42. This act shall take effect and be in force from and after its
- 3 publication in the statute book.